



## Department of Health

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October 2016

Dear Colleagues:

I hope you are enjoying the vibrant colors of fall and the cooler temperatures. This month, I'd like to discuss two important health topics: good nutrition and bone health.

**Good nutrition:** The U.S. Food and Drug Administration (FDA) and the American Medical Association recently collaborated on a continuing medical education (CME) video designed to help doctors talk to their patients about using the Nutrition Facts Label to make healthier food choices. Along with patient educational materials, the video is available at [Food Safety and Nutrition Resources for Healthcare Professionals](#) or the [AMA's Education Center](#). Physicians who take the course receive one CME credit.

Discussing nutrition isn't always part of an office visit. But physicians and other health care professionals can play an important role in making sure the nutrition label is understood and appropriately used. The nutrition facts label is one of the best tools for helping consumers improve their diet and health. After 20 years, the FDA recently revised the label to reflect the latest science on good nutrition and its link to chronic diseases such as diabetes and hypertension. Among the changes:

- The introduction of "added sugars" on the label reflects the latest science showing that consuming more than 10% of total daily calories from added sugar can make it difficult to stay within recommended calorie limits.
- The addition of vitamin D and potassium highlights two nutrients that are often deficient in the American diet.
- Updated serving sizes will now reflect what individuals actually consume, not what they should consume. For instance, foods and beverages that are between what was considered one or two servings – such as a 15-ounce can of soup or a 20-ounce soda -- will now list the total calories in the container since most people consume the entire package in one sitting.

The information you impart to your patients can have a significant impact on that person's health and may reduce their risk for chronic disease. I urge all doctors to view the video and consider distributing the educational materials to their patients.

**Bone Health:** According to the National Osteoporosis Foundation, 10 million Americans have osteoporosis, and 44 million have low bone density. Studies have shown that people with certain diseases such as lupus, depression and inflammatory bowel disease may be more prone to osteoporosis. Risk also goes up in people who are thin, smoke cigarettes and drink alcohol. As a result of having osteoporosis, half of all women over 50 will break a bone, while a quarter of all men will do the same. Fractures in older adults can be especially debilitating, leading to more fractures, lifelong disability and premature death.

Preventing osteoporosis requires a combination of good nutrition and regular exercise. A diet for healthy bones should contain low-fat dairy foods, lean protein and a variety of fruits and vegetables. Regular physical activity, especially weight-bearing and strengthening exercises, are also critical.

Doctors can help patients boost bone health by talking to them about their lifestyles. Because women are at greater risk for osteoporosis, the U.S. Preventive Services Task Force (USPSTF) recommends routine screening of bone mineral density for women ages 65 years and older. Men are also at risk, but the USPSTF says the evidence is insufficient for a similar recommendation for men. Screenings may also be required for people who have specific diseases or take certain medications that raise their risk for osteoporosis. Ask older patients who have low bone density or osteoporosis about home safety and encourage them to make homes free of fall hazards such as throw rugs, household clutter and unlit walkways.

Thank you for your attention to these issues. Enjoy the autumn season, and please remember to get your flu shot!

Sincerely,

Howard A. Zucker, M.D., J.D.