

SUBJECT: Higher Regulatory Standards for the Dietary Supplement Industry

SUBMITTED BY: Student Association of the ACOFP on behalf of Brett Platis, OMS IV, Texas College of Osteopathic Medicine

REFERRED TO: 2022 American College of Osteopathic Family Physicians (ACOFP) Congress of Delegates

RESOLUTION NO. 17

- 1 WHEREAS, dietary supplements are defined as “products taken by mouth that contain a dietary
2 ingredient” and include “vitamins, minerals, amino acids, and herbs or botanicals, as well as
3 other substances that can be used to supplement the diet”¹; and
- 4 WHEREAS, the dietary supplement industry is rapidly growing, with around 150 million persons in the
5 US reportedly using dietary supplements, over 75% of users claiming supplement use on a
6 daily basis, 10% claiming to take more than 5 supplements per day², and many users taking
7 supplements instead of prescription drugs or over-the-counter medications; and
- 8 WHEREAS, the dietary supplement industry has successfully lobbied for less regulation, resulting in
9 dietary supplement manufacturers being subject to less stringent guidelines regarding product
10 manufacturing, safety, and labeling^{3,4}; and
- 11 WHEREAS, manufacturing and distribution rules for dietary supplements are less strict than those for
12 FDA approved drugs, with the FDA not being authorized to review dietary supplements for
13 safety or effectiveness before they are marketed⁵; and
- 14 WHEREAS, purchased dietary supplements often differ dramatically from those tested or researched
15 due to poor production oversight and quality control requirements^{6,7}; and
- 16 WHEREAS, dietary supplements may be dangerous in excess, interact with other medications, or pose
17 significant risks in patients with certain medical problems^{8,9}; and
- 18 WHEREAS, labeling for dietary supplements is often incorrect, with many products illegally containing
19 prescription drugs or other ingredients not listed on the label which may be unsafe^{3,10}; and
- 20 WHEREAS, most dietary supplements haven’t been tested in pregnant women, nursing mothers, or
21 children¹¹; and
- 22 WHEREAS, there are no requirements for manufacturers of dietary supplements to show clinical
23 efficacy before production and distribution, and federal law does not require claims about said
24 effectiveness be accurate or truthful before appearing on the product¹²; and
- 25 WHEREAS, there is insufficient evidence to support the use of most dietary supplements on the
26 market, with extensive researching failing to demonstrate the efficacy of numerous
27 supplements in disease prevention^{13,14}; now, therefore be it

- 28 RESOLVED, that the American College of Osteopathic Family Physicians (ACOFP) encourage the US
29 government and FDA to require companies to clearly communicate the clinical efficacy of
30 dietary supplements; and, be it further
- 31 RESOLVED, that the ACOFP encourage the US government and FDA to enforce more stringent
32 regulation regarding the production, labeling, and use of dietary supplements; and, be it
33 further
- 34 RESOLVED, that the ACOFP support legislation to improve transparency in advertising to patients
35 regarding supplement safety and efficacy; and, be it further
- 36 RESOLVED, that the ACOFP promote education about the health risks regarding excess dietary
37 supplement use or substitution for prescription medication; and, be it further
- 38 RESOLVED, that the ACOFP discourage healthcare providers from using dietary supplements as a
39 means of curing or mitigating medical disease unless clinical efficacy is proven; and, be it
40 further
- 41 RESOLVED, that the ACOFP encourage healthcare providers to educate their patients regarding
42 marketing practices of the dietary supplement industry.

FINAL ACTION: DISAPPROVED as of March 16, 2022

Explanatory Statement from Committee: Dietary supplements do not fall under drugs as they are under foods; therefore, to make any changes to labeling and efficacy would require a policy change through the legislation to move supplements under drugs and medication. This resolution addresses multiple intentions. Due to the multiple nonspecific resolves pertaining "Higher Regulatory Standards," we recommend the author rework this resolution to address in multiple resolutions. Furthermore, there is concern regarding potential prescribing restrictions and legal implications for off-label treatments or other modalities with limited evidence, such as some facets of osteopathic manipulative treatment (OMT).

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