

codex alimentarius commission



FOOD AND AGRICULTURE
ORGANIZATION
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Agenda Item 14 (j)

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JOINT FAO/WHO FOOD STANDARDS PROGRAMME CODEX COMMITTEE ON FOOD ADDITIVES AND CONTAMINANTS

Thirty-eighth Session

The Hague, the Netherlands, 24 – 28 April 2006

PROPOSED DRAFT REVISED GUIDELINE LEVELS FOR RADIONUCLIDES IN FOODS FOR USE IN INTERNATIONAL TRADE

Comments at Step 3 submitted by Canada, Lithuania, United States and Venezuela

CANADA

Canada does not object to the proposed upper limit levels of radionuclides in foods and supports separation of radionuclide contamination limits for infant foods from other foods. The only suggestion to the proposed table is the addition of a footnote concerning sulphur ³⁵S (similar to tritium), as follows :

“This represents the value for organically-bound sulphur.”

Furthermore, Canada considers that the lapse of time designated as the “emergency period” following a nuclear accident could perhaps be better defined. Should the limits indicated be understood as acceptable upper limits of radionuclide contamination for foods in international trade for the one year period following a nuclear accident? What would be the acceptable limits of radionuclide contamination two, three or five years later?

LITHUANIA

Lithuania supports in general the proposal and thinks it is reasonable.

Lithuania only has a few comments to it.

Since foodstuffs can be contaminated with radionuclides other than listed in Table 1 (especially when radioactive materials used for terroristic purposes) Article “Radionuclides” of Appendix should be amended with words: “In these cases when food is contaminated with other than mentioned radionuclides, possible doses of critical group must be estimated before taking a decision on possible consumption of this food. Only food with annual effective dose which not exceed an interventional exemption level of 1 mSv can be consumed.”

It is unclear from the project how long after the emergency the proposed Guideline Levels for Radionuclides in Foods will be applied. Contamination levels which are still used after the radiation accident at Chernobyl Nuclear Power Plant are based on constrain dose, which is lower than interventional exemption level of 1 mSv. We think that the more strict levels which are used at the moment helps to optimize the radiation protection so, the increase of allowed contamination levels may led to not optimised public exposure. It is also very important because if the scope of the document will be described unclearly, public concern (because of exposure received via food consumption) may increase.

We also have some doubts on the attitude to treat every group of radionuclides separately. In similar cases (for example, in taking a decision on whether clearance level for materials contaminated with radionuclides can be used) all possible doses of each radionuclide should be taken into account usually.

UNITED STATES

This is in response to CX/FAC 06/38/38, requesting comments at Step 3 on the proposed draft revised Guideline Levels for Radionuclides in Foods Contaminated Following a Nuclear or Radiological Emergency for Use in International Trade. This document will be considered at the 38th Session of the Codex Committee on Food Additives and Contaminants (CCFAC).

GENERAL COMMENTS

The United States (U.S.) supports the development of Guideline Levels for radionuclides in foods contaminated following a nuclear or radiological emergency for use in international trade.

The proposed draft document states that Guideline Levels are based on an intervention exemption level of 1 mSv in a year. As indicated in Table 2 (Assessment of Effective Dose for Infants and Adults from Ingestion on Imported Foods in a Year), the assessed effective dose for organically bound ^3H (tritium) for Infants and Adults is 0.002 mSv and 0.02 mSv, respectively. Therefore, due to the very low effective dose assessed for Infants and Adults, the U.S. proposes the establishment of additional Guideline Levels for organically bound tritium of 100,000 Bq/kg for “Infant Foods” and 100,000 Bq/kg for “Other Foods” categories. This will raise the assessed effective dose to 0.2 mSv for both Infants and Adults, well below the intervention exemption level of 1mSv in a year.

In addition, due to the low assessed effective dose for ^{35}S , ^{103}Ru and ^{192}Ir for Adults, the U.S. proposes to group these radionuclides with ^{14}C and ^{99}Tc . This would revise Guideline Levels for ^{35}S , ^{103}Ru and ^{192}Ir from 1,000 Bq/kg to 10,000 Bq/kg for the “Other Foods” category while leaving the Guideline Levels for “Infant Foods” at 1000 Bq/kg. Thus, while the effective dose for Infants for ^{35}S , ^{103}Ru , and ^{192}Ir remain at 0.2, 0.1 and 0.3 mSv, respectively, the effective dose for Adults will increase to 0.4, 0.4, and 0.8 mSv, respectively, again well below the intervention exemption level of 1mSv in a year.

VENEZUELA

Venezuela suggests that the title be replaced by the title in the appendix, which reads: Proposed Draft Revised Guideline Levels for Radionuclides in Foods contaminated as a result of a nuclear or radiological emergency in International Trade.

In the Revision of Annex I, page 6, Assessment of long-term exposure, it is suggested that one should be more specific and define the term ‘Long-Term’.