## A new food labelling program for the glycemic index

JC Brand-Miller, AW Barclay, T Irwin

## Human Nutrition Unit, University of Sydney, NSW 2006 and Diabetes Australia NSW, 26 Arundel St, Glebe, NSW, 2037

The glycemic index (GI) is a system of ranking carbohydrate-containing foods according to their effect on blood glucose levels. Per gram of carbohydrate, foods with a low GI raise blood glucose levels more slowly than foods with a high GI, and consequently have many potential benefits for people with diabetes or impaired glucose tolerance. Two new research studies published in 2001 demonstrate that lower GI diets are associated with significantly better long term glycemic control in type 1 diabetes (as indicated by lower HbA1c levels) and improved HDL-cholesterol levels. One of these studies also found that flexible low GI dietary advice resulted in better quality of life for children with diabetes than those instructed using the traditional carbohydrate exchange system. Five studies have now confirmed a relationship between GI and HDL-cholesterol levels (higher GI, lower HDL). At least 17 studies have shown that low GI foods are associated with greater feelings of fullness and/or lower energy intakes at subsequent meals, suggesting benefits for weight control.

These recent findings support the United Nations WHO and the FAO's recommendation that the '... glycaemic index be used to compare foods of similar composition within food groups' (1). The NHMRC Dietary Guidelines for Older Australians specifically recommend the consumption of lower GI cereal based foods: 'Eat plenty of cereals, breads and pastas, prefer high-fibre foods and those with a lower glycaemic index' (2).

Despite the recommendations to the general public to use the GI when making food purchasing decisions, there is no uniform system of identifying the GI on food labels. At present, people rely on popular books and handouts prepared by a variety of health services. There is a need to provide incentive for food manufacturers to produce foods, or modify existing foods, to achieve a wider range of lower GI choices in the market-place. A small number of food manufacturers have included GI values on food labels, but the information provided is not consistently presented nor necessarily obtained using standardised methodology.

To overcome these problems, the University of Sydney, Diabetes Australia and the Juvenile Diabetes Research Foundation have developed a set of uniform labelling guidelines in the context of a Nutrition Function Claim to encourage food manufacturers to place the GI on the labels of carbohydrate-containing foods. This program aims ensure that all consumers have access to up-to-date and reliable information at the point of sale – the place where most purchasing decisions are made. Further information is available at www.glycemicindex.com.

- Food and Agriculture Organisation/World Health Organisation. Carbohydrates in human nutrition. Report of a joint FAO/WHO report. Rome 14–18 April 1997. Paper 66, 1998. FAO Food and Nutrition. Department of Community Services and Health.
- 2. National Health and Medical Research Council. Dietary Guidelines for Older Australians. 1999, AusInfo, Canberra, ACT, 2601.