New York State Academy of Family Physicians

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of
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Testimony Before the
Senate Standing Committee on Health
On Food Policy in New York State
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Good morning Chairman Duane and Members of the Senate Standing

Committee on Health. My name is Mark Krotowski and I am the President of the New

York State Academy of Family Physicians and a Brooklyn-based family physician. I

greatly appreciate the opportunity to testify today related to food policies in New York

State and their impact on public health and our patients. As background, the

Academy represents over 4,300 physicians, students and residents in family medicine

across the State.

First, I would like to take this opportunity to commend you, Chairman Duane for your leadership and interest in this area as evidenced by holding today's hearing and through your sponsorship of legislation to require chain restaurants to post the caloric content in the food and beverages sold, on menus and menu boards and to ban the use of trans fats in restaurants. The Academy is strongly supportive of both of these measures as well as the proposed syrup excise tax to impose an additional tax on sodas and other sugared beverages, including in the FY 2010-11 Executive Budget.

We see all three as effective measures to reduce and prevent obesity among children

and adults in our state and to help make marked improvements in the overall health of New Yorkers.

Obesity is a national epidemic. The number of overweight children has nearly tripled over the last four decades in the United States, and has become the second leading cause of preventable death, behind tobacco. Overweight adolescents have a 70% chance of becoming overweight or obese as adults and obesity is a known risk factor for diabetes, cardiovascular disease, hypertension, cancer and various other serious and debilitating diseases. We are now seeing adult diseases showing up in children. For example, more children have Type II diabetes than ever before, a type that once was almost entirely limited to adults.

Recent studies have found that New York spends more than \$9.5 billion each year to treat obesity-related health problems and New York has been ranked as having the second-highest level of spending in the nation on obesity-related health care.

As family physicians, we provide care to patients of all ages and often begin seeing patients as children and care for them throughout their lives. We are deeply concerned about the increased prevalence and severity of childhood and adolescent obesity. Children must eat healthier diets, be more physically active and we must motivate them by example, to adopt healthier lifestyles.

Major government interventions like smoking restrictions, tobacco taxes, mandated seat belt usage, fluoridated water and vaccinations have been successful in improving and protecting the public's health. Proposals on posting caloric content, banning trans fats and increasing the sugared beverage tax are not different in their purpose and we believe will be just as successful in helping the State to effectively

turn the tide on childhood and adult obesity and enable our residents to live long, productive and healthy lives.

Calorie Labeling

Legislation to require chain restaurants to disclose the calorie content of foods and beverages sold on menus and menu boards will significantly improve the ability of New Yorkers to make informed decisions about meal choices when they eat out. It can be very tough to know how many calories are in the items you order. While some restaurants provide nutritional information on a website or in pamphlets, consumers deserve to have the calorie counts posted and available at the point of sale when placing an order.

Even the most nutrition-conscious among us might have trouble figuring out the lower calorie options on some menus. For instance, a honey bran raisin muffin at a popular coffee chain is listed at 480 calories, more than twice as many calories as a glazed donut at 230 calories.

People are eating out more often than ever before. This trend is contributing to the obesity epidemic because we know that people consume more calories when eating out than when eating at home. Giving consumers more information can make a difference.

A growing number of states, counties and other localities including Maine,
Massachusetts, California, New York City, and Westchester, Albany, Nassau, Suffolk
and Ulster Counties, Philadelphia and most recently New Jersey have adopted calorie
labeling requirements. Many more have proposals pending. New York City's
regulation has been in effect since March of 2008 and Westchester's law took effect in
May of 2009. The other localities in New York have laws that will be effective in 2010.

Although these calorie labeling ordinances have only recently been enacted, some studies have already been conducted. The studies suggest that people will order meals with fewer calories if they are presented with calorie information at the time they order. For instance, a recent study by researchers at Stanford University who analyzed 100 million receipts over 14 months at Starbucks found that when calories were posted prominently, the average number of calories per transaction fell by 6%. Over the course of a week, a 6% reduction in calories each time a person eats out can really add up. Further, the study found that for people who typically purchase more than 250 calories, they cut the calories by even more-26%.

Another study published in the American Journal of Public Health in August of 2008 found that New York City fast food customers who saw calorie information displayed purchased *52 fewer calories* than those who didn't see the information.

Over the course of a year, this reduction could result is a loss of over two pounds per person.

Anecdotal evidence has also shown that the restaurants in localities where calorie posting is mandatory were almost 60% more likely to offer low-calorie options than restaurants that were not. Also, offering healthier foods and posting calorie contents does not appear to be affecting overall restaurant sales.

Based on the experience right here in New York, the New York City regulations and Westchester law have been easy to implement, have high restaurant compliance rates and the ordinances are extremely popular among consumers. At present, approximately 60% of the state's population is now living in a region that either already has a law in effect or where a policy will be effective soon. Further, last June the Assembly passed legislation to require calorie labeling in chain restaurants statewide, which we support.

The Academy strongly urges both the Senate and Assembly to pass companion legislation this session to require calorie labeling on chain restaurant menus and menu boards. We believe that such a measure would be strongly supported by New York residents. In fact, a Zogby poll which was conducted in 2008 found that 80% of New Yorkers said that they support calorie labeling.

We should also point out that if enacted, the Senate and House national health care reform proposals both include provisions to require chains with more than 20 outlets to post calories on menus. While we are very supportive of this measure on the national level, it will likely not take effect for several years. As a result, other states are currently considering the passage of a statewide measure to ensure that this valuable information is provided to residents this year. In fact, New Jersey's Legislature just recently passed legislation to do so. We would recommend that New York consider this approach to provide all New Yorkers with access to useful calorie information when eating out at chain restaurants so they are better informed on what they are purchasing and to assist them with make healthier decisions when eating out with their families.

Trans Fat Ban

The Academy is also supportive of legislation to prohibit restaurants from utilizing any artificial trans fats in the preparation or cooking of any food item and from serving any food containing artificial trans fats.

Trans fatty acids, also known as trans fats, increase blood levels of low density lipoprotein (LDL), known as "bad" cholesterol, while decreasing levels of high density lipoprotein (HDL or "good" cholesterol), and are linked to coronary heart disease. While small amounts of naturally occurring trans fats occur in dairy and meat products, the great majority are artificially produced during "hydrogenation," when

vegetable oils are processed and made more solid or into a more stable liquid.

Artificial trans fats are most common in shortening, fry oils (used for french fries, doughnuts and other deep-fried foods) and commercially baked products (such as cookies, crackers, pastries and pies).

According to the Institute of Medicine, there is no known health benefit and no safe level of consumption of artificial trans fats. Further, increasing intake of trans fats by just 2% can increase a person's risk for a heart attack or other cardiovascular problem by as much as 23%.

In 2006, concerns about the links between trans fats and incidents of heart disease prompted New York City to ban the use of trans fats in restaurants. Following New York City's lead, other states like California and localities in and outside New York have enacted measures to ban the use of trans fats in restaurants including Albany County NY and Philadelphia. While the California law and those in other areas have only recently taken effect, New York City's ban has been fully in effect since 2008 and the experience has been positive and the ban is working well.

According to New York City officials, total saturated fat and trans fat in french fries have decreased by more than 50 percent in New York City restaurants. Overall, the use of trans fats for frying, baking or cooking and in spreads declined from 50 percent to less than 2 percent. Restaurants have been able to find alternatives to using trans fats and the food tastes just as good. Restaurants' fears that diners would protest or that the ban would affect business didn't materialize.

For these reasons, the Academy strongly urges New York State to follow the lead of New York City and at least twelve other jurisdictions by banning trans fats in all restaurants statewide to ensure that all residents are protected from the very harmful effects of trans fats when eating out.

Syrup Beverage Excise Tax

The Academy has long supported taxes on tobacco products because experience has shown that increased taxes on cigarettes and other tobacco products result in increased quit attempts, marked decreases in tobacco use and the prevention of young people from starting to smoke.

Following the same logic, the Academy has resolved to support the Executive Budget proposal to impose an excise tax on beverage syrups and soft drinks. Similar to cigarettes, price influences food-purchasing behavior. Numerous studies have found that an increase in sweetened beverage and/or soda consumption is associated with increased weight gain, obesity and the related health problems. For instance, each additional 12-ounce soft drink consumed per day by children increases their odds of becoming obese by 60%. High soft drink consumption increases risk of diabetes by 83% in women.

Conversely, reducing consumption of sweetened beverages has been shown to reduce weight and weight gain, thereby decreasing the potential for health complications associated with overweight and obesity. Sweetened beverages like soda are discretionary items in diets; they provide calories but no essential nutrients.

According to the Governor's office, increasing the price of sugar-sweetened beverages by approximately 17% is estimated to reduce consumption by 10% and would raise \$450 million for New York State this year and almost \$1 billion when fully annualized. Consumption of sweetened beverages varies widely across the population. Those who consume higher amounts of sweetened beverages are more sensitive to price increases and more likely to reduce consumption as a result of price.

In a Norwegian study, increasing the price of soft drinks by almost 11% was estimated to decrease consumption by nearly 7% in the lowest consumption group, by

17% in the highest consumption group, and by an average 9.5% overall. Increasing the price by about 27% was associated with a drop in consumption of 17% in the lowest use group, 44% in the highest use group, and an overall 24% reduction in consumption across the population.

In a U.S. study of low-income households, a 10% increase in the price of soft drinks was associated with an 8% reduction in consumption. Americans consume an average of 36 gallons of sugar-sweetened soft drinks annually. A 5% reduction in consumption would reduce that to 32 gallons on average, saving approximately 3,000 calories or just under one pound a year per person. Over a 10-year period, this modest level of reduction in consumption would save around 10 pounds. If the average American drank one less sugar-sweetened soda per week, they would save around 7,000 calories or about 2 pounds a year.

The Academy strongly urges the Senate's support for the imposition of a tax on sugar-sweetened beverages in the FY 2010-11 State Budget. We see such a measure as a win-win for the state, helping to significantly impact and reduce the alarming rates of obesity and overweight among our residents while at the same time raising much-needed revenue. Further, we would recommend that the revenue that would be raised be used to support obesity prevention efforts and other health initiatives in New York.

In closing, the Academy greatly appreciates this opportunity to present our views on these three important food policies. We look forward to partnering with you and your colleagues in the Senate to advance meaningful food policies and other important health initiatives this session.