

codex alimentarius commission



FOOD AND AGRICULTURE
ORGANIZATION
OF THE UNITED NATIONS



WORLD
HEALTH
ORGANIZATION

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ALINORM 10/33/26

JOINT FAO/WHO FOOD STANDARDS PROGRAMME

CODEX ALIMENTARIUS COMMISSION

*Thirty third Session
Geneva, Switzerland, 5-9 July 2010*

REPORT OF THE 31st SESSION OF THE CODEX COMMITTEE ON NUTRITION AND FOODS FOR SPECIAL DIETARY USES

*Düsseldorf, Germany
2 - 6 November 2009*

Note: This report includes Circular Letter CL 2009/32-NFSDU

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CX

CL 2009/32-NFSDU
November 2009

TO: Codex Contact Points
Interested International Organizations

FROM: Secretariat,
Codex Alimentarius Commission,

SUBJECT: Distribution of the Report of the 31st Session of the Codex Committee on Nutrition and Foods for Special Dietary Uses (ALINORM 09/33/26)

A. MATTERS FOR ADOPTION BY THE 33rd SESSION OF THE COMMISSION:

Draft Standards at Step 8 of the Procedure

1. Draft List of Methods for Dietary Fibre including the revised footnote 1 of definition of dietary fibre (paras 34-49, Appendix II).

Governments and interested international organizations wishing to submit comments on the above document, including the implications they may have for their economic interest, should do so in writing, in conformity with the *Procedure for the Elaboration of Codex Standards and Related Texts* (Part 3– Uniform Procedure for the Elaboration of Codex Standards and Related Texts, Procedural Manual of the Codex Alimentarius Commission), to the above address, before **31st March 2010**.

Proposed Draft Standards at Step 5 of the Procedure

2. General Principles for Establishing Nutrient Reference Values of Vitamins and Minerals for General Population (paras 50-85, Appendix III).

Governments and interested international organizations wishing to submit comments on the above document, including the implications they may have for their economic interest, should do so in writing, in conformity with the *Procedure for the Elaboration of Codex Standards and Related Texts* (Part 3– Uniform Procedure for the Elaboration of Codex Standards and Related Texts, Procedural Manual of the Codex Alimentarius Commission), to the above address, before **31st March 2010**.

B. REQUEST FOR COMMENTS AND INFORMATION

Proposed Draft Additional or Revised Nutrient Reference Values for Labelling Purposes in the Codex Guidelines on Nutrition Labelling (at Step 3 of the Procedure) (paras 74-87, Appendix IV)

Governments and interested international organizations wishing to submit comments on the above document, should do so by writing preferably by email to Mr Georg Müller, CCNFSDU Germany Secretariat, Federal Ministry of Food, Agriculture and Consumer Protection, Rochusstraße 1 53123 Bonn, Germany. Tel.:+49 (228) 99 529 33 87; Fax: +49 (228) 99 529 49 65; E-Mail: ccnfsdu@bmelv.bund.de with a copy to the Secretariat, Codex Alimentarius Commission at the address above before **15 June 2010**.

SUMMARY AND CONCLUSIONS

The 31st Session of the Codex Committee on Nutrition and Foods for Special Dietary Uses reached the following conclusions:

MATTERS FOR FINAL ADOPTION BY THE 33RD SESSION OF THE CODEX ALIMENTARIUS COMMISSION:

The Committee:

- agreed to advance the Draft List of Methods for Dietary Fibre, including the revised footnote 1 of definition of dietary fibre to the Commission for adoption at Step 8 (Paras 34-49, Appendix II);
- agreed to forward the General Principles for Establishing Nutrient Reference Values of Vitamins and Minerals for General Population to the Commission for adoption at Step 5 (Paras 50-85, Appendix III);
- agreed to ask the Commission to approve new work on the revision of the Codex General Principles for the Addition of Essential Nutrients to Foods (CAC/GL 9-1987). (Paras 87-96, Appendix V);
- agreed to ask the Commission to approve new work on the revision of the Codex Guidelines on Formulated Supplementary Foods for Older Infants and Young Children (CAC/GL 8-1991). (Paras 105-123, Appendix VI).

MATTERS REFERRED TO OTHER COMMITTEES

Codex Committee on Methods of Analysis and Sampling (CCMAS)

- The Committee clarified on the reference to calories and the calculation of energy from disaccharides (Paras 11-13);
- The Committee agreed to retain the AOAC and CEN microbiology methods on determination of Vitamin B6 (Para 14).

Codex Committee on Food Labelling (CCFL)

- The Committee agreed to refer the discussion of *Inclusion of saturated fat and sodium in relation to nutrient reference value for nutrients associated with risk of non communicable disease* as presented in paragraphs 149-152 (Paras 16, 149-152) .
- The Committee concluded that there was no clear agreement for claims for added sugars and trans-fatty acids at this stage and agreed to request CCFL to provide additional information on the types of claims once the CCFL has identified the claims for which conditions should be established (Paras 17-22) .
- The Committee agreed to postpone considering the need for *Development of principles for countries to evaluate criterion 1* until after CCNFSDU has established related principles in their proposed new work on NRVs-NCD (Paras 23-24).
- The Committee agreed to recommend the CCFL to establish a definition for NRVs and agreed to forward to the CCFL the proposed definition for NRVs for consideration (Paras 147-148).

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INTRODUCTION

1. The Thirty first Session of the Codex Committee on Nutrition and Foods for Special Dietary Uses (CCNFSDU) was held in Düsseldorf, Germany from 2 to 6 November 2009 at the kind invitation of the Government of Germany. The Session was chaired by Dr Rolf Grossklaus, Director and Professor, the Federal Institute for Risk Assessment, Berlin and co-chaired by Dr. Lorena Rodriguez, Chile. The Committee was attended by 260 delegates, observers and advisors representing 67 Member Countries, one Member Organization and 29 International Organizations.

OPENING OF THE SESSION

2. Mr Bernhard Kühnle, Director General for Food Safety and Veterinary Affairs – Federal Ministry of Food, Agriculture and Consumer Protection, Germany addressed the Committee on behalf of the German Federal Minister, Ms Ilse Aigner. Mr Kühnle emphasized that the Codex Alimentarius has an overall responsibility to elaborate standards for food safety and quality in order to protect consumers around the world in view of globalization of food trade. As regards specific work of the Committee, Mr Kühnle indicated that it was very important for the Committee to elaborate NRVs not only for vitamins and minerals but also in relation of noncommunicable diseases in order to address this matter. He drew the attention of the Committee to the fact that fundamental right of human – right to food was quite frequently violated as the number of hungry people around the world had substantially increased during last years.

3. Mr Kühnle pointed out that the Committee was trying to deal with these problems by discussing the proposals to develop documents for malnourished underweight children and encouraged the Committee to progress the work in identifying and addressing nutrients in relation to chronic diseases and therefore contributing to the implementation of the WHO Global Strategy on Diet Physical Activity and Health. Finally Mr Bernhard Kühnle wished all success to the delegates.

Division of competence

4. Following Rule II.5 of the Rules of Procedure of the Codex Alimentarius Commission the Committee was informed about CRD 2 on the division of competence between the European Community (EC) and its Member States and noted that 16 Member States of the EC were present at the current session.¹

ADOPTION OF THE AGENDA (Agenda Item 1)²

5. The Committee agreed to the proposal of WHO to consider item 7 before item 6 as this could help to clarify some issues proposed in item 6.

6. The Committee also agreed to consider the outcome of the Physical Working Group held prior to the session on the development of NRVs associated with increased or decreased risk of noncommunicable diseases (Item 8) after Agenda Item 4 as there were common issues on these two items.

7. The Committee agreed to start considering Agenda Item 4 after Item 5 in order to allow more time for delegations to consider the report of the working group.

8. The Committee accepted the proposal of the Delegation of Sudan to consider the addition of acacia gum to the Standard on Infant Formula under Agenda Item 9 “Other Business and Future Work”.

¹ CRD 2 (Annotated Provisional Agenda on the Division of Competence between the European Community and its Member States).

² CX/NFSDU 09/31/1.

9. With these modifications the Committee adopted the Provisional Agenda as the Agenda for the Session.

MATTERS REFERRED TO THE COMMITTEE BY THE CODEX ALIMENTARIUS COMMISSION AND/OR OTHER CODEX COMMITTEES (Agenda Item 2(i))³

10. The Committee noted that the matters referred by the 32nd session of the Commission and presented in Parts A and B of the CX/NFSDU 09/31/2 were for information purposes. The Committee considered matters arising from other Codex Committees and Task Forces as follows:

Codex Committee on Methods of Analysis and Sampling

Calculation of energy and methods for vitamin B6

11. As regards the request from the CCMAS to clarify the reference to calories and to consider the establishment of relevant conversion factors for kilojoules, the Committee, after some discussion, agreed to change “calories” to “energy” as the name in the provision in the table and in the title of footnote 2.

12. The Committee had considered how the calculation of energy from disaccharides should be addressed. The Committee noted the clarification from the FAO that disaccharides should not have the same energy conversion factor as monosaccharides because the latter include additional water due to hydrolysis as compared to higher carbohydrate polymers including disaccharides. Since additional water is included in the monosaccharide value, the energy conversion factor for monosaccharides is smaller, and the Committee agreed that the calculation of energy from disaccharides should be covered by (b) carbohydrates.

13. The Committee also agreed to add an additional column for conversion factors for kilojoules, as requested by the CCMAS, and added section (g) to clarify that the energy contribution of carbohydrate (b) should not include the contribution of monosaccharides (d) to read:

Footnote 2: Section 9 Energy by Calculation – Section 9.2 Conversion Factors*

(a) Protein	4 kcal per g	17 kJ per g
(b) Carbohydrate	4 kcal per g	17 kJ per g
(c) Fat	9 kcal per g	37 kJ per g
(d) Monosaccharides (determined as such where known to be present):	3.75 kcal per g	16 kJ per g

*Food energy -methods of analysis and conversion factor. FAO Food and Nutrition Paper 77, Rome, 2003.

(e) Specific food ingredient See “Energy and Protein Requirements” (FAO Nutrition Meeting Report Series No. 52 or WHO Technical Report Series No. 522)

(f) Other specific energy conversion factors may be used where the formulation of the food and the nutrient content are known and where such specific conversion factors are physiologically more meaningful than the factors listed above

(g) The energy contribution of (b) carbohydrate should not include the energy contribution of (d) monosaccharides.

14. As regards the CCMAS request for whether determination of vitamin B6 the AOAC and CEN microbioassay methods should be retained or replaced with more modern methods, the Committee noted

³ CX/NFSDU 09/31/2; CRD 10 (Comments from Indonesia).

that these microbioassay methods were useful because they measure the biological activity of the vitamin and therefore agreed to retain them.

Codex Committee on Food Labelling

15. The Committee considered the request from the Committee on Food Labelling concerning the proposed amendments to section 3.2 of the Guidelines on Nutrition Labelling regarding the list of nutrients that are always declared on a voluntary or mandatory basis, in relation to the recommendations in the WHO Global Strategy on Diet, Physical Activity and Health. The Committee provided the following replies or comments to the three questions from the CCFL.

Inclusion of saturated fat and sodium in relation to nutrient reference value for nutrients associated with risk of non communicable disease

16. The Committee recalled that the CCFL had proposed to add saturated fat and sodium or salt to the list of nutrients that must be declared when a nutrient declaration is required and noted a proposal to consider as a priority for establishing NRVs for those nutrients referred by the Committee on Food Labelling. The Committee however agreed to defer the discussion of this question until it had considered the outcome of the physical working group on NRVs associated with risk of non-communicable diseases (see Agenda Item 8).

Establishment of claims for use for labelling relating to salt, trans-fatty acids and added sugars

17. Several delegations supported the establishment of a claim for sodium/salt, but different views were expressed on the expression of the claim, whether as sodium, which would be more consistent with scientific evidence, or “salt”, which was more familiar for consumers but might create some confusion due to existence of other salts.

18. Some delegations supported claims on trans fatty acids in view of the clear scientific evidence on their adverse effects on health and public health importance to some countries, which may increase if saturated fat is included in the nutrient declaration. Other delegations did not support the inclusion of mandatory declaration of trans fatty acids and recalled that this question was still under discussion in the CCFL. It was also proposed to consider the relationship between the comparative claim for saturated fat and the declaration of trans fatty acids. The Committee also recalled that trans fatty acids should be taken into account in relation to claims for saturated fat, as mentioned in the Table on Conditions for Nutrient Contents in the *Guidelines for Use of Nutrition and Health Claims (CAC/GL 23-1997)*.

19. Some delegations pointed out that the Committee on Food Labelling should first clarify labelling issues, and in particular whether mandatory declaration or the development of claims should be considered. The Chairperson recalled that the responsibility of the CCNFSU was to develop conditions for claims and for that purpose it needed a clear indication as to the type of claims to be considered, while the decision on labelling matters rested with CCFL.

20. Some delegations supported the declaration of added sugars, and the development of conditions for such claims. Other delegations highlighted the difficulties related to such claims in order to identify the physiological effects and to determine the amount of added sugars as compared with other sugars, and therefore did not support the declaration of added sugars.

21. The Committee noted the information provided by one delegation on the use of claims for “no added salt” or “no added sugars” at the national level including conditions established for these claims, which provided useful information to consumers and could be considered as an alternative approach to the declaration of the amount of added sugars or salt.

22. As a general conclusion, the Committee considered that there is merit in establishing claims in relation to salt. At this stage, there was no clear agreement for claims for added sugars and trans-fatty acids. However once the CCFL has identified the claims for which conditions should be established, CCFL was requested to provide additional information on the types of claims for which CCFL wishes

CCNFSDU to establish criteria, the purpose of the claims, and CCFLs priorities for the development of criteria for the claims.

Development of principles for countries to evaluate criterion 1 “the ability of nutrition labelling to address public health issues” when addressing balancing national and global health issues

23. The Committee recalled that the Committee on Food Labelling had generally agreed on four criteria to identify nutrients for inclusion in the list of labelling and asked for advice on the first criterion.

24. With regard to CCFLs request that CCNFSDU consider the need for principles to address national versus global public health relevance of nutrients for nutrition labelling, the Committee noted the potential for revising the text and/or adding principle(s) to encompass nutrients associated with risk of non communicable disease in section 3.2.1.4 of the Guidelines on Nutrition Labelling. However it may be appropriate to postpone considering the need for such principles until after CCNFSDU has established related principles in their proposed new work on NRVs-NCD.

MATTERS OF INTEREST ARISING FROM FAO AND WHO (Agenda item 2 (ii))⁴

25. The Representative of FAO informed the Committee about recent and planned activities of FAO. The Representative indicated that the Joint FAO/WHO Expert Consultation on Fats and Fatty Acids in Human Nutrition, which was held in November 2008, emphasized the role of certain fatty acid categories and the reduction of trans fatty acids in foods. The report of the Consultation with the final recommendations on requirements is being finalized while the background papers prepared for the Consultation have been published in the Annals of Nutrition and Metabolism (Volume 55, 2009).

26. The Representative indicated that FAO is emphasising local, sustainable and food-based approach as solutions for malnutrition, and is therefore increasingly working on biodiversity. FAO, in collaboration with Biodiversity International has developed two nutrition indicators for biodiversity, a first one on food composition (in 2007) and second on food consumption (in 2009) through expert consultations. It is expected that the indicators will lead to an increased consumption of nutrient dense varieties, and if reported and included in dietary assessments, to a decreased need of fortification programmes. The publication “Indigenous Peoples’ Food Systems: the many dimensions of culture, diversity and environment for nutrition and health” was published in 2009 and it demonstrated the shift from traditional food systems to increased inclusion of westernized and processed foods leading to raising rates of obesity and non-communicable diseases.

27. The Representative indicated that the publication “Food Composition Study Guide” provides all necessary information in questions and answers on food composition and could be very useful in view of the discussions in CCFL on mandatory nutrition labelling. Another publication “Innovations in Food Labelling”, to be published in December 2009, deals with food labelling issues. FAO also informed the Committee that the forthcoming Joint FAO/WHO Expert Consultation on the Risk and Benefits of Fish Consumption would be held in January 2010?.

28. The Representative of WHO informed the Committee of the new development in WHO on the scientific advice on nutrition. The establishment of new WHO Guidelines Development process has led to many changes in the way WHO produces its guidelines and recommendations. To implement this new process in providing scientific advice, WHO is establishing the WHO Nutrition Guidance Expert Advisory Group, membership of which includes experts from various WHO Expert Advisory Panels and experts from a larger roster which is established through open calls for experts. Through this strengthened process for providing scientific advice on nutrition, WHO has begun some of the work described in the document, CX/NFSDU09/31/2.Add1, such as vitamin A supplementation and level of total fat and

⁴ CX/NFSDU 09/31/2-Add.1.

obesity and related noncommunicable diseases as well as additional issues of public health importance including sugars and health.

29. As part of the WHO's strengthened scientific advice on nutrition, a global network of institutions is also being set up in order to facilitate the effective harmonization of scientific advice on nutrition. The first meeting of the global network of institutions is being planned in February 2010, in particular to discuss the guiding principles and framework development of nutrient profiling.

30. Another new development is the WHO Library of Evidence on Nutrition which is an on-line web portal containing: 1) new and updated guidelines being developed through the new WHO Guideline Development process; and 2) most current and comprehensive information relating to nutrition interventions and programme guidance as well as available tools, such as procedural manual on Food Based Dietary Guidelines which has been field-tested in a number of countries among others.

31. The Representative of WHO also informed the Committee of the further development and the proposed establishment of a new procedural arrangement entitled "Joint FAO/WHO Expert Meetings on Nutrition" (JEMNU). JEMNU will replace the current ad hoc expert consultation arrangement for provision of scientific advice on food and nutrition to the Codex and Member States. The focus of work and subjects of the scientific advice to be provided by JEMNU will drive the selection of experts, who would come from different FAO and WHO Expert Advisory Panels and rosters of experts including respondents to open calls for experts. JEMNU expert membership would be limited to the duration of a specific assignment.

32. Furthermore, the Representative of WHO drew the attention of the Committee in particular to the information related to the Joint WHO/UNICEF/WFP/UNHCR Consultation on the dietary management of moderate malnutrition held in October 2008, the report of which is available on the WHO website and its background papers are also now available in the September 2009 issue of the Food and Nutrition Bulletin. As a follow-up to this meeting, WHO is currently working, in collaboration with its partners, to develop specifications for supplementary foods for moderately malnourished children 6 months to 5 years of age. This follow-up work is expected to be completed by January 2010 and the joint WHO/UNICEF/UNHCR/WFP guidelines, in the form of joint statement, will be ready by mid 2010. In addition, it planned to hold a 2nd consultation on moderate malnutrition with the aim to improve policy guidance and program implementation on the management of moderate malnutrition.

33. The Representative of WHO further informed the Committee of the Joint WHO/UNICEF Technical Consultation on Strengthening Action to improve feeding of infants and young children 6-23 months of age in nutrition and child health programmes held in October 2008 to discuss a framework for translating the Guiding Principles for complementary feeding of the breastfed child and Guiding Principles for feeding non-breastfed children 6-24 months of age into context specific interventions. As a follow up to the consultation, WHO, UNICEF, and their partners are reviewing regulations on foods for infants and young children, including fortified complementary foods and micronutrient supplementation, in accordance with the Global Strategy on Infant and Young Child Feeding and the International Code of Marketing of Breast Milk Substitutes. As part of the follow up to the October 2008 meeting, WHO is reviewing the possibility of updating the nutrient requirements for these age groups which will provide scientific bases for reviewing the nutrient requirements for complementary foods. This work will certainly contribute to the new work proposed by Ghana.

LIST OF METHODS FOR DIETARY FIBRE AT STEP 7 (Agenda Item 3)⁵

34. The Committee recalled that its last session had agreed to establish an electronic working group led by France to review and update, as appropriate, the proposed list of methods of analysis for dietary fibre and to prepare recommendations for consideration by the next session.

35. The Delegation of France introduced the document and indicated that the list of methods had been established on the basis of the proposals received in the comments, and following the criteria for the selection of methods of analysis in the Procedural Manual. The methods were classified into three groups: three general methods which were applicable to routine analysis in the majority of cases; one low molecular weight soluble dietary fibre method combined with a general method (AOAC 2001.3); and seven specific methods.

36. Some delegations expressed concern with the fact that some methods in the proposed list were not consistent with the definition of dietary fibre and that all compounds were listed as dietary fibres, and pointed out that none of the methods proposed could be considered as a Type II or reference method as, according to the definition, national authorities should decide whether to include carbohydrates from 3 to 9 monomeric units in the definition of dietary fibre and which synthetic and isolated carbohydrate polymers have one or more physiological effects of benefit to health.

37. The Committee considered alternative options to address these issues, including the reordering of the methods, defining other criteria for classification and whether the list should be restricted to general methods or include all potential methods.

38. Some delegations pointed out that there was a need for a range of methods that would allow national authorities to select the appropriate methods with some flexibility. The Committee also noted that, while selecting the methods, consideration should be given to the feasibility of their use in developing countries.

39. In order to facilitate progress and in view of the technical nature of the comments, the Committee agreed to convene an in-session working group chaired by France, working in English and open to all members and observers in order to revise and put in order the list of methods in the light of the comments received.

40. The Delegation of France presented the report of the working group (CRD 24) and reported that it had revised the Table and retained the layout in CODEX STAN 234, the overall organisation of the list in four groups, the scope for each group, the grouping of the methods, and had inserted information on the range of degrees of polymerisation covered in each group, where relevant. It had discussed whether any method should be classified as Type II and considered a proposal to endorse as Type II the AOAC 2009.01 method, since its two-step protocol would allow to perform, in succession, the separate measurements of the higher molecular weight fraction and then, if required, of the lower molecular weight fraction of dietary fibre in a food, and therefore could allow to assess compliance with the Codex definition in any situation. However it had deferred to the plenary session the consideration of the Type of the methods together with three other issues: the presentation of the list of methods in CODEX STAN 234 and whether to refer to “all foods” or “individual foods”; the insertion of some additional methods suggested in the working group; and whether the entries for Type IV methods should be retained.

41. The Committee agreed to present the list according to the following four groups presented in CRD 24 (see Appendix II to this report):

⁵ CX/NFSDU 09/31/3-Rev.; CX/NFSDU 09/31/3-Add.1 (comments from Brazil, Costa Rica, Democratic People’s Republic of Korea, United States of America); CRD 3 (comments from Chile, Colombia, Philippines, United States of America, CIAA, explanation comments Dr. Wood); CRD 12 (comments from ISDI), CRD 16 (France), CRD 23 (revised table); CRD 24 (report of the in-session working group and revised list of methods).

- General methods that do not measure the lower molecular weight fraction;
- General methods that measure both the higher and the lower molecular weight fraction;
- Methods that measure individual specific components;
- Other methods.

42. Some delegations expressed the view that the list was not complete and therefore should be further circulated for comments and considered by the next session before it could be finalised.

43. Several delegations pointed out that governments needed methods that could be used to implement the definition and for control purposes and therefore supported its finalisation at the current session, with the understanding that new or updated methods could be added when they became available.

44. The Committee invited those delegations who wished to propose additional methods to do so at the current sessions in order to allow the completion of the list. After some discussion, it was agreed to retain four methods proposed for addition as Type III (AOAC 992.16, AOAC 993.21, AOAC 991.42 and AOAC 993.19), and the Englyst method for the determination of non-starch polysaccharides (1994) as Type IV.

45. As regards the type of methods, it was agreed that all methods in the three first groups would be classified as Type III and the “Other methods” as Type IV as they were not validated, and to inform CCMAS that, in view of its discussion, see para 38 and 40, the Committee did not suggest any Type II method. A new footnote (2) was inserted after the name of each group in the table in Appendix II to clarify that the method used would depend on the definition applied at the national level, to the effect that “two issues are left for national authorities: to include monomeric unit 3-9 and which isolated or synthetic compounds have physiological benefit (GL 2-1985).”

46. The Committee discussed whether the presentation should refer to “all foods” or to “individual foods” in CODEX STAN 234, and also noted the proposal of the Observer from ISDI to specify the methods applicable to foods for special dietary uses. It was noted that when a method was applicable to “individual foods”, these foods had to be listed in detail. The Committee recalled that its intention, when developing the definition was not to limit the applicability to a specific range of foods, and agreed to retain “all foods” according to current practice when the provision is of general application. A footnote 1 was inserted in order to avoid any confusion on the applicability of the methods, taking into account that in practice no method of analysis could be tested in all food matrices.

Footnote 1 to the Definition

47. The Committee recalled that the mandate given to the electronic working group at the last session also included the revision of Footnote 1 to the definition of dietary fibre, which referred to current work on the methods and would require updating once the methods were finalised. The Committee agreed on the simplified text proposed in the working document, which was amended to read that compounds may be measured by “certain analytical methods” instead of “AOAC methods” to make the text more generally applicable.

48. The Committee expressed its appreciation to the Delegation of France and to the members of the electronic and in-session working groups for their considerable efforts and excellent work which had allowed the Committee to progress on the discussion of complex issues.

Status of the Draft List of Methods for Dietary Fibre

49. The Committee agreed to advance the Draft List of Methods, including the revised footnote 1, as amended at the session, to the 33rd Session of the Codex Alimentarius Commission for adoption at Step 8 (see Appendix II).

PROPOSED DRAFT ADDITIONAL OR REVISED NUTRIENT REFERENCE VALUES FOR LABELLING PURPOSES IN THE CODEX GUIDELINES ON NUTRITION LABELLING AT STEP 4 (Agenda Item 4)⁶

50. The Committee recalled that its last session had agreed to return the General Principles for Establishing Nutrient Reference Values of Vitamins and Minerals for the General Population to Step 2/3 for redrafting by the electronic working group led by Republic of Korea to prepare a revised version for circulation for comments and consideration by the current session of the Committee.

51. The Delegation of Republic of Korea informed the Committee about the changes that the electronic working group proposed while revising the document. The Delegation drew the attention of the Committee to the fact that it had prepared a CRD 20 which contained amendments to document CX/NFSDU 09/31/4 prepared in track changes on the basis of additional comments received in order to facilitate discussions at this session.

52. Some delegations drew the attention of the Committee to the fact that it was difficult to follow discussions on new version proposed in CRD 20 as they were ready to consider this item based on the original document.

53. The Committee expressed its appreciation to the Delegation of Republic of Korea and the working group for their excellent work and discussed the matter on the basis of CRD 20 as proposed by the Chairperson.

54. In addition to minor editorial changes, the Committee agreed to the following.

General comments

55. The Delegation of Japan drew the attention of the Committee to the fact that they may consider the suitability of the general principles taking into account the characteristic of its own nutrition problems in establishing its own NRVs for labelling purposes.

Title

56. The Committee agreed to the proposal to amend the title of the document to clarify that these general principles were for establishing NRVs of vitamins and minerals and the reference to labelling purposes was deleted.

Preamble

57. The square brackets were deleted in the first paragraph to clarify that the principles are for the establishment of NRVs for individuals older than 36 months.

58. The Committee did not agree to the proposal to amend the Preamble to include specific reference to climate and soil composition but agreed to delete the reference to the example of bioavailability of nutrients which is already included in the proposed NRVs from the penultimate sentence of the second paragraph for clarity. .

59. The second paragraph was amended in order to ensure consistent terminology on NRVs.

Definitions

60. Some delegations expressed concern that it was proposed to delete the clarifications that different countries may use other terms for this concept, however it was clarified that the content of these

⁶ CX/NFSDU 09/31/4; CX/NFSDU 09/31/4-Add. 1 (comments from Argentina, Costa Rica, India, Philippines, United States of America and IDF); CRD 4 (comments from European Community); CRD 10 (comments from the Indonesia); CRD 12 (comments from ISDI); CRD 20 (revised document prepared by Republic of Korea).

paragraphs was moved into footnotes under presentation of NRVs for vitamins and minerals, where appropriate.

61. As regards the question on the source of definitions, the Committee noted clarification that the INL definitions were taken from the UNU/FAO/WHO/UNICEF workshop on "International Harmonization of approaches for developing nutrient-based dietary standards" (UNU, 2007) and the upper level of intake definition is from the Codex nutrition risk analysis principles.

62. The Committee had a discussion regarding the proposal to add a definition on NRVs. Some delegations were of the view that there was a need for such definition while others were not so clear about a such necessity especially as it was not clear at this stage as to whether this definition should be more generic and cover NRVs for vitamins and minerals as well as NRVs related to the risk of noncommunicable diseases or only NRVs for vitamins and minerals.

63. The Codex Secretariat drew the attention of the Committee to the fact that there was no Codex definition on NRVs and that the responsibility for such definition, if established, rested with the Codex Committee on Food Labelling as this definition would be used in the framework of the Guidelines on Nutrition Labelling.

64. Different proposals were put forward for the proposed definition on NRVs, however after some discussion, the Committee agreed to conclude the consideration on this matter under Agenda Item 8 when discussions on NRVs for noncommunicable disease (NCD) were finalized.

Section A. Selection of suitable data sources to establish NRVs

65. In the first sentence of this section, it was clarified that FAO/WHO relevant and recent values were taken as the primary source of information and it was agreed to incorporate the text that "relevant and recent values that reflect independent review of science from recognized authoritative scientific bodies other than FAO/WHO could also be taken into consideration".

66. The Committee after some discussion agreed to delete the paragraphs regarding the criteria for the selection of suitable sources for these NRV values other than the reference to independent review of the science, as they were already covered by the two earlier paragraphs.

Section B. Selection of appropriate basis

67. The Committee agreed to the proposal to delete part of the text on the definition of the INL 98 and references to specific examples in the first sentence of this section in order to simplify the explanation of the appropriate basis of NRVs.

68. Additional wording regarding the revision of derivation of values was added for clarity.

Section C. Consideration of different age-sex specific groups

69. The Committee had a lengthy discussion on how to address the basis of NRVs for the general population.

70. It was proposed to clarify what reasonably represents the general population and the Committee deleted the phrase. It was also agreed to delete the heading of this section and combine the content of this section with section B as Section C also dealt with the selection of appropriate basis for NRVs.

71. The Committee also agreed to clarify that general population NRVs established by the CCNFSDU NRVs were based on the average of the INL98 of selected adult male and female age groups.

Section D (new section C) Consideration of upper levels of intake

72. The Committee amended this paragraph to clarify that the establishment of general population NRVs should also take into account upper levels of intake established by recognized authoritative scientific bodies.

73. It was proposed that the FAO/WHO might organize an expert consultation to establish the global upper levels of intake. However, some delegations were of the view that this work was premature and might unnecessarily delay the work of the Committee on this matter.

Appendix II

74. The Committee noted that at the request of the last session of the Committee the delegation of Australia had calculated proposed NRVs for some vitamins and minerals based on the two options proposed at the previous session.

General comments

75. The Delegation of the European Community drew the attention of the Committee to the fact that the meanings of the abbreviations “RE”, “NE” and “DFE” should be included in footnotes but indicated that there had been insufficient time to consider the proposal to include conversion factors in these footnotes. The EC Delegation noted that “folic acid” was changed to “folate” and was of the view that flexibility should be allowed in the Guidelines to label not only “folate” but also “folic acid” as this term was more understood by consumers in some countries. Clarification was sought on why potassium was not included and how the rounding of values was made.

76. The delegation of the U.S. suggested it would be worthwhile to consider on NRV for potassium but it may be more appropriate to consider this with the work on NRVs for nutrients associated with risk of diet-related noncommunicable diseases.

77. The Delegation of Australia clarified that calculations for most NRVs and conversion factors were based on the FAO/WHO publication on Vitamin and Mineral Requirements in Human Nutrition (2004) and clarified how the rounding for certain nutrients was made.

78. The Delegation of Thailand questioned why the NRV for fluoride was so high as this might create some problems for children. The need for an NRV for fluoride was challenged by the observer of NHF.

79. A number of delegations and observers expressed concerns that certain NRV values established for some vitamins or minerals were too low and were of the view that this might have an adverse impact on the health of some consumers.

80. The Chairperson clarified that NRVs were not identical to daily nutrient intake values but were designed to provide values for comparison of nutrients in foods and therefore helping consumers to choose appropriate foods sources.

81. Some delegations and observers made proposals to amend some of the proposed NRVs, however the Committee noted that these NRVs were established according to principles agreed by the Committee and if NRVs were to be reviewed then the principles elaborated by the Committee should be changed before that.

82. The Committee agreed to amend the first section to clarify that NRVs were expressed for ready to eat foods and deleted the last part of the second paragraph as superfluous.

83. The Committee noted that in view of time constraints it would be difficult to review all NRVs one by one at this stage.

84. The Committee noted the proposal that there might be a need to include NRVs for some new nutrients and therefore agreed that delegations could propose this during further elaboration of this document.

85. The Committee also agreed to remove the square brackets from NRVs for 7 new minerals since the whole document is at Step 3 and clarified that these NRVs were calculated using data from the United States Institute of Medicine of the National Academy of Sciences.

Status of the proposed draft General Principles for Establishing Nutrient Reference Values of Vitamins and Minerals for General Population

86. The Committee noted that significant progress had been made on the proposed draft General Principles for Establishing Nutrient Reference Values of Vitamins and Minerals for General Population and agreed to forward them to the 33rd Session of the Commission for adoption at Step 5 (see Appendix III).

87. The Committee noted that additional consideration was needed on the presentation of NRVs for vitamins and minerals as presented in Appendix II of CRD 20 and agreed to return it to Step 3 for further consideration by the Committee (see Appendix IV).

Discussion Paper on the Proposal for New Work to Amend the Codex General Principles for the Addition of Essential Nutrients to Foods (CAC/GL 9-1987) (Agenda Item 5)⁷

88. The Committee recalled that its last session had agreed that an electronic Working Group led by Canada should revise the document in line with the comments made by the last Session for consideration by this Session of the CCNFSDU.

89. The Delegation of Canada introduced the discussion paper together with the revised Project Document and explained in detail the content of the proposal. The Delegation emphasized that to acknowledge current practices and to ensure that the addition of essential nutrients to food is rational and does not result in indiscriminate additions which may pose a health hazard due to excesses, deficiencies or imbalance of such nutrients, the principles should be reviewed by the Committee. The Delegation indicated that the comments made by the electronic Working Group had been focused on the following points: need to clarify whether the intent of proposal was to affirm that the current principles apply to both mandatory and discretionary addition of essential nutrients and whether similar purpose apply to both; consider revising the definition of “fortification” in the current general principles such that its purpose is not limited to preventing or correcting a demonstrated deficiency of an essential nutrient but also to encompass other public health benefits such as meeting recommended nutrient intakes and reducing the risk of inadequate intakes as demonstrated by relevant scientific data. The Delegation also pointed out that with regard to the selection of nutrients to be added, a risk-based approach would have to take into consideration all sources of exposure, including intake from supplements and Upper Level of intakes when these have been established.

90. The Committee expressed its appreciation to the Delegation of Canada and the electronic Working Group for their work. The Committee agreed to initiate new work on the amendment of the Codex General Principles for the Addition of Essential Nutrients to Foods (CAC/GL 9-1987) and discussed the Project Document section by section.

91. The Delegation of European Community, while supporting the new work, asked for clarification of the relationship between “all food” and foods for infants and young children as well as whether the suitability of food supplement should be addressed in the purpose and the scope of the proposed new work.

92. After some discussion, the Committee agreed to delete the reference to the food for infants and young children in the first section of Project Document (Purpose and the Scope of the Proposed New Work) with the understanding that this document would cover food for infants and young children. The Committee agreed not to mention whether the revised principle should be applied to food supplements but will consider this issue during the process of work.

⁷ CX/NFSDU 09/31/5; CRD5 (Comments from Philippines and South Africa); CRD10 (Comments from Indonesia).

93. The Committee agreed to stress that the review of the general principles would evaluate the totality of the current document to ensure coherence and consistency of the principles and the guidance in the first section of Project Document.

94. The Committee agreed, after some discussion, to support further consideration of the desirability and feasibility of the establishment of international Upper Levels of intake. The Committee also agreed that such consideration may require scientific advice from FAO and WHO. The representative of WHO informed the Committee that the Upper Levels of some of the nutrients, such as vitamin A, B6, C, D, E, niacin, calcium, selenium, and zinc are available for adult populations in the FAO/WHO vitamins and mineral requirements in human nutrition (2004) and 2006 *Guidelines on Food Fortification with Micronutrients*. WHO would work on developing the Upper Levels of other vitamins and minerals if requested by the Committee. The Representative of FAO also informed the Committee that a expert meeting is planned in the next Biennium e. g. protein quality, calcium requirements, vitamin A or the establishment of Upper Levels, and that the priorities can be set up according to the request of the Committee.

95. The Committee recalled that in conformity with the risk analysis principles, preliminary risk management activities should be carried out before requesting risk assessment and agreed that it was premature to make a specific request for scientific advice at this stage.

96. The Committee finally agreed to ask the 33rd Session of the Commission to approve new work to amend the Codex General Principles for the Addition of Essential Nutrients to Foods (CAC/GL 9-1987). The Project Document for this new work is attached as Appendix V.

97. The Committee agreed to establish an electronic Working Group, chaired by Canada and co-chaired by New Zealand and Chile working in English, French and Spanish, to prepare a revised document for circulation at Step 3 and consideration by the next Session of the Committee.

DISCUSSION PAPER ON THE PROPOSAL FOR NEW WORK TO ESTABLISH A STANDARD FOR PROCESSED CEREAL-BASED FOODS FOR UNDERWEIGHT INFANT AND YOUNG CHILDREN (Agenda Item 6)⁸

98. The Committee recalled that its last session had agreed that an electronic working group led by India would prepare a revised discussion paper and project document on the proposal to revise the Standard for Processed Cereal-Based Foods to address the requirements of malnourished children.

99. The Delegation of India, while introducing the document, recalled the urgency of addressing the problems of child malnutrition affecting many developing countries, as it appeared from the statistics and studies carried out by FAO, WHO and UNICEF. The Delegation indicated that the current Standard covered complementary foods which do not address the concerns for undernourished children, and therefore proposed to insert in the Standard a new Part B that would include specific provisions especially for cereal content, minimum protein content, and energy density. The Delegation noted that these products would be also available in the market on a commercial basis and therefore the additional provisions would facilitate consumer choice catering to the respective needs.

100. Some delegations supported this work as it would provide useful guidance to governments when developing public health policy and measures to support growth monitoring and reduce malnutrition in children.

101. Other delegations expressed concerns about the risks of duplication with the revision of the Guidelines for Formulated Supplementary Foods for Older Infants and Young Children proposed under

⁸ CX/NFSDU 09/31/6.

Agenda Item 7 and asked for clarification on the purpose and scope of the standard and whether it was intended for children in developing countries or malnourished/undernourished children; the distinction with the products covered by the current standard; and the choice of nutrients.

102. The Delegation of India clarified that cereal, protein and energy were selected as they were the most important for the management of undernutrition; that Part B would be intended for all children affected by undernutrition and would be meeting nutritional needs of children in developing countries; the Delegation also clarified that there would be a clear distinction by appropriate labelling between the nutritional characteristics of the products covered by Part A and Part B of the revised Standard in order to provide clear information and choice to consumers.

103. As regards the distinction between the standards and guidelines the Delegation of India recalled the clarification provided by the secretariat during the discussion on agenda item 7 (see para 113).

104. Some observers expressed the view that reference should be made to the Global Strategy on Infant and Young Child Feeding in the scope of the new section and it was not clear how this new section would be used and expressed the view that it would be preferable to revise the current standard as a whole rather than adding a new section.

105. The Committee noted that the document had been made available late and recognised that it was not possible to reach a conclusion on this proposal at the current session, as further work was required in order to consider a proposal for new work. The Committee therefore agreed that an electronic working group chaired by India would prepare the revised discussion paper on the inclusion of a new Part B in the Standard for Processed Cereal-Based Foods, for consideration by the next session.

DISCUSSION PAPER ON THE PROPOSAL TO REVISE THE CODEX GUIDELINES ON FORMULATED SUPPLEMENTARY FOODS FOR OLDER INFANTS AND YOUNG CHILDREN (CAC/GL 8-1991) (Agenda Item 7)⁹

106. The Committee recalled that its last Session had agreed to establish an electronic Working Group led by Ghana to prepare revised proposals on Revision of the *Codex Guidelines on Formulated Supplementary Foods for Older Infants and Young Children* (CAC/GL 8-1991).

107. The Delegation of Ghana introduced the revised Project Document and explained the revisions made by the electronic Working Group. The Delegation indicated that the term “formulated supplementary foods for older infants and young children” had been amended to “complementary foods” as currently used by WHO. The Delegation explained that the current recommended quantity of Formulated Complementary Foods (FCF) in the Guidelines was too large for breastfed and non-breastfed children and that there was almost no room for breast milks and local foods. The Delegation indicated that the recommended levels of fortification of vitamins and minerals were too low. With respect to the new knowledge related to FCF, the Delegation explained that the Project Document aimed to revise the title of the Guidelines as well as Section 4, 5, 6 and 9 and Annex.

108. The Committee expressed its appreciation to the Delegation of Ghana and the electronic Working Group for their work.

109. The Delegation of Australia, while supporting the need for Codex standards and guidelines to be based on recent relevant science and to reflect currently available internationally traded food, asked to clarify the potential overlap such as the use of terms, identity of the target population as well as the purpose of the proposal made by Ghana and the proposal made by India.

⁹ CX/NFSDU 09/31/7, CRD7 (Comments from Chile, Philippines), CRD12 (Comments from ISDI), CRD 13 (Comments from Bolivia), CRD 15 (Comments from Nigeria), CRD 18 (Comments from China)

110. The Representative of WHO clarified that the supplementary foods are now defined as formulated foods used to rehabilitate moderately malnourished children or persons, or to prevent a deterioration of nutritional status of those most at-risk by meeting their additional needs. However, complementary foods are solid to semi-solid foods given to older infants and young children (from 6 months to 2 years of age) in addition to breast milk or breast milk substitute. Complementary foods are either specially prepared foods or family foods that are modified to make them easy to eat and provide enough nutrients.

111. To the question regarding the target population, the Delegation of Ghana explained that malnourished children were not considered by the Project Document.

112. Several Delegations supported the proposal to initiate new work to revise the guidelines as it might help the developing countries to prevent malnutrition of older infants and young children.

113. The Delegation of European Community was concerned whether the proposed revision of the guidelines would be consistent with the current Codex standard for cereal-based foods for infant and young children.

114. The Secretariat clarified that the guidelines and the standards are complementary to each other and that the standard is designed for the final product while guidelines are more used to explain how the specification in the standard could be achieved in practice. It was also noted that the Executive Committee, in the framework of the critical review should consider consistency between Codex texts.

115. The Committee agreed to initiate new work to revise these guidelines based on the proposal and made the following amendment to the Project document in addition to minor editorial changes.

116. The Committee noted that the Project Document prepared by Ghana contained concrete proposals that the Delegation of Ghana wished to be introduced in the guidelines, but they were too detailed for the Project Document.

117. The Committee agreed to consider replacing the term “supplementary” with the term “complementary” in accordance with the terminology of WHO in the first paragraph of the Project Document. The content in the first section of the Project Document (Purpose and Scope of the Revision) was amended accordingly.

118. The Committee agreed to delete the second sentence of first paragraph in section two (Relevance and timeliness) so as to avoid too much detail.

119. Some delegations suggested to revise the scope because the title of the guidelines would be changed. One observer noted that this would also allow to address the marketing for fortified foods which was becoming a problem in many developing countries.

120. The Committee agreed that the main aspects to be considered in the third section of the Project Document should include the title, scope and content of the guidelines as well as section 2, 3, 4, 5, 6 and 9 and Annex based on the discussion. The section was rearranged for clarity.

121. The Committee agreed to delete the sentences which were for information in the section six (Information on the relation between the proposal and other existing Codex documents) as this information was not necessary for this section.

122. The Committee agreed that recently developed guidelines (2008) on complementary feeding of infants and young children 6-23 months of age from WHO and UNICEF would be considered during the revision of the guideline and that information from external bodies may also be needed depending on the provision under consideration.

123. The Committee agreed to ask the 33rd Session of the Commission to approve new work on the revision of the *Codex Guidelines on Formulated Supplementary Foods for Older Infants and Young Children* (CAC/GL 8-1991). The Project Document for this work is attached to this report as Appendix VI.

124. The Committee agreed to establish an electronic Working Group chaired by Ghana, working in English, according to the Guideline described in Codex Procedural Manual, to prepare a revised draft of the Guidelines for circulation at Step 3 and consideration by the next Session of the Committee.

DISCUSSION PAPER ON THE NUTRIENT REFERENCE VALUES (NRVS) FOR NUTRIENTS ASSOCIATED WITH RISK OF NONCOMMUNICABLE DISEASES (Agenda Item 8)¹⁰

125. The Committee recalled that its last session had agreed that the Delegations of the United States of America and Thailand would prepare a background paper that would be considered by the physical working group in developing their proposals for consideration by this session of the Committee.

126. The Delegation of the United States and Thailand introduced the document (CRD 1) on behalf of the physical working group which was held prior to this session and explained in detail the discussions and recommendations made by working group which were put forward for consideration by the Plenary.

127. The Committee expressed its sincere appreciation to the United States and Thailand and the working group for their hard work in addressing this problem.

128. The Committee noted that there was general support to initiate new work on the proposal to establish NRVs for nutrients associated with risk of noncommunicable disease for general population and decided to focus its consideration on the draft Project Document prepared by the working group. It was noted that the general principles for establishing NRVs-NCD could be included in an Annex to the guidelines on nutrition labelling.

129. The Delegation of Malaysia did not agree with the proposal to develop NRVs for nutrients associated with risk of noncommunicable diseases and was of the view that Codex should focus on the revision of NRVs for vitamins and minerals as agreed by the 28th Session of the Committee. The Delegation was of the view that the science for developing NRVs for noncommunicable diseases is inconclusive at this time and that the CCNFSDU should await the final decision from the CCFL regarding the expansion of list for nutrients such as saturated fats, trans fatty acids, sodium/salt, added sugar and dietary fibre (CRD 14).

130. In addition to minor editorial changes, the Committee made the following observations and conclusions.

General comments on the report of the WG

131. The Delegation of the European Community indicated that no agreement had been reached in the working group on the inclusion of the concept of upper levels and asked clarification on how the upper levels of intake would be taken into account.

Title

132. One observer suggested that consumers should not be misled into believing that only diets could influence an increased risk of noncommunicable diseases and proposed to refer to “dietary influences on noncommunicable diseases”, however the Committee did not agree to this proposal. The Committee agreed to emphasize that the noncommunicable diseases of interest were “diet-related” and therefore inserted this clarification throughout the text and moved the reference to general population to the end of the title for clarity.

¹⁰ CX/NFSDU 09/31/8; CX/NFSDU 09/31/8-Add.1 (comments from Argentina, Australia, Brazil, Costa Rica, Iran, New Zealand, Norway, United States of America, CEFS, CRN, NHF and WSRO); CRD 1 (Report of the Physical Working Group on the Development of Nutrient Reference Values (NRVs) for Nutrients Associated with Increased or Decreased Risk of Noncommunicable Diseases); CRD 8 (comments from Chile, Colombia, Democratic Peoples Republic of Korea, Malaysia, Philippines, IFT); CRD 9 (Working Document prepared by the United States and Thailand for the PWG); CRD 10 (comments from Indonesia); CRD 11 (comments from IDF); CRD 12 (comments from IDSI); CRD 14 (Malaysia); CRD 21 (comments from Japan).

133. The Committee agreed to select the second option for the title to read “*Proposal for new work to amend the Codex Guidelines for Nutrition Labelling to Establish Nutrient reference Values for Nutrients Associated with Risk of Diet-related Noncommunicable Diseases for the General Population*”.

Purpose and Scope of the proposed work

134. The Committee clarified the first bullet that NRVs were noncommunicable diseases were for general population aged older than 36 months. The Committee agreed to delete the reference to “increased or decreased” in relation to the clarification of risk of diet-related noncommunicable disease in this section and throughout the text

Section 2. Relevance and timeliness

135. The Committee agreed to the section as proposed by the working group.

Section 3. Main aspects to be covered

136. The Committee agreed to add two additional sentences at the end of this section to clarify the priorities for the selection and review of nutrients for the establishment of NRVs.

137. The Delegation of Malaysia, supported by one observer, reiterated their request that the establishment of NRVs for saturated fats should be delayed until the CCFL finalize their discussions on this matter.

Section 4. An assessment against the criteria for the establishment of work priorities

138. The Committee clarified that this new work meets the Codex criteria for the establishment of work priorities.

Section 5 Relevance to the Codex strategic objectives and Section 6 Information on the relation between the proposal and other existing Codex documents

139. The Committee agreed to these sections as proposed by the working group.

140. The Committee noted that Section 7 on the identification of any requirements for and availability of expert scientific advice had been inadvertently omitted and inserted it while clarifying that expert scientific advice was available from recent reviews by FAO/WHO and other recognized authoritative bodies.

Section 7 (old). New Section 8. Identification of any needs for technical input to the standard from external bodies so that this can be planned for

141. The Committee clarified that information from external bodies might be needed depending on the nutrient under consideration.

Section 8 (old). New Section 9 The proposed time line for completion of new work.

142. The Committee clarified the schedule of the time table with the understanding that the longer time frame for the establishment of NRVs was required and that elaboration of principles for the establishment of NRVs should proceed at earlier stage. The Committee intends to accomplish the work so that the Commission can adopt it in 2013.

143. The Committee agreed to forward the Project Document to the next session of the Executive Committee for critical review and to the 33rd Session of the Commission for approval as new work on the revision of the Guidelines on Nutrition Labelling in order to establish NRVs for noncommunicable diseases for the general population (see Appendix VII).

Definition of NRVs

144. The Committee recalled that it had discussed this issue for some time under Agenda Item 4 and that at that time it had agreed to take decisions on the definition of NRVs after considering Item 8.

145. The Committee recalled that there was general support by the Committee to recommend to the CCFL to establish the definition for NRVs for labelling purposes, however different views were expressed regarding the content of the definition. One delegation noted that the definition of NRVs could be inserted in the definition section of the guidelines on nutrition labelling.

146. The Delegation of the European Community favoured the shorter definition and pointed out that the decision on the definition should be taken by the CCFL. Several other delegations were of the view that the definition should cover the concept of NRVs for vitamins and minerals and NRVs for diet-related noncommunicable diseases as there should be advice provided on how to ensure the adequacy of nutrients and prevent burden of noncommunicable diseases, however the Committee was not able to reach agreement on this matter.

147. After some discussion, the Committee agreed to recommend the CCFL to establish a definition for NRVs and agreed to forward to the CCFL the following proposed definition for NRVs for their consideration: *“Nutrient Reference Values are set of numerical values established and used for purposes of nutrition labelling”*.

148. The Committee also agreed to recommend that the CCFL consider the extension of this definition to include the basis on which NRVs are determined and propose that the CCFL should consider the following additions to the definition: *“and are based on scientific data on nutrient requirements”* and *“and/or nutrient levels associated with risk of diet-related noncommunicable diseases”*.

Inclusion of saturated fat and sodium in relation to nutrient reference values for nutrients associated with risk of non communicable diseases

149. The Committee recalled that it had discussed this issue for some time on Agenda Item 2 and that at that time it had agreed to take a decision on this matter after considering Item 8. The Committee also noted that CCFL agreed to add saturated fat to the list of nutrients that are always declared on voluntary or mandatory basis.

150. The Delegation of Malaysia and some observers did not support the establishment of NRVs for saturated fats as not all saturated fats had the same physiological effect. One observer pointed out that trans fatty acids were different from saturated fats. Another observer did not support the establishment of NRVs for salt as reference should be made to sodium.

151. Some other delegations supported the establishment of NRVs for saturated fats and salt/sodium and drew the attention of the delegates to the fact that in the adopted project document on NRVs for noncommunicable diseases the Committee already gave the first priority to these nutrients since they were referred from the CCFL to the CCNFSDU.

152. The Committee agreed to forward the above discussions to the CCFL.

Concluding remarks

153. The Committee agreed to establish an electronic working group chaired by the United States of America and co-chaired by Thailand and Chile working in English and Spanish to prepare the revised document on the Principles and Criteria for the Development of NRVs for Labelling Purposes for Nutrients Associated with Risk of Diet-Related Noncommunicable Diseases for the General Population Aged Older than 36 Months for circulation at Step 3 and consideration by the next session of the Committee.

154. The Committee also agreed to establish a physical working group chaired by Republic of Korea and co chaired by Australia working in English, French and Spanish to review the comments received and prepare values for NRVs for vitamins and minerals. As regards the proposal for elaboration proposals for principles and criteria on the Establishment of NRVs for Nutrients Associated with Risk of Diet Related Noncommunicable Diseases for General Population, this working group would be chaired by the US,

Thailand and Chile. This working group would be held immediately before the next session of the Committee.

OTHER BUSINESS AND FUTURE WORK (AGENDA ITEM 9)¹¹

155. The Committee recalled that it had agreed to consider the proposal of the Delegation of Sudan regarding the addition of acacia gum to the Standard on Infant Formula under this Agenda Item.

156. The Delegation of Sudan indicated that acacia gum had been evaluated by JECFA as “ADI not specified” and had been listed in Table three of the Codex General Standard for Food Additives and proposed adding acacia gum to the list of additives in the Codex STAN 72-1981. The Delegation proposed that the level of 2.5g/100ml would be for the product ready for consumption when used as thickener and 2.0g/100ml for the product when used as an emulsifier.

157. The Delegation of the European Community pointed out that the use of food additives including acacia gum in the infant formula had been discussed several times in previous Sessions of CCNFSDU and that decision on this issue had been taken in 2007 and was of the view that there was no need to reopen the discussion on this matter.

158. The Observer from ISDI was of the view that proposed levels when considering its use as food additive were too high as compared with similar gums. The Observer from AIDGUM explained that the levels proposed were established based on Good Manufacturing Practice and taking into account the technical characteristics of acacia gum.

159. The Committee concluded that there was no support on the inclusion of acacia gum in infant formula.

DATE AND PLACE OF NEXT SESSION (Agenda Item 10)

160. The Committee was informed that its 32nd Session would take place in Chile from 1 to 5 November 2010, subject to confirmation by the Host Governments and the Codex Secretariat.

¹¹ CRD 17 (prepared by Sudan).

SUMMARY STATUS OF WORK

Subject Matter	Step	For Action by	Reference in ALINORM 10/33/26
List of Methods for Dietary Fibre	8	Governments, 33 rd CAC	Paras 34-49, Appendix II
The General Principles for Establishing Nutrient Reference Values of Vitamins and Minerals for General Population	5	Governments, 33 rd CAC	Paras 50-85, Appendix III
Proposed Draft Additional or Revised Nutrient Reference Values for Labelling Purposes in the Codex Guidelines on Nutrition Labelling	3	Physical WG led by Republic of Korea and Australia; Governments; 32 nd CCNFSDU	Paras 74-87, Appendix IV
Discussion Paper on the Proposal for New Work to Amend the Codex General Principles for the Addition of Essential Nutrients to Foods (CAC/GL 9-1987)		EWG led by Canada; 33 rd CAC; Governments	Paras 88-97, Appendix V
Discussion Paper on the Proposal for New Work to Establish a Standard for Processed Cereal-Based Foods for Underweight Infant and Young Children		EWG led by India; Governments	Paras 98-105
Discussion Paper on the Proposal to Revise the Codex Guidelines on Formulated Supplementary Foods for Older Infants and Young Children (CAC/GL 8-1991)		EWG led by Ghana; 33 rd CAC, Governments	Paras 106-124, Appendix VI
Discussion Paper on the Nutrient Reference Values (NRVs) for Nutrients Associated with Risk of Noncommunicable Diseases		Electronic and Physical WG led by United States, Thailand and Chile; Governments; 33 rd CAC	Paras 125-154, Appendix VII

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APPENDIX II

I. LIST OF METHODS FOR DIETARY FIBRE
(at Step 8 of the Procedure)

Standard	Provisions	Method	Principle	Type
General methods that do not measure the lower molecular weight fraction (i.e. monomeric units ≤ 9)⁽²⁾				
All foods ⁽¹⁾	Dietary fibre based on precipitation in 4 parts alcohol and 1 part water. Resistant insoluble and soluble polysaccharides, lignin, and plant cell wall. ⁽⁴⁾	AOAC 985.29	Enzymatic gravimetric	III
All foods ⁽¹⁾	Dietary fibre based on precipitation in 4 parts alcohol and 1 part water. Resistant insoluble and soluble polysaccharides, lignin, and plant cell wall. ⁽⁴⁾	AOAC 991.43	Enzymatic gravimetric	III
All foods ⁽¹⁾	Dietary fibre based on precipitation in 4 parts alcohol and 1 part water. Resistant insoluble and soluble polysaccharides, lignin, and plant cell wall. ⁽⁴⁾	AOAC 992.16	Enzymatic gravimetric	III
All foods ⁽¹⁾	Dietary fibre in food and food products with less than 2% starch. ⁽⁴⁾	AOAC 993.21	Non-enzymatic gravimetric	III
All foods ⁽¹⁾	Dietary fibre based on precipitation in 4 parts alcohol and 1 part water, quantitated as component neutral sugars, uronic acids, plus Klason lignin. ⁽⁴⁾	AOAC 994.13	Enzymatic chemical	III
General methods that measure both the higher (monomeric units > 9) and the lower molecular weight fraction (monomeric units ≤ 9)⁽²⁾				
All foods ⁽¹⁾	Dietary fibre based on precipitation in 4 parts alcohol and 1 part water. Resistant insoluble and soluble polysaccharides, resistant malto-dextrins, lignin, and plant cell wall. ⁽³⁾	AOAC 2001.03	Enzymatic gravimetric and Liquid chromatography	III
All foods ⁽¹⁾	Dietary fibre (Soluble + insoluble polysaccharides + lignin + resistant starch + oligosaccharides).	AOAC 2009.01	Enzymatic-Gravimetric-High Pressure Liquid Chromatography Method	III
Methods that measure individual specific components (monomeric units: the whole range for each type of components is covered)⁽²⁾				
All foods ⁽¹⁾	Insoluble dietary fibres in food and food products	AOAC 991.42	Enzymatic gravimetric	III
All foods ⁽¹⁾	(1 \rightarrow 3)(1 \rightarrow 4) <i>Beta</i> -D-Glucans	AOAC 992.28	Enzymatic	III
All foods ⁽¹⁾	Soluble dietary fibres in food and food products	AOAC 993.19	Enzymatic gravimetric	III
All foods ⁽¹⁾	(1 \rightarrow 3)(1 \rightarrow 4) <i>Beta</i> -D-Glucans	AOAC 995.16	Enzymatic	III
All foods ⁽¹⁾	Fructans (oligofructoses, inulin, hydrolyzed inulin, polyfructoses, fructooligosaccharides)	AOAC 997.08	Enzymatic & HPAEC-PAD	III
All foods ⁽¹⁾	Fructans (oligofructoses, inulin, hydrolyzed inulin, polyfructoses, fructooligosaccharides)	AOAC 999.03	Enzymatic colorimetric	III
All foods ⁽¹⁾	Polydextrose	AOAC 2000.11	HPAEC-PAD	III
All foods ⁽¹⁾	Trans-galacto-oligo saccharides	AOAC 2001.02	HPAEC-PAD	III
All foods ⁽¹⁾	Resistant starch (Recommended for RS2 & RS3)	AOAC 2002.02	Enzymatic	III
Other methods⁽²⁾				
All foods	Insoluble glucans and mannans of yeast cell wall (for yeast cell wall only)	Eurasyp (European association for specialty yeast product) – LM Bonnanno. Biospringer- 2004 – online version : http://www.eurasyp.org/public.technique.home.screen .	Chemical & HPAEC-PAD	IV
All foods	Fructo-oligosaccharides (monomeric units <5)	Ouarné et al. 1999 in <i>Complex Carbohydrates in Foods</i> . Edited by S.	HPAEC-PAD	IV

Standard	Provisions	Method	Principle	Type
		Sungsoo, L. Prosky & M. Dreher. Marcel Dekker Inc, New York		
All foods	Non-starch polysaccharides (NSP) ⁽³⁾	Englyst H.N, Quigley M.E., Hudson G. (1994) Determination of dietary fibre as non-starch polysaccharides with gas-liquid chromatographic high performance liquid chromatographic or spectrophotometric measurement of constituent sugars – Analyst 119, 1497-1509	Enzymatic Gas-Liquid Chromatography Method	IV

⁽¹⁾ Users should consult the description of each method for the food matrices that were the subject of interlaboratory study in the Official methods of Analysis of AOAC International.

⁽²⁾ Two issues are left for national authorities: to include monomeric units 3-9 and which isolated or synthetic compounds have physiological benefit. (Refer to GL 2-1985)

⁽³⁾ Quantitation lost for resistant starch. Refer to specific methods.

⁽⁴⁾ Quantitation lost for inulin, resistant starch, polydextrose and resistant maltodextrins. Refer to specific methods.

II. Amendment to footnote 1 appended to the definition on dietary fibres in Guidelines for nutrition labelling – GL 2-1985

¹When derived from a plant origin, dietary fibre may include fractions of lignin and/or other compounds associated with polysaccharides in the plant cell walls. These compounds also may be measured by certain analytical method(s) for dietary fibre. However, such compounds are not included in the definition of dietary fibre if extracted and re-introduced into a food.

APPENDIX III

**PROPOSED DRAFT ANNEX TO THE CODEX GUIDELINES ON NUTRITION
LABELLING: GENERAL PRINCIPLES FOR ESTABLISHING NUTRIENT REFERENCE
VALUES OF VITAMINS AND MINERALS FOR THE GENERAL POPULATION**
(at Step 5 of the Procedure)

1. PREAMBLE

These principles apply to the establishment of Codex Nutrient Reference Values for labelling purposes (NRVs) for vitamins and minerals for the general population identified as individuals older than 36 months. These values may be used for helping consumers 1) estimate the relative contribution of individual products to overall healthful dietary intake and 2) as one way to compare the nutrient content between products.

A government may select to use the NRVs, or alternatively, consider the suitability of the general principles below and additional factors specific to a country or region in establishing their own nutrient reference values for labelling purposes. For example, at the national level, population-weighted values for the general population may be established by weighting science-based reference values for daily intakes for age-sex groups using census data for a country and proportions of each age-sex group. In addition, governments may establish nutrient reference values for food labelling that take into account country or region specific factors that affect nutrient absorption or utilization. Governments may also consider whether to establish separate nutrient reference values for food labelling for specific segments of the general population such as pregnant and lactating women.

2. DEFINITIONS

2.1. *Individual Nutrient Level 98 (INL₉₈)*¹ is the daily nutrient intake value that is estimated to meet the nutrient requirement of 98 percent of the apparently healthy individuals in a specific life stage and sex group.

2.2. *Upper level of intake (UL)*² is the maximum level of habitual intake from all sources of a nutrient judged to be unlikely to lead to adverse health effects in humans.

3. GENERAL PRINCIPLES FOR ESTABLISHING VITAMIN AND MINERAL NRVs**A. Selection of suitable data sources to establish NRVs**

Relevant and recent daily nutrient intake values provided by FAO/WHO should be taken into consideration as primary sources in establishing NRVs.

Relevant and recent values that reflect independent review of the science, from recognized authoritative scientific bodies other than FAO/WHO could also be taken into consideration.

B. Selection of the appropriate basis

The NRVs should be based on Individual Nutrient Level 98 (INL₉₈). In cases where there is an absence of an established INL₉₈ for a nutrient for a specific sub-group(s), it may be appropriate to consider the use of other reference values or ranges that have been established by recognized authoritative scientific bodies. The derivation of these values should be reviewed on a case-by-case basis.

The general population NRVs should be determined by calculating the mean values for a chosen reference population group older than 36 months. Nutrient Reference Values derived by the CCNFSDU are based on values for adult males (19 to 65 years) and females (19 to 50 years).}

¹ Different countries may use other terms for this concept, for example, Recommended Dietary Allowance (RDA), Recommended Daily Allowance (RDA), Reference Nutrient Intake (RNI), or Population Reference Intake (PRI).

² Different countries may use other terms for this concept, for example, Tolerable Upper Nutrient Intake Level (UL), or upper end of safe intake range.

For the purpose of establishing these NRVs, the values for pregnant and lactating women should be excluded.

C. Consideration of upper level of intake

The establishment of general population NRVs should also take into account upper level of intake established by recognized authoritative scientific bodies.

APPENDIX IV

**PROPOSED DRAFT ADDITIONAL OR REVISED NUTRIENT REFERENCE VALUES
FOR LABELLING PURPOSES IN THE CODEX *GUIDELINES ON NUTRITION***

LABELLING

(At Step 3 of the Procedure)

3.4 PRESENTATION OF NUTRIENT CONTENT

3.4.4 Numerical information on vitamins and minerals should be expressed in metric units and/or as a percentage of the Nutrient Reference Value per 100 g or per 100 ml on the ready to use product or per package if the package contains only a single portion. In addition, this information may be given per serving as quantified on the label or per portion provided that the number of portions contained in the package is stated.

In addition, information on protein may also be expressed as percentages of the Nutrient Reference Value.³

The following Nutrient Reference Values for labelling purposes (NRVs) are for the general population identified as individuals older than 36 months.

Vitamin A ($\mu\text{g RE}$) ~~800~~⁵ **550**⁴

Vitamin D (μg) ~~5~~⁵

Vitamin E (mg α -TE) 8.8⁶

Vitamin K (μg) 60

Vitamin C (mg) ~~60~~ **45**

Thiamin (mg) ~~1.4~~ **1.2**

Riboflavin (mg) ~~1.6~~ **1.2**

Niacin (mg **NE**) ~~18~~⁵ **15**⁷

Vitamin B₆ (mg) ~~2~~ **1.3**

Folic acid (μg) ~~200~~ **Folate ($\mu\text{g DFE}$) 400**⁸

Vitamin B₁₂ (μg) ~~1~~ **2.4**

³ In order to take into account future scientific developments, future FAO/WHO and other expert recommendations and other relevant information, the list of nutrients and the list of nutrient reference values should be kept under review.

⁴ ~~Proposed addition to Section 3.2.7 (Calculation of Nutrients) of the Codex Guidelines on Nutrition Labelling: "For the declaration of β carotene (provitamin A) the following conversion factor should be used: RE=retinol equivalents: 1 μg retinol = 1 μg RE; 1 μg β -carotene = 0.167 μg RE; 1 μg other provitamin A carotenoids = 0.084 μg RE~~

⁵ Nutrient Reference Values for Vitamin D and Iodine may not be applicable for countries where national nutrition policies or local conditions provide sufficient allowance to ensure that individual requirements are satisfied. See also section 3.2.6.1 of the Codex Guidelines on Nutrition Labelling.

⁶ α -TE = α -tocopherol equivalents: 1 mg RRR- α -tocopherol (*d*- α -tocopherol) = 1 mg α -TE; 1 mg β -tocopherol = 0.5 α -TE; 1 mg γ -tocopherol = 0.1 α -TE; 1 mg α -tocotrienol = 0.3 α -TE.; 1 mg all-*rac*- α -tocopherol (*dl*- α -tocopherol) = 0.74 α -TE.

⁷ NE = niacin equivalents; 60-to-1 conversion factor for tryptophan to niacin.

⁸ DFE = dietary folate equivalents; 1 μg food folate = 1 μg DFE; 1 μg folic acid = 1.7 μg DFE

Pantothenate (mg) 5.0

Biotin (µg) 30

Calcium (mg) ~~800~~ **1000**

Magnesium (mg) ~~300~~ **240**

Iodine (µg) 150³

Iron (mg) (% bioavailability)⁹ **14.3 (15 %)** **18.0 (12%)** **21.6 (10 %)** **43.1 (5 %)**

Zinc (mg) (% bioavailability)⁷ ~~15~~ **3.6 (high)** **6.0 (moderate)** **11.9 (low)**

Selenium ~~Value to be established~~ **(µg) 30**

Phosphorus (mg) 700*

Chloride (g) 2.3*

Copper ~~Value to be established~~ (µg) 900*

Fluoride (mg) 3.5*

Manganese (mg) 2.1*

Chromium (µg) 30*

Molybdenum (µg) 45*

* Value is based on the Institute of Medicine of the National Academies of Science in the United States.

⁹ Countries should determine the appropriate NRV that best represents the bioavailability of iron and of zinc in national diets. Guidance on determining the iron and zinc bioavailability of national diets can be found in the publication: WHO (2004) Vitamin and mineral requirements in human nutrition. 2nd Ed. World Health Organization, Geneva.

APPENDIX V

PROJECT DOCUMENT

REVISED PROPOSAL FOR NEW WORK TO AMEND THE CODEX GENERAL PRINCIPLES FOR THE ADDITION OF ESSENTIAL NUTRIENTS TO FOODS (CAC/GL 09-1987)**1. PURPOSE AND THE SCOPE OF THE PROPOSED NEW WORK**

The *Codex General Principles for the Addition of Essential Nutrients to Foods* (CAC/GL 09-1987) (*Principles*) provide guidance for the maintenance or improvement of the overall nutritional quality of foods through the addition of essential nutrients for the purpose of fortification (as defined in the *Principles*), restoration, and nutritional equivalence. The *Principles* also address the addition of essential nutrients to special purpose foods to ensure an adequate and appropriate nutrient content. The *Principles* aim to prevent the indiscriminate addition of essential nutrients to foods thereby decreasing the risk of health hazard due to essential nutrient excesses, deficits or imbalances. The principles are intended to apply to all foods to which essential nutrients are added.

Some jurisdictions, (for example, the European Community and Argentina), allow the addition of essential nutrients to foods for reasons other than those listed in the *Principles*, for example, voluntary (discretionary) additions to provide consumers with a greater variety of foods with added vitamins and mineral nutrients. Some of these jurisdictions indicate that restrictions for voluntary fortification should only be justified on the basis of safety and on the possibility to mislead consumers. The *Principles* thus no longer address all situations where essential nutrients are added to foods. A review of the *Principles* may be timely, including the extension of the basic principles to guide the voluntary addition of essential nutrients to foods.

An apparent gap in the *Principles* is that mandatory versus voluntary fortification by manufacturers is not explicitly addressed. Voluntary fortification occurs when a manufacturer freely chooses to fortify a food or foods. In some cases, the impetus for voluntary fortification comes from government, but more commonly the voluntary fortification appears to be the result of a growing interest on the part of consumers and the food industry for a wider selection of foods with added vitamin and mineral nutrients with plausible health benefits.¹⁰

Since the introduction of the *Principles* in 1987, and their subsequent amendments in 1989 and 1991, there have been a number of changes in the availability of fortified foods in countries and in approaches to controlling the addition of essential nutrients to foods.

In addition, the *Principles* do not take into consideration scientific advances in nutrient risk assessment, including related standards recently established by authoritative scientific bodies for Upper Levels of Intake.

In view of the expanded nutrient addition now occurring in many countries, the *Principles* need to be expanded to include principles for the voluntary addition of essential nutrients that do not meet the current criteria of fortification, restoration, nutritional equivalence or a special purpose food. The intent of the Principles, “To prevent the indiscriminate addition of essential nutrients to foods thereby decreasing the risk of health hazard due to essential nutrient excesses, deficits or imbalances”, would be equally applicable in this regard, but different means would be required to address it, such as, for example, application of Upper Levels of Intake.

The purpose of this proposed new work is to extend the “Basic Principles”, to also include principles for the safe voluntary addition of essential nutrients for the purpose of meeting recommended nutrient intakes and reducing the risk of inadequate intakes as demonstrated by relevant scientific data, in addition to “preventing or correcting a demonstrated deficiency of one or more nutrients in the population or specific population groups.” These principles would acknowledge and encourage rational

¹⁰ *Guidelines on Food Fortification with Micronutrients*. Edited by Lindsay Allen et al. WHO/FAO. 2006. pg 250.

and safe voluntary addition of essential nutrients to foods. The review of the general principles would evaluate the totality of the current document to ensure coherence and consistency of the principles and the guidance.

2. ITS RELEVANCE AND TIMELINESS

The work is in line with the Terms of Reference for the CCNFSDU including:

(a) to study specific nutritional problems assigned to it by the Commission and advise the Commission on general nutrition issues; and

(b) to draft general provisions, as appropriate, concerning the nutritional aspects of all foods.

The work is timely because of the increase in the voluntary addition of essential nutrients for purposes other than those stated in the *Principles* (namely, for the purpose of fortification (as currently defined), restoration, nutritional equivalence or special purpose).

It is essential that consumers be protected from risk to health due to nutrient excesses or imbalances. The addition of an essential nutrient to a food for any purpose must take into consideration all related health risks.

3. THE MAIN ASPECTS TO BE COVERED

The work would involve a review of the Codex General Principles for the Addition of Essential Nutrients to Foods to consider the addition of essential nutrients to foods for purposes beyond those currently stated in the current *Principles*, including an examination of how to protect consumers against excesses, deficits or imbalances.

One objective of the review of the *Principles* would be to re-affirm that these encompass voluntary fortification. The Committee could also consider the need to first clarify the similarities and differences in principles for mandatory versus voluntary fortification. For example, certain principles, such as the desirability of using scientific risk assessment to guide decision-making, may be applicable to all, whereas the nature and extent of the public health need would likely differ for voluntary versus mandatory addition.

Another objective of the review would be to consider the need to expand the definition of fortification to encompass the purpose of meeting recommended nutrient intakes and reducing the risk of inadequate intake as demonstrated by relevant scientific data, as well as the current purpose of preventing or correcting a demonstrated deficiency of one or more nutrients in the population or specific population groups.

To preserve the intent of the *Principles*, potential new work would also consider scientific advances in nutrient risk assessment. Such an approach would include consideration of criteria or principles related to:

- selection of appropriate foods to fortify (e.g., establishment of qualifying and /or disqualifying criteria),
- selection of nutrients to be added, and
- determination of levels to which permitted nutrients could be added according to scientific relevant data.

Finally, consideration would have to be given to whether the consumer could be misled as to the nutritional quality of the fortified food, and whether additional principles are needed to address this (e.g., principles related to labelling and claims).

4. AN ASSESSMENT AGAINST THE CRITERIA FOR THE ESTABLISHMENT OF WORK PRIORITIES

The proposed new work would assist governments in formulating policies with regard to both mandatory and voluntary addition of essential nutrients to foods.

The new work would also lessen impediments to international trade by providing clear guidance on considerations that need to be addressed with regard to the above.

5. RELEVANCE TO THE CODEX STRATEGIC OBJECTIVES

The proposed new work on the *Principles* is consistent with the strategic vision and goals outlined in the Codex Alimentarius Commission, Strategic Plan (2008-2013). It would contribute to: Goal 1 - Promoting sound regulatory frameworks and Goal 2 - Promoting widest and consistent application of scientific principles and risk analysis.

6. INFORMATION ON THE RELATION BETWEEN THE PROPOSAL AND OTHER EXISTING CODEX DOCUMENTS

The *Codex General Principles for the Addition of Essential Nutrients to Foods* may be considered by this Committee and other Codex Committees in the development or revision of Codex guidelines and standards. In addition, the revision of these principles may take into account related Codex texts such as the *Guidelines for Vitamin and Mineral Food Supplements*, and the *Guidelines on Formulated Supplementary Foods for Older Infants and Children*.

7. IDENTIFICATION OF ANY REQUIREMENT FOR AND AVAILABILITY OF EXPERT SCIENTIFIC ADVICE

None foreseen.

8. IDENTIFICATION OF ANY NEED FOR TECHNICAL INPUT TO THE STANDARD FROM EXTERNAL BODIES SO THAT THIS CAN BE PLANNED FOR

The Committee supports further consideration of the desirability and feasibility of the establishment of international Upper Levels of Intake. Such consideration may require scientific advice from WHO and FAO.

9. THE PROPOSED TIME-LINE FOR COMPLETION OF THE NEW WORK, INCLUDING THE START DATE, THE PROPOSED DATE FOR STEP 5 AND THE PROPOSED DATE FOR ADOPTION BY THE COMMISSION

Subject to approval by this (the 31st) Session of the Committee, the new work could commence following the 33rd Session of the Codex Alimentarius Commission meeting (2010). Proposed amendments to the *General Principles for the Addition of Essential Nutrients to Foods* could be circulated for government comments at Step 3 in 2010 following the 32nd Session of the CCNFSDU (2010). It is anticipated that the 33rd Sessions of the CCNFSDU (2011) could advance the document to Step 5 and the 35th Sessions of the CCNFSDU (2013) could advance the document to Step 8. Therefore, the work could be completed in four years.

Proposed timelines:

Start Date: 2010

Proposed Date for Adoption at Step 5: 2011

Proposed Date for Adoption by the Commission: 2014

APPENDIX VI

PROJECT DOCUMENT

PROPOSAL FOR NEW WORK FOR REVISION OF THE GUIDELINES ON FORMULATED SUPPLEMENTARY FOODS FOR OLDER INFANTS AND YOUNG CHILDREN (CAC/GL 08-1991)

The title of the Guidelines currently uses the term “supplementary”. However, WHO uses the term “complementary” in preference to “supplementary” (the term in use at the time the 1991 Guidelines were developed) or “weaning” for foods used in addition to breast milk or breast milk substitutes because these foods complement what breast milk or breast milk substitutes provides for infants over 6 months of age. The Committee should consider replacing the term “supplementary” with the term “complementary”.

Since the 1991 Guidelines were published, new international, evidence-based recommendations regarding energy requirements and nutrient needs from complementary food including formulated complementary foods (FCF) for older infants and young children have been established.

In addition, FCF have expanded in recent years from porridges to several types of food-based products including

- a) Ready-to-use products such as pastes and compressed bars;
- b) Food-based home fortificants typically containing high quality protein (e.g. milk proteins, soy proteins), high-quality vegetable oil, and (micro) nutrients.

These foods can be eaten directly or mixed with local complementary foods, thus improving the overall quality of local complementary foods.

1. PURPOSE AND SCOPE OF THE REVISION

The main purpose of the proposed revision is to update the Guidelines with regard to nutritional aspects of formulated complementary foods for older infants and young children, based on relevant science-based recommendations and updated Reference Nutrient Intakes (RNI) for children 7–12 months and 1–3 years of age. The proposed revision has five aims to consider:

- a) Amend the name and content of the Guidelines to reflect current terminology
- b) Revise energy and nutrient densities and recommended serving size and daily quantity of FCF for infants and young children
- c) Strengthen the Guidelines on the importance of key ingredients
- d) Update the Guidelines on effective processing methods to reduce or eliminate anti-nutrients
- e) Amend labelling provisions regarding the use of complementary foods

Not included in the scope of the proposed revision are non-food-based micro- or multi-nutrient powders used in the home (e.g. Sprinkles).

2. RELEVANCE AND TIMELINESS

These 1991 Guidelines are outdated with current evidence and need to be updated. The current recommended quantity of FCF, given in the Guidelines (CAC/GL 08-1991) is too large for breastfed and non-breastfed children 6–36 months of age and leaves almost no room for breast milk, breast milk substitutes or other milks and local foods. Furthermore, the recommended levels of fortification of vitamins and minerals are too low. The proposed revision is timely because countries and regions are currently in the process of developing standards for complementary foods and are trying to harmonize their actions with Codex. For example, the Uganda National Bureau of Standards is now working on “Improving the safety and quality of foods for infant and young children in Uganda”, and recommends

- a) Evaluating these types of products, including processing, hygiene, product safety and quality, in line with international recommendations and standards;
- b) Formulation of national standards and codes for the products’ specification, hygiene and

marketing of products in line with developments at the Codex Alimentarius Commission and WHO and FAO activities.

The East Africa Region (including Burundi, Kenya, Rwanda, Tanzania, and Uganda) is now in the process of harmonizing standards for infant foods based on Codex standards and guidelines.

3. MAIN ASPECTS TO BE CONSIDERED

The work is proposed to revise the title, scope and content of the Guidelines as well as revise Sections 2, 3, 4, 5, 6 and 9 and the Annex. Consistent with purpose and scope the work will update the Guidelines with respect to ingredients to be used, processing technology, daily serving sizes, energy from fat, fortification levels, and labelling provisions to be consistent with current science-based recommendations. In addition the work will update references to other Codex standards/guidelines referenced in the Guidelines that have since been revised.

4. ASSESSMENT AGAINST THE CRITERIA FOR THE ESTABLISHMENT OF WORK PRIORITIES.

The revision of these Codex Guidelines provides for protection of consumer health, food safety, ensuring fair practices in the international food trade and takes into account the identified needs of moderately malnourished and at-risk children aged 6–36 months.

The revision would assist governments in improving the quality of the foods used in feeding programs as well as those sold for use by older infants and young children, which will directly protect infant and young child health.

This would help ensure fair practices in international food trade so that products which do not meet the specified quality criteria would be accurately positioned and not inappropriately represented as a FCF.

This work also aims to update the contribution of international food standards and related texts to infant and young child health based on work already undertaken by other international organizations in this field, including WHO, UNICEF, FAO, WFP and UNHCR. Revision of the relevant Codex standards and guidelines is recommended by these international intergovernmental bodies.

5. RELEVANCE TO THE CODEX STRATEGIC OBJECTIVES

The proposed revision is consistent with the Strategic Plan 2008-2013 of the Codex Alimentarius Commission. It will contribute to: Goal 1 – Promoting sound regulatory frameworks, specifically Activity 1.3: “Review and develop Codex standards and related texts for food labelling and nutrition.”

It will also contribute to: Goal 2 - Promoting widest and consistent application of scientific principles. Updated evidence on energy needs from complementary foods, feeding frequency and gastric capacity for breastfed and non-breastfed infants as well as updated RNIs are the basis for this revision.

6. INFORMATION ON THE RELATION BETWEEN THE PROPOSAL AND OTHER EXISTING CODEX DOCUMENTS

The Codex Standard for Processed Cereal Based Foods for Infants and Young Children Codex Stan 074-1981, Rev. 1 -2006 includes information on many components of cereal-based foods but includes neither suggested amounts to be consumed daily nor comprehensive micronutrient levels.

This proposal for a revision of the Guidelines put forth by Ghana proposes changes to serving size, fortification levels, ingredients and processing methods for the wide range of foods that together constitute FCF.

7. IDENTIFICATION OF ANY REQUIREMENT FOR AND AVAILABILITY OF EXPERT SCIENTIFIC ADVICE

Recently developed guidance (2008) on complementary feeding of infants and young children 6 – 23 months of age from WHO and UNICEF would be considered.

8. IDENTIFICATION OF ANY NEED FOR TECHNICAL INPUT TO THE STANDARD FROM EXTERNAL BODIES SO THAT THIS CAN BE PLANNED FOR

Information from external bodies may be needed depending on the provision under consideration.

9. PROPOSED TIME-LINE FOR COMPLETION OF THE NEW WORK, INCLUDING THE START DATE, THE PROPOSED DATE FOR ADOPTION AT STEP 5, AND THE PROPOSED DATE FOR ADOPTION BY THE COMMISSION; THE TIME FRAME FOR DEVELOPING A STANDARD SHOULD NOT NORMALLY EXCEED FIVE YEARS

Activity	Step/date
The 31 st CCNFSDU agrees the work to be undertaken	November 2009
33 rd Session of the Commission approves new work	July 2010
Guidelines are circulated for comments for consideration by the 32 nd Session of the CCNFSDU, 2010	Step 3/ 2010
Provisional adoption by the 34 th Session of the Commission, July 2011	Step 5/ July 2011
Final adoption by the 35 th Session of the Commission	Step 8/ 2012

APPENDIX VII

PROJECT DOCUMENT

PROPOSAL FOR NEW WORK TO AMEND THE CODEX GUIDELINES ON NUTRITION LABELLING TO ESTABLISH NUTRIENT REFERENCE VALUES FOR NUTRIENTS ASSOCIATED WITH RISK OF DIET-RELATED NONCOMMUNICABLE DISEASES FOR THE GENERAL POPULATION**1. PURPOSE AND SCOPE OF THE PROPOSED WORK**

WHA Resolution 57.17 endorsed the Global Strategy on Diet, Physical Activity and Health (hereafter referred to as the “Global Strategy”) and requested that the Codex Alimentarius Commission continue to give full consideration, within the framework of its operational mandate, to evidence-based action it might take to improve the health standards of foods, consistent with the aims and objectives of the Global Strategy. It noted that public health efforts may be strengthened by the use of international norms and standards, particularly those by Codex, and identified as an area for further development labelling to allow consumers to be better informed about the content of foods.

The main purpose of this proposed work is to:

- a) Establish Codex principles and criteria for the development of NRVs for labelling purposes for nutrients associated with risk of diet-related noncommunicable diseases for the general population *aged older than 36 months* ; and
- b) Establish NRVs for selected nutrients based on these principles and criteria.

2. RELEVANCE AND TIMELINESS

The work is relevant and timely with respect to the implementation of the Global Strategy as a means to address the global burden of diet-related noncommunicable diseases.

The work is in line with the terms of reference for the CCNFSDU including:

- a) to study specific nutritional problems assigned to it by the Commission and advise the Commission on general nutrition issues; and
- b) to draft general provisions, as appropriate, concerning the nutritional aspects of all foods.

In its draft action plan for implementing the Global Strategy, the WHO and FAO proposed that the CCNFSDU and CCFL consider the development of NRVs for labelling purposes for nutrients that are associated with both increased and decreased risk of noncommunicable diseases (CL 2006/44-CAC). Currently, Section 3.4.4 of the *Codex Guidelines on Nutrition Labelling* (CAC/GL 2-1985, (Rev. 1-1993) (hereafter referred to as the Guidelines) permits the voluntary declaration of amounts of protein and 14 vitamins and minerals as a percentage of the Nutrient Reference Values for Labelling Purposes (NRVs) as a means of informing the consumer of the significance of the quantities contained in a food.

In a related matter, the Commission approved new work for the CCFL to consider amendments to the Guidelines concerning the list of nutrients in Section 3.2 that should always be declared on a voluntary or mandatory basis (ALINORM 08/31/REP, Appendix X). With regard to this list, the CCFL proposed at their last meeting to add saturated fat and total sugars, and to retain sodium/salt, *trans*-fatty acids, added sugars, and dietary fibre in square brackets for further consideration (ALINORM 09/32/22, paras 13-42 and Appendix II). The CCFL referred certain issues to CCNFSDU including a request to consider inclusion of saturated fat and sodium in relation to nutrient reference values for nutrients associated with risk of noncommunicable diseases (ALINORM 09/32/22 para 42).

3. THE MAIN ASPECTS TO BE COVERED

The work would first address the development of principles including criteria for establishing NRVs for nutrients associated with risk of diet-related noncommunicable diseases in an Annex to the

Guidelines. The CCNFSDU would then propose amendments to the listing of NRVs in section 3.4.4 based on these principles.

The first priority in selecting nutrients for review are nutrients that are referred to CCNFSDU by CCFL. The second priority are other nutrients that meet the criteria defined in the principles that the Committee will establish.

4. AN ASSESSMENT AGAINST THE CRITERIA FOR THE ESTABLISHMENT OF WORK PRIORITIES

This work meets Codex criteria for the establishment of work priorities and would enhance protection of consumer health, help ensure fair practices in food trade, and take into account the identified needs of developing countries.

5. RELEVANCE TO THE CODEX STRATEGIC OBJECTIVES

This work would contribute to the following goals identified in the Codex Alimentarius Commission Strategic Plan 2008-2013:

- Promoting sound regulatory frameworks (specifically 1.3- review and develop Codex standards and related texts for food labelling and nutrition)
- Promoting widest and consistent application of scientific principles and risk analysis
- Promoting cooperation between Codex and relevant international organizations

6. INFORMATION ON THE RELATION BETWEEN THE PROPOSAL AND OTHER EXISTING CODEX DOCUMENTS

In a related matter, the Commission approved new work for the CCNFSDU to develop general principles for the establishment of NRVs for vitamins and minerals in the Guidelines on Nutrition Labelling, and to revise and expand the vitamin and mineral NRVs in Section 3.4.4 based on these principles (ALINORM 08/31/rep, Appendix X). The CCNFSDU recognizes the need to closely coordinate these two areas of work.

7. IDENTIFICATION OF ANY REQUIREMENT FOR AND AVAILABILITY OF EXPERT SCIENTIFIC ADVICE

Expert scientific advice on diet-related noncommunicable disease is available through recent and comprehensive reviews by WHO/FAO and other recognized authoritative bodies.

8. IDENTIFICATION OF ANY NEED FOR TECHNICAL INPUT TO THE STANDARD FROM EXTERNAL BODIES SO THAT THIS CAN BE PLANNED FOR

Information from external bodies may be needed depending on the nutrient under consideration.

9. THE PROPOSED TIME-LINE FOR COMPLETION OF THE NEW WORK, INCLUDING THE START DATE, THE PROPOSED DATE FOR ADOPTION AT STEP 5, AND THE PROPOSED DATE FOR ADOPTION BY THE COMMISSION. THE TIME FRAME FOR DEVELOPING A STANDARD SHOULD NOT NORMALLY EXCEED FIVE YEARS.

Activity	Step/date Principles	Step/date NRVs*
The 31 st CCNFSDU agrees the work to be undertaken	November 2009	November 2009
33 rd Session of the Commission approves new work	July 2010	July 2010
Principles are circulated for comments for consideration by the 32 nd Session of the CCNFSDU, 2010	Step 3/ 2010	
NRVs are circulated for comments for consideration by the 32 nd Session of the CCNFSDU, 2010		Step 3/2011

Adoption by the 34 th Session of the Commission	Step 5/2011	
Consideration at the 33 rd CCNFSDU	Step 7/ 2011	
Adoption by the 35 th Session of the Commission		Step 5/2012
Consideration at the 34 rd CCNFSDU		Step 7/ 2012
Final adoption by the 36 th Session of the Commission	Step 8/ 2013	Step 8/ 2013

* Longer timeframe for NRVs might be required.