

Foodomics Database and Dietary Supplements Label Database



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Abstract

For Precision Ketogenic Therapy (PKT), documented precise composition of supplements is necessary to implement the PKT diet prescription. We gather this nutrient information by physically going to stores and recording nutrition data labels. However, manufacturers may make changes to their products over time, so these nutrient runs need to be done periodically to keep the database updated. The Dietary Supplement Label Database (DSLD) developed by the Office of Dietary Supplements (ODS) at the National Institutes of Health (NIH), catalogs all information printed on labels of dietary supplement products sold in the United States. Our goal was to determine whether the information on the ODS website accurately reflects the data obtained from local stores. If this held true, the ODS website could be used as an alternative and reduce the need to continuously collect Foodomics data from local stores.

We gathered data in January and February 2022 from products in local markets. Comparison of these data with what is in the ODS database showed differences in nutrient values for several products. This suggests that the ODS website cannot be the only source of vitamin and mineral data because it is crucial to have the exact nutrient amount that patients would be consuming from the products purchased in stores. However, the ODS website can be a reliable resource to find new supplement options that may be available in local markets when our frequently used supplements do not meet a patient's needs.

Methods

To collect the data for this project, we first referenced a list of dietary supplements that are currently in use for PKT patients in the Borum Lab. For each product on this list, we then performed 'nutrient runs' to the retailer which sold these items and photographed the label, price, control number, front of the product, package amount, and manufacturer. With these pictures, we put the supplements' information into a spreadsheet. Once this was completed for each of the dietary supplements, we referenced the Dietary Supplement Label Database (DSLD), provided by the Office of Dietary Supplements (ODS) and researched the nutritional information for the supplements of interest. The nutritional data provided by the ODS was then entered into the same spreadsheet to conduct an analysis.

Results

After comparing the data collected from the nutrient runs with the data provided by the ODS website, we found a notable number of differences between the two sources, so the ODS is not reliable enough to use as a replacement for nutrient runs. In the study of neuroscience, it is crucial that the exact amount of vitamins and minerals is known so proper treatment can be executed. As displayed by the graph under the data section, the nutritional information was not identical for many of the supplements of interest. However, we did find that the ODS includes data for many alternative supplements that could be used for PKT patients. Lab members can use the ODS to discover different supplement options that may be better suited for patients and their specific needs.

Discussion

Since some entries from the ODS fail to match the nutritional information available in stores, the ODS cannot replace nutrient runs. The differences attribute to the ODS's failure to update many supplements' nutrient data for many years. For example, Centrum Liquid was last updated in the database in 2013, and there were multiple discrepancies in this data. The ODS does contain similar products not currently used by patients. Therefore, the ODS may help identify alternative supplements to recommend precise nutrients to patients. Although the database would work well to identify precise nutrients available for patients, lab members would still need to collect the supplements' nutrition facts from their local market to confirm the nutrients ODS data was recently updated.

Data









