



## Reforming the U.S. Dietary Guidelines for Americans (DGA) for a Metabolically Broken Nation: A Call to Action for the Inclusion of a Low-Carbohydrate Diet

### Summary

Since the DGA launched in 1980, obesity rates have skyrocketed, and metabolic disease is now the norm: over 75% of U.S. adults are overweight or obese; 93% exhibit metabolic dysfunction; and nearly 30% of teens have prediabetes. Evidence links metabolic dysfunction not only to chronic physical diseases but also mental illness, suggesting that common underlying biological pathways are driving both epidemics. The current DGA, recommending 45-65% of calories from carbohydrates, represents a radical departure from prior eating patterns, reflects flawed science, and fails to meet the needs of our metabolically vulnerable population. We urgently need 1) **low-carbohydrate dietary options** that emphasize healthy whole proteins and fats, 2) a **reevaluation of the cap on saturated fat**, and 3) a **focus on whole food nutrition** that protects the mental and physical health of children.

### Why Reform is Urgent

- **Violation of the National Nutrition Monitoring Act:** The DGA does not include a dietary option appropriate for those living with metabolic disease, now a majority, thereby violating its statutory mandate to serve all Americans.
- **Children Are on the Front Lines:** American children on average consume 67% of their calories of from ultra-processed, mostly high-carbohydrate foods leading to rising childhood obesity, type 2 diabetes and a variety of mental health conditions. Early dietary patterns shape lifelong health trajectories.
- **Outdated Macronutrient Guidelines:** The DGA's recommended dietary patterns, by emphasizing whole grains and other high-carbohydrate foods over healthy fats, have precipitated a carbohydrate addiction crisis, worsening insulin resistance and increasing chronic disease. Furthermore, the DGA's limits on saturated fat are not supported by systematic reviews of the scientific literature.

### The Science Is Clear

- **Low-Carb Diets Work:** Ample evidence shows low-carbohydrate and ketogenic diets can rapidly reverse type 2 diabetes and obesity, even in children, and eliminate seizures even when medications fail. Emerging evidence demonstrates they can also be used to address a range of other metabolic, psychiatric and neurological conditions.
- **Food Addiction:** Evidence suggests that ultra-processed foods activate brain reward pathways that drive addictive behaviors, and that low-carb diets reduce those cravings.
- **American Diabetes Association (ADA) Endorsement:** The ADA now recognizes low carbohydrate diets as the most effective dietary pattern for managing type 2 diabetes.

### Policy Recommendations for 2025-2030 DGA Reform

1. **Incorporate a low-carbohydrate option** for metabolically vulnerable people.
2. **Remove the cap on saturated fats.**
3. **Prioritize whole foods.**



## Why It Matters

The DGA influences billions in federal food programs—school meals, SNAP, WIC, and military rations— and shapes dietary norms nationwide, affecting food in American homes, healthcare facilities, retirement homes, and prisons. Ignoring America's metabolic crisis locks future generations into chronic disease. The 2025-2030 DGA review is a crucial chance to **align federal nutrition policy with modern science**, reduce carbohydrate addiction, and give Americans—especially children—their best chance at lasting metabolic and mental health.

