

**Christina A. Roberto, PhD**

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*Presidential Professor of Health Policy*

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October 28, 2025

The Honorable Elder A. Vogel Jr.  
Chair, Agriculture & Rural Affairs  
Senate District 47  
286 Main Capitol  
Senate Box 203047  
Harrisburg, PA 17120  
[evogel@pasen.gov](mailto:evogel@pasen.gov)

Ms. Lily Guthrie  
Executive Director  
Pennsylvania Senate Agriculture and Rural Affairs Committee  
[lguthrie@pasen.gov](mailto:lguthrie@pasen.gov)

Re: Support for Senate Bill 629 – An Act amending Title 3 (Agriculture) of the Pennsylvania Consolidated Statutes, in food protection, providing for labeling of food products with gluten-containing grains

Dear Senator Vogel and Ms. Guthrie:

We are writing to express our strong support for Senate Bill 629: An Act amending Title 3 (Agriculture) of the Pennsylvania Consolidated Statutes, in food protection, providing for labeling of food products with gluten-containing grains. We are respectfully requesting that you bring Senate Bill 629 up for a vote in the Agriculture & Rural Affairs Committee. This bill would make a meaningful difference in the lives of more than 3 million Americans, including an estimated 130,000 Pennsylvanians, living with Celiac Disease by requiring that all gluten-containing food products manufactured, sold, or distributed in the Commonwealth of Pennsylvania: (1) specify the content of gluten in the food product and (2) include a statement that food products containing gluten may cause adverse health effects in individuals with Celiac Disease or certain food sensitivities or intolerances.<sup>1,2</sup>

These policy reforms are long overdue and align with proposals put forth in the White House’s Make Our Children Healthy Again Strategy Report (MAHA Strategy Report), which included language on Celiac Disease and gluten food allergen labeling as one of the 128 initiatives outlined therein:

“Food Allergies: FDA will develop guidance on diagnostics and treatments for food allergies. FDA will also make recommendations about requiring transparency in disclosures of ingredients that

<sup>1</sup> <https://celiac.org/about-celiac-disease/what-is-celiac-disease/>

<sup>2</sup> Sahin Y. Celiac disease in children: a review of the literature. World J Clin Pediatr. 2021 Jul 9;10(4):53-71. Doi: 10.5409/wjcp.v10.i4.53

impact certain health conditions, such as gluten for those with Celiac disease, and other established food allergens.”<sup>3</sup>

Pennsylvania can pave the way for national policy with Senate Bill 629.

We are researchers at the University of Pennsylvania, where we lead the Penn Center for Food & Nutrition Policy. Our campus houses the Children’s Hospital of Philadelphia’s (CHOP) Center for Celiac Disease, which treats more than 3,000 children with this disease.<sup>4</sup> Celiac Disease is typically diagnosed in the first or second decade of life and, with repeated exposures to gluten, can cause severe complications in childhood, including diabetes, nutrient deficiencies, depression, nervous system disorders, and gastrointestinal cancers.<sup>3,4</sup> At this time, there is no cure for Celiac Disease. **The only way to manage the disease is to eliminate gluten from the diet.**<sup>5</sup> Eliminating gluten is very difficult as it is naturally occurring in common foods (wheat, rye, barley). Additionally, wheat, barley and rye contaminate crops (e.g., oats) during growing, harvesting and processing.<sup>6</sup> Requiring that all U.S. foods made with gluten-containing grains (wheat, barley, rye, and oats) be expressly labeled would protect American children with Celiac Disease by reducing inadvertent exposure to this harmful allergen.<sup>7</sup>

Currently, the U.S. Food and Drug Administration (FDA) requires the labeling of wheat, but not other grains containing gluten (barley, rye, and oats).<sup>8</sup> The FDA also defines “gluten-free” for food labeling, but this is a voluntary claim.<sup>9</sup> This means it is impossible to know whether products without a “gluten-free” claim contain gluten, or if they are gluten-free but simply unlabeled. Although “gluten-free” labels have helped people with Celiac Disease, many still experience regular, inadvertent exposure to gluten, causing acute illness and long-term complications of the disease.<sup>10,11</sup> According to Beyond Celiac, 44% of people with Celiac Disease who follow a strict gluten-free diet still get glutened once a month.<sup>12</sup>

We have studied the effects of food labels for more than two decades and the evidence is clear: mandatory food labels help consumers make informed choices and keep them safe.<sup>13</sup> Because labels simply provide information, policies requiring them on food packages tend to have broad public support.<sup>14</sup> As evidence, 87 other countries, including Mexico, Canada, and much of the European Union, already require that gluten-containing ingredients be declared as food allergens on packaged food labels.<sup>15</sup>

In August, Jax Bari, age 12, was invited twice to the White House to inform the MAHA Commission of his common-sense solution to better protect kids like him with gluten allergies. Jax’s solution became one of the 128 initiatives in the MAHA Strategy Report. We understand that you both met with Jax in

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<sup>3</sup> <https://www.whitehouse.gov/wp-content/uploads/2025/09/The-MAHA-Strategy-WH.pdf>

<sup>4</sup> <https://www.chop.edu/centers-programs/center-celiac-disease>

<sup>5</sup> <https://www.chop.edu/conditions-diseases/celiac-disease#treatment>

<sup>6</sup> [www.celiacjourney.com/oats](http://www.celiacjourney.com/oats)

<sup>7</sup> FAO and WHO. 2022. Risk Assessment of Food Allergens. Part 1 – Review and validation of Codex Alimentarius priority allergen list through risk assessment. Meeting Report. Food Safety and Quality series No. 14. Rome.

<sup>8</sup> <https://www.fda.gov/food/buy-store-serve-safe-food/food-allergies-what-you-need-know>

<sup>9</sup> <https://www.fda.gov/food/nutrition-food-labeling-and-critical-foods/gluten-free-labeling-foods>

<sup>10</sup> Pjetraj D, Damiani D, Monachesi C, et al. Prevalence of acute reactions to gluten contamination of the diet in children with celiac disease. *Front Pediatr.* 2025 Sep 10:13:1635944. Doi: 10.3389/fped.2025.1635944

<sup>11</sup> Silvester JA, Comino I, Rigaux LN, et al. Exposure sources, amounts and time course of gluten ingestion and excretion in patients with coeliac disease on a gluten-free diet. *Alimentary Pharmacology and Therapeutics.* 2020;52(9):1469-1479.

<sup>12</sup> Beyond Celiac. (2022). 2022 Celiac Disease Community survey. [Unpublished raw data]. Accessed October 24, 2025. Available: <https://www.beyondceliac.org/wp-content/uploads/2022/05/2022-Beyond-Celiac-Survey-1.pdf>

<sup>13</sup> Roberto CA, Ng SW, Ganderats-Fuentes M, et al. The influence of front-of-package nutrition labeling on consumer behavior and product reformulation. *Annu Rev Nutr.* 2021 oct 11;41:529-550. Doi: 10.1146/annurev-nutr-111120-094932

<sup>14</sup> [https://www.cspinet.org/sites/default/files/2023-04/FOPNL%20Public%20Opinion%20Fact%20Sheet\\_final.pdf](https://www.cspinet.org/sites/default/files/2023-04/FOPNL%20Public%20Opinion%20Fact%20Sheet_final.pdf)

<sup>15</sup> <https://farrp.unl.edu/IRChart>

Harrisburg in June 2025 when he asked for your support. Penn Medicine has been proudly working with Jax and the Bari Family to develop treatments for Celiac Disease. Until new treatments are available, we agree with Jax Bari and Celiac Journey that improved gluten labeling requirements will meaningfully improve safety and quality of life for patients with Celiac Disease.

Thank you for considering this critical policy reform and for your dedication to improving the lives of Pennsylvanians.

Sincerely,



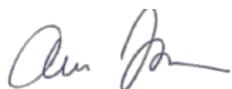
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*This letter represents our professional views and not those of the University of Pennsylvania or Penn Medicine.*