

Commentary

Industry needs the intervention, not our kids: A cautionary approach toward the new AAP recommendations and the DGAC 2025

Ashka Naik^{1a}, Angela Carriedo^{2,3}

¹ Research and Policy, Corporate Accountability, ² Public Health, Corporate Accountability, ³ Policy, World Public Health Nutrition Association

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Childhood obesity is again centerstage in 2023, as we examine two developments from public health authorities in the U.S. with multidimensional and long-term implications for Americans. Both aim to address public health issues confronting the American population today, specifically children. One is the announcement of the Dietary Guidelines Advisory Committee (DGAC) for 2025-2030 (Dietary Guidelines for America n.d.) providing guidance for the Dietary Guidelines for Americans; the other is the publication of the American Academy of Pediatrics' (AAP) clinical guidelines to evaluate and treat obesity in children (Hampl et al. 2023).

Our inquiry into these guidelines has yielded questions around their transparency, conflicts of interest, and scientific rigor. We find alignment across both to shift the public narrative, actions, and policies to address obesity by glossing over the overwhelmingly documented determinant of this epidemic: the corporate capture of food systems, nutrition policies, and the politics of health.

THE DGAC 2025-2030: SOMEWHAT DIVERSE, YET QUITE CONFLICTED

While we appreciate the diversity of experiences of some members, we remain alarmed by the continued opaqueness of the selection process and the conflicts of interest of some of the selected members. From publicly available information, we found members with ties to companies producing breast milk substitutes, ultra-processed foods, and weight loss drugs. For example, Dr. Fatima Cody Stanford has publicly stated the value of weight loss drugs in treating childhood obesity (Watto, n.d.) and apparently consulted with companies in the business of weight loss drugs (Kolata 2023). Dr. Heather Eicher-Miller has been an advisor to a leading infant formula manufacturer (Purdue University 2023). Dr. Jennifer Orlet Fisher has received industry honors from entities including the International Life Sciences Institute (an industry-funded front group) (Jacobs 2020), Mead Johnson, and Dannon (Temple University 2023), and

has connections with The Obesity Society, funded by Novo Nordisk and Lilly, corporations that sell weight loss drugs (Obesity Week 2023). Some members have links to the Academy of Nutrition and Dietetics, exposed for having "a record of quid pro quos with a range of food giants" (Carriedo et al. 2022; Perkins 2022).

THE AAP GUIDELINES: THE BUSINESS OF OBESITY AND SHAKY EVIDENCE

Similarly, the new AAP guidelines, imprecisely stating the strength of the evidence used (Politics 2023), focus on behavioral, pharmacological, and surgical interventions for school-aged children; perhaps explained by its authors' and AAP's deep ties with the pharmaceutical industry.

Media stories on how problematic specific recommendations are already exist (Sole-Smith 2023), although articles like "Why Experts Are Urging Swifter Treatment for Children With Obesity" may compel the public to believe childhood obesity is mainly a genetically driven condition (Kolata 2023). As AAP propounds the use of weight loss drugs, it also takes money from pharmaceutical corporations like Abbott, Merck, GlaxoSmithKlein, and Novo Nordisk (American Academy of Pediatrics n.d.), many of which are profiting from these drugs. Novo Nordisk received FDA approval for a new weight loss treatment for children just days before the guidelines' launch ("FDA Approves Once-Weekly Wegovy® Injection for the Treatment of Obesity in Teens Aged 12 Years and Older" 2022). Even some committee members seem to have taken money from drug companies in recent years (Open Payments 2023b, 2023a).

A further concern is that both pharmaceutical and surgical recommendations are largely based on "Grade B," "Grade C," or "moderate strength" evidence (Hampl et al. 2023). And, where "it was not possible to identify sufficient evidence, recommendations are based on the consensus opinion of the subcommittee members," (Skinner et al. 2023) some of whom also have had potential ties with pharmaceutical companies (Open Payments 2023b).

a corresponding author: ashka.naik@gmail.com

We are not positing that bias is necessarily present because of these perceived or potential conflicts. However, it is noteworthy that these conflicts are not fully disclosed in the “competing interest” section, despite the claim that an “independent review for bias was completed in the case of the American Academy of Pediatrics” (Hampl et al. 2023). How bias-free this “review for bias” was, one can only wonder.

The notion that the obesity crisis can be tackled by pharmacological responses, prescriptions for exercises, or behavioral therapies for children is at best a wishful thinking and at worst a tactic to help the ultra-processed food industry relegate its responsibility in fueling this epidemic to parents, who in turn are expected to provide substantial funds to drug companies and healthcare professionals. To

seriously address the health catastrophe the obesity epidemic poses to Americans today, urgent action is needed to appoint independent experts and advance science in the public interest, not backed by the food or drug industries. Industry itself needs an intervention so it does not exploit the public health crisis of childhood obesity for its profit.

CONFLICT OF INTERESTS

The authors declare no conflict of interest.

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