Dietary supplements are widely used in the United States. Estimates from the National Institutes of Health Office of Dietary Supplements (ODS) are that more than 50% of adults and 33% of children consume these products on a regular, often daily, basis. These data from the National Health and Nutrition Examination Survey (NHANES) are in line with spending on dietary supplements by consumers of nearly US$40 billion per year. Despite this widespread use, it has been difficult to gather reliable evidence about the health effects, both positive and negative, of dietary supplement ingredients. Generally speaking, research has been aimed at understanding mechanisms of action – usually in laboratory studies – or at human intervention studies, where an ingredient (or combination of ingredients) has been tested against some chronic disease outcome such as incidence of heart disease or cancer. The ODS developed an Evidence-based Review Program to assess the evidence for efficacy and safety of many dietary supplement ingredients commonly consumed in the US: B-vitamins, multivitamin/mineral products, soy, omega-3 fatty acids, probiotics, vitamin D, calcium. These assessments have been performed by experts in systematic review methodology and have resulted in more than 50 publications. ODS has also recognized the importance of enhancing the availability of systematic review (SR) tools for the research community and commissioned the publication of another 10 reports on incorporating SR into nutrition. This information is available on the ODS website (https://ods.od.nih.gov/Research/Evidence-Based_Review_Program.aspx).

In general, the observed health effects in human studies have been small and may only have been evident in subsets of the population. Among the challenges recognized as a result of the ODS SR experience are: the wide variety of formulations and products that may have been used in individual studies; the lack of consistent information about baseline nutritional status; the wide array of intervention strategies (e.g., different doses, timing, or endpoints); and usually no information about possible differences in response (e.g., ethnic or genetic differences). Such findings should prompt further research.

Finally, ODS actively supports the incorporation of evidence-based approaches in public health policy making, including setting Dietary Reference Intake values. A publication from ODS (Brannon PM, Taylor CL, Coates PM. Use and applications of systematic reviews in public health nutrition. *Annu Rev Nutr* 2014;34:401-19) describes this.