

Seminar summary

Seminar on nutrition labelling and health claims: scientific substantiation and opportunities for harmonization

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Summary of the seminar

Eighty participants from ASEAN, including senior government officials, food scientists, nutritionists, dietitians, consumer educators, industry and marketing personnel attended a **Seminar and Workshop on Nutrition Labelling and Health Claims** in Singapore. The meeting held on 5–6 April 2001 was organized by International Life Sciences Institute (ILSI) South-East Asia (ILSI SEA) in collaboration with the Singapore Nutrition and Dietetics Association (SNDA).

Aimed at promoting the understanding of the process for scientific substantiation, and international and regional regulatory developments, the meeting also explored opportunities for the harmonization of nutrition labelling, and development of nutrition and health claims of food and food components in South-East Asia. Key scientists from the Food and Agriculture Organization of the United Nations (FAO), Thailand, the United Kingdom, Australia, Japan, Malaysia, the Philippines, Singapore and Vietnam shared their expertise and experiences on the development, regulatory process, and implementation of nutrition labelling, and nutrition and health claims in their respective countries. The workshop held on the second day was open to government regulators from the region and invited industry observers.

Seminar highlights

Session 1: Nutrition labelling – international developments and experiences

Ms Annoek van den Wijngaart, of **FAO, Thailand**, in her paper *Nutrition labelling: purpose, scientific issues and challenges*, provided an overview of the objectives of the Codex Alimentarius Commission to protect consumer health, and ensure fair trade practices. The Codex Committee on Food Labelling is responsible for the elaboration of general text on labelling, and the Committee on Nutrition and Foods for Special Dietary Uses works on matters related to nutrition. Close cooperation exists between these two committees in areas of common interest, especially with regard to the definition of claims. Explaining the general requirements for food labelling and the use of claims, Ms van den Wijngaart said that the guidelines on nutrition labelling are based on the principle that no food should be described or presented in a

manner that is false, misleading or deceptive for the consumer, and that any claim made would have to be substantiated. Nutrient declaration is mandatory only when claims are made. The Guidelines for the Use of Nutrition Claims represent an important reference to harmonize the definitions and conditions for nutrition claims at the international level. This has become more important in recent years, because of the large number of such claims on the market and the need for governments to regulate them in order to prevent confusion among consumers. She informed the participants that a guideline on health claims is currently being deliberated by the Codex Committee on Food Labelling. She also emphasized the importance of exchange of information and harmonization (including sub regional) amongst countries.

Ms Margaret Curran of the **Australia New Zealand Food Authority (ANZFA), Australia** shared with participants the *Nutrition labelling experiences of Australia and New Zealand*. She summarized the developments behind the Health Ministers' approval of the Joint Food Standards Code for Australia and New Zealand in November 2000. The result of over 6 years of deliberation, the new Code received extensive input from government agencies, industry and consumers. In drafting the code, great emphasis was placed on making decisions based on sound science, and availability of the latest information. The group also recognized the need for standards to be practical in not imposing unnecessary costs on food manufacturers with an inevitable flow on effect to consumer prices. A number of features of the code relate specifically to labelling and include warning and advisory statements; ingredient lists; date marking; directions for use and storage; nutrition information; legibility requirements; and percentage labelling. One of the key features is the requirement for most packaged foods to bear a nutrition information panel (NIP). Information must be presented on the amount of fat, saturated fat, protein,

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energy, carbohydrate, sugar and sodium. The Joint Code will replace the existing Australian Food Standards Code and the New Zealand Food Regulations, after a 2-year transition period. Over the next 2 years, ANZFA will be working with industry, enforcement agencies, and consumers to help ensure a smooth transition to the Joint Food Standards Code.

Insight into the *UK-EU experience in nutrition labelling* was provided by **Ms Eva Hurt of Leatherhead Food RA, United Kingdom** including the background behind the development of nutrition labelling. Growing public interest in the relationship between diet and health, and increasing public health problems in Europe were among the determining factors which led the EU to propose legislation on nutrition labelling. To guarantee the smooth operations of the internal market and to benefit consumers, nutrition labelling has to be presented in a standardized format. Foods not bearing such labelling are allowed to circulate freely since nutrition information is optional unless a nutrition claim is made. Directive 90/496/EEC covers nutrition labelling of foodstuffs sold to the ultimate consumer as well as mass caterers. For the purposes of the Directive, nutrition labelling is defined as 'information on a label relating to energy and the following nutrients: protein, carbohydrate, fat, fibre, sodium, vitamins and minerals.' The provisions of the Directive are voluntary but become obligatory if the manufacturer makes a 'nutritional claim' which is defined as 'representation and any advertising message which states, suggests or implies that a foodstuff has particular nutrition properties due to the quantity of energy it provides or the level of nutrients it contains.' European Union rules on nutrition labelling have been in place for over 10 years, giving manufacturers the option to declare nutrition information in a standardized format unless a claim is made in which case it becomes mandatory. The Directive is intended to help the consumer choose an appropriate diet, and the information should be simple and easy to understand.

Session 2: Nutrition labelling – a regional overview

Dr E-Siong Tee, Institute for Medical Research, Malaysia reviewed the *Regulatory requirements for nutrition labelling and claims in seven South-East Asian countries*: Brunei, Indonesia, Malaysia, the Philippines, Singapore, Thailand and Vietnam. He based the review on a questionnaire sent to these countries prior to the seminar and published regulations from these countries. With the exception of Malaysia, there is no mandatory nutrition labelling requirement for foods in these countries, except for special categories of foods and when nutritional claims are made for fortified or enriched foods. However, several food manufacturers do voluntarily label the nutritional content of a number of food products. Malaysia has proposed new regulations to make it mandatory to label a number of foodstuffs with four core nutrients: protein, carbohydrate, fat and energy. While the format and requirements differ widely in countries across the region, Malaysia follows the Codex guidelines on nutrition labelling. The Philippines and Thailand have drafted labelling requirements similar to the Nutrition Labeling and

Education Act (NLEA) of the United States. The review showed that several countries have regulations stipulating requirements for nutrition claims. The format for these requirements were, however, not similar to the Codex guidelines, except for the newly introduced regulations in Malaysia which closely follow these international guidelines. Dr Tee also noted that health claims are not specifically permitted under current regulations in the South-East Asia region. Some countries, he said, have specifically prohibited health claims on foods. However, Philippines and Indonesia have permitted several health claims similar to those allowed under the NLEA of the United States. He concluded that there are more differences than similarities in the regulations on nutrition labelling and claims among countries in this region, and expressed hope that this meeting would be a first step in forging closer interaction in the future, with a view toward greater harmonization in the enactment of these regulations.

Providing an *Industry perspective to nutrition labelling*, **Mr Kim-Keat Ng of Kellog Asia, Malaysia** echoed the voice of the industry, which he said was constantly faced with more demanding consumers, more regulations, and fierce competition, ranging from unknown home brands to mega brands. To a limited extent, nutrition marketing has been used as a business strategy for many companies to build a brand name, and create differentiation from competitors. Mr Ng felt that nutrition marketing activities are sorely in need of a set of proper food laws and regulations, or an industry code of practice to create a fair trade environment. The industry welcomes nutrition regulations that are consumer friendly, allowing room for creativity, but with firm guidelines to ensure fair trade. Harmonization efforts among regulators to eliminate technical barriers between countries are highly encouraged.

Session 3: Scientific substantiation and approval of nutrition and health claims

In his presentation on *Biomarkers: yesterday, today and tomorrow*, **Dr Dave Roberts, University of Newcastle, Australia** said that the development of useful and accurate biomarkers for predicting outcomes of food-based interventions is becoming more important, given the emphasis placed on ingredients in foods contributing to disease risk reduction and optimal health promotion. Biomarkers, he said, are biological markers that reflect a step in the process between exposure and disease, and that preferably can be quantified. The promise of biomarkers is that they may provide a more accurate measure of these entities than old-fashioned methods. For example, one may be able to measure levels of protein or DNA adducts instead of judging occupational exposure to a food or ingredient via a questionnaire. The validation of biomarkers passes through two stages, namely the development of the assay itself and its technical properties followed by characterization of the biomarker in the population. The latter characterizes the properties of the biomarker in the population of interest and usually address the prevalence in the population including risk level, exposure, and prevalence

in normal populations; dose–response studies; persistence of the marker and its specificity.

In presenting *New developments in health claims from both the EU and Codex perspectives*, **Ms Eva Hurt** said that interest in health claims is taking on an even greater importance. Health claims, according to their international definition, include any representation that states, suggests or implies that a relationship exists between a food and a constituent of that food and health. The Consensus Document on Scientific Concepts for Functional Foods in Europe identifies two types of health claims that should be allowed, and that are currently discussed at the Codex level: the enhanced function claims and the reduction of disease risk claims. At the EU level, there is a legal void with regard to health claims. European labelling legislation still prohibits attributing to any foodstuff, the property of preventing, treating or curing a human disease or referring to such properties. In the absence of a Directive on claims, EU member states apply different interpretations of the existing labelling legislation with regard to health claims.

The development of national self-regulation systems in EU countries are an attempt to remedy the situation of legal uncertainty. National self-regulatory programs, the development of guidelines for the substantiation of claims by the Council of Europe, and at the Codex level, the European code of Practice by CIAA along with the ongoing debate in Codex Alimentarius may, however, provide powerful tools temporarily. In November 2001, the EU will adopt a proposal for a Directive which shall specify the conditions under which functional and nutritional claims may be made. The Codex Committee on Food Labelling is discussing at Step 3, proposed draft recommendations for the use of health claims. The text defines three categories of claims: nutrient function claims, enhanced function claims and disease reduction claims, and the condition for their use.

Dr Toshio Shimizu, ILSI Japan summarized the *Guidelines and experiences on approval of nutrition and health claims in Japan*. He provided a historical background to the development of regulations for foods with specified health use, commonly known as Foshu. A regulatory system to approve the description of a label regarding the effect of Foshu products on the human body was set up by the Ministry of Health and Welfare in 1991. In November 2000, the Ministry published a proposal for a new regulatory system for foods with health claims (FNC) to be enacted in the first quarter of 2001. The FNC consists of two categories, the first being Foshu, and the second ‘foods with nutrient function claims (FNFC).’ Twelve vitamins (vitamin A, B1, B2, B6, B12, C, E, D, biotin, panthothenic acid, folic acid and niacin) and two minerals (calcium and iron) have been standardized as FNFC. The labelling of these foods is based on scientific evidence and in harmonization with international standards, that is the Nutrient Function Claim approved by Codex in 1997.

Presenting *An industry’s view on functional food claims*, **Dr James How, The NutraSweet Company, Singapore** said that to be successful in commercializing such products, safety and efficacy must first be established, and regulatory approval obtained. Food manufacturers, he said, must be able to communicate the health benefits to consumers through advertising and product labelling. However, these benefits would need to be adequately and appropriately substantiated by scientific evidence before claims can be made. The industry should use the due diligence review process to assess safety, efficacy, and regulatory compliance. Dr How encouraged collaboration with third party independent research organizations and regulatory agencies to obtain scientific consensus and to establish a review process to expedite the approval of scientifically supported claims for labelling and advertising.