Consultation response from the National Heart Forum	
Consultation:	Nutrition and health claims made on foods – COM (2003) 424 final – 2003/0165 (COD)
Consulting body:	European Commission
Date:	October 2003



RESPONSE TO:

A EUROPEAN COMMISSION PROPOSAL FOR A REGULATION OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL ON NUTRITION AND HEALTH CLAIMS MADE ON FOODS – COM (2003) 424 final – 2003/0165 (COD)

October 2003

The National Heart Forum

The National Heart Forum (NHF) is the leading alliance of over 45 organisations working to reduce the risk of CHD in the UK. Member organisations represent the medical and health services, professional bodies, consumer groups and voluntary organisations. Members also include many individual experts in cardiovascular research. Government departments have observer status. The purpose of the NHF is to work with and through its members to reduce disability and death from CHD. Our four main objectives are:

- To provide a forum for members for the exchange of information, ideas and initiatives on coronary heart disease prevention;
- To identify and address areas of consensus and controversy;
- To develop policy based on evidence and on the views of member organisations;
- To stimulate and promote effective action.

The NHF embraces professional, scientific and policy opinion in current issues on CHD prevention. It co-ordinates action to reduce heart disease risk through information, education, research, policy development and advocacy.

INTRODUCTION

The National Heart Forum welcomes the opportunity to comment on the proposed regulation of nutrition and health claims made on food. NHF recognises that health messages can be an effective marketing tool, which can help to improve public nutrition education and change food choices. A key recommendation of the NHF has therefore been that nutrient and health claims need to be regulated in order to prevent unsubstantiated claims mis-leading the public¹.

NHF is a member of the European Heart Network and fully supports the recommendations made its paper *'Nutrition and Health Claims: a European Heart Network Position Paper'* which was published in 2001. In particular, NHF supports the paper's recommendation that the fundamental principle in EU policy on nutrition and health claims should be the protection and promotion of public health.

NHF has been working closely with the EHN and supports the following proposals to strengthen the public health emphasis of the Commission's proposed regulations on nutrition and health claims, which NHF and EHN feel is weak:

Chairman: Sir Alexander Macara FRCP, FRCP Ed, FROSP, FFPHM, FFOM, FMedSol, Hon DSc Vice-Chairman: Professor Klim McPherson MA, PhD, Hon MFPHM, FMedSol Vice-Chairman: Professor David Wood MSc, FRCP, FFPHM

Honorary Treasurer: Ms Maggie Sanderson MSc, SRD

Honorary Secretary: Lord Nicolas Rea MA, MD, FROSP, DPH

¹ National Heart Forum. 1999. Looking to the future: Making coronary heart disease an epidemic of the past. London: The Stationery Office

Chief Executive: Mr Paul Lincoln BSc, PGCEd, PGDiphEd, PGDMS, Hon MFPHMed

1. Article 1 - Subject matter and scope

Recommendation:

Change article 1.1 to: 'This Regulation is intended to harmonise the provisions laid down by law, regulation or administrative action in Member States which relate to nutrition and health claims in order to ensure the effective functioning of the internal market whilst providing a high level of <u>public health</u> and consumer protection.'

Rationale:

NHF believes that the paramount principle in EU policy on nutrition and health claims should be the protection and promotion of public health.

2. Article 2 - Definitions

Recommendation:

Change the definition of a reduction of a disease risk claim to: 'reduction of a disease risk claim means any health claim that states, suggests or implies that the consumption of a food category, a food or one of its constituents significantly reduces the risk of a human disease.'

Rationale:

NHF notes that some food categories, foods and nutrients have been shown to reduce the risk of diseases without necessarily reducing known risk factors for diseases. For example the mechanism by which an increased consumption of fruit and vegetables reduces the risk of cardiovascular diseases (CVD) or cancer is not entirely certain. NHF, therefore, sees no reason for the words 'a risk factor in the development of' in the Commission's proposed definition.

3. Article 3 - General principles for all claims

Recommendations:

(i) Add new sub-paragraph to second paragraph: '(...the use of nutrition and health claims shall not:) <u>e) undermine the protection or promotion of public health'.</u>

Rationale:

NHF recommends that claims should only be allowed if they do not undermine the protection and promotion of public health, particularly in view of the fact that the Regulation would permit the use of disease risk reduction claims, which have hitherto been prohibited.

4. Article 4 - Restriction on the use of nutrition and health claims

Recommendation:

(i) In Article 4.1 (b) add <u>'added'</u> before 'sugars'

(ii) Add 'health bodies' before 'and consumer groups' in the sentence which reads: 'In setting the nutritional profiles, the Commission will seek the advice of the Authority and carry out consultations with interested parties, in particular food business operators, <u>health bodies</u> and consumer groups'

Rationale:

Added (or free sugars) are the major concern of expert bodies who have examined the relationship between diet and health. See for example the recent report of the Joint WHO/FAO Expert Consultation on diet, nutrition and the prevention of chronic diseases². Accordingly we recommend that nutrient profiles should include criteria for added or free sugars rather than all sugars.

Supporting all of Article 4, NHF is particularly pleased with the inclusion of Article 4.1 and feels that this article will give consumers a high level of protection against misleading claims and help to promote public health. NHF suggests that health bodies should also be consulted when developing the nutrient profiles.

5. Article 6 - Scientific substantiation for claims

Recommendation:

Replace Paragraph 1 'Nutrition and health claims shall be based on and substantiated by generally accepted scientific data.' with: 'Nutrition and health claims shall be based on <u>a</u> comprehensive systematic review of all the available scientific evidence relating to the validity of the claim.'

Rationale:

Paragraph 1 in its current form suggests that any amount of 'generally accepted scientific data' would be sufficient to substantiate a claim. For all health and nutrition claims there will be some accepted data which support the claim and some which do not. It is essential that all the available scientific evidence relating to the claim is reviewed before a claim can be said to be substantiated.

NHF also notes that claims cannot be based on or substantiated by data alone. There has, at some point, to be a collection, synthesis and interpretation of data i.e. a review. NHF notes that there are now well-established methods for carrying out reviews of scientific data. Systematic reviews seek to ensure that all relevant data are considered and that only data of adequate quality are used to draw conclusions. Systematic reviews are also carried out according to defined protocols to ensure that they can be reproduced and updated when new data becomes available.

² World Health Organisation (2003) Diet, Nutrition and the Prevention of Chronic Diseases. WHO Technical Report Series 916.

6. Chapter III - Nutrition Claims

Recommendation:

Re-title to: Nutrition Claims and Claims for Other Substances that Have a Nutritional or Physiological Effect.

Rationale:

NHF notes that it would seem to be the intention of the Commission that the Regulation should cover claims for substances other than nutrients which have a nutritional or physiological effect (see in particular Recital (5)). NHF agrees that the Regulation should do so.

Accordingly NHF recommends that Chapter III and the associated Annex, as well as covering nutrition claims, should cover claims for other substances having a nutritional or physiological effect. NHF considers, for example, that Chapter III should cover a claim such as 'containing one portion of fruit and vegetables per serving'. Such a claim, if it could be substantiated, would be useful to consumers seeking to adopt a healthy diet, but should be subject to the same restrictions as nutrition claims.

7. Article 11 - Implied Health Claims

Recommendation:

Delete Article 11 in its entirety

Rationale:

NHF considers that if a claim is evidence-based, true and helps promote public health then it should be allowed. NHF considers that this article would prohibit the use of some claims that are both true and would help promote public health.

In particular Article 11.1(a) would seem to prohibit some useful schemes – such as the green key hole scheme established by the Swedish National Food Administration³ – which aim to signal to consumers which foods – based on their nutrition profiles – are more likely to contribute to a generally healthier diet. NHF considers that healthy diets promote overall good health and well being (and do not just reduce the risk of specific disease) and claims should be allowed to refer to that fact.

Similarly Article 11.1(d) could prohibit some useful schemes run by health charities, such as heart foundations, which aim to signal to consumers which foods might help to reduce the risk of particular diseases.

NHF acknowledges that there would seem to be frequent cases of foods or supplements making claims for psychological and behavioural functions or for slimming or weight control which are unfounded. Nevertheless, NHF considers that if such claims could be substantiated and help promote public health, then they should be allowed.

³ Larsson I et al (1999) Eur J Clin Nutr 33: 776-80 (discussed in A systematic review of the research on consumer understanding of nutrition claims (2003). NHF: Brussels)

8. Article 12 - Health claims describing a generally accepted role of a nutrient or other substance

Recommendation:

Change the title of this article to: 'Health claims describing a generally accepted <u>and well</u> <u>established</u> role of a nutrient or other substance.' Likewise, change the first paragraph of this article to: 'By way of derogation from Article 10 (1), health claims describing the role of a nutrient or of another substance in growth, development and the normal functions of the body, which are based on generally accepted <u>and well established</u> scientific data'

Rationale

Please refer to comments made to Article 6.

9. Annex

Recommendation:

Add criteria for claims for polyunsaturated fat, including claims for n-6 polyunsaturated fat and n-3 polyunsaturated fat, trans fat, carbohydrate, fruit and vegetables.

Rationale:

NHF recommends that nutrition claims on foods for general consumption should be made where there are agreed population dietary goals such as those agreed by the European Commission funded Eurodiet Project ⁴. Accordingly NHF recommends that the Annex should include criteria for making claims for polyunsaturated fat, including claims for n-6 polyunsaturated fat and n-3 polyunsaturated fat, trans fat, carbohydrate and fruit and vegetables.

NHF suggests that where there is no agreed population goal, then nutrition claims should not be made on a food for general consumption. NHF considers that claims for other nutrients should be restricted to nutrients covered by Council Directive 89/398/EEC of 3 May 1989 on the approximation of the laws of the Member States relating to foods for particular nutrition uses ⁵.

⁴ Eurodiet (2001) Eurodiet core report. Nutrition and diet for healthy lifestyles in Europe : Science and policy implications. Public Health Nutrition 4(2A) 265-73.

⁵ Council Directive 89/398/EEC of 3 May 1989, published in the Official Journal L 186 of 30 June 1989 P. 0027 - 0032