

CODEX ALIMENTARIUS COMMISSION



Food and Agriculture
Organization of the
United Nations



World Health
Organization

Viale delle Terme di Caracalla, 00153 Rome, Italy - Tel: (+39) 06 57051 - E-mail: codex@fao.org - www.codexalimentarius.org

Agenda Item 4a, 4c, 4d, 5b, 6b, 8, 9a, 9b, 10, 11 and 12

NFSDU/41 CRD 25

Original language only

JOINT FAO/WHO FOOD STANDARDS PROGRAMME CODEX COMMITTEE ON NUTRITION AND FOODS FOR SPECIAL DIETARY USES

Forty-first Session

Dusseldorf, Germany
24 – 29 November 2019

Comments by Thailand

AGENDA ITEM 4A)

Thailand would like to express our appreciation for the electronic working group (eWG) led by New Zealand, France and Indonesia for preparing a document for Review of the Standard for Follow-Up Formula (CODEX STAN 156-1987): Draft scope, description and labelling for follow-up formula for older infants (at Step 6) (REP19/NFSDU, Appendix III).

We would like to provide comments on this subject as follows:

9.2 List of Ingredients and 9.3 Declaration of Nutritive Value

We agree with the amendment proposal by the CCFL in section 9.2.2 as the functional classes were applicable to food additives and not ingredients as required by section 4.2.3.3 of GSLPF as follows;

“9.2 List of Ingredients

9.2.1 A complete list of ingredients shall be declared on the label in descending order of proportion except that in the case of added vitamins and minerals, these ingredients may be arranged as separate groups for vitamins and minerals. Within these groups the vitamins and minerals need not be listed in descending order of proportion.

9.2.2 The specific name shall be declared for ingredients of animal or plant origin and for food additives. In addition, appropriate functional classes for these ~~ingredients and~~ additives may be included on the label. The food additives INS number may also be optionally declared.”

9.4 Date Marking and Storage Instructions

9.4.1 (i) The “Best Before Date” or “Best Quality Before Date”

According to the terms in the General Standard for the Labelling of Prepackaged Foods (CX 1-1985), “Use-by Date” or “Expiration Date” can clearly demonstrate both safety and quality. The older infants at the ages of 6 to 12 months are susceptible to microbiological risk and malnutrition. The products must be consumed before the date marking to ensure safety and quality. Therefore, we proposed that the term “Use-by Date” or “Expiration Date” should be used in this provision, rather than “Best Before Date” or Best Quality Before Date”

9.6 Additional Labelling Requirements

The term “cross promotion” has not been clear, therefore, we propose deleting the last sentence to avoid confusion to consumer as follows;

“9.6.4 Products shall be distinctly labelled in such a way as to avoid any risk of confusion between infant formula, follow-up formula for older infants, (name of product) for young children, and formula for special medical purposes, in particular as to the text, images and colours used, to enable consumers to make a clear distinction between them, ~~Cross promotion between product categories is not permitted on the label/labelling of the product.~~”

AGENDA ITEM 4C)

Thailand would like to express our appreciation for the electronic working group (eWG) led by New Zealand, France and Indonesia for preparing a document for Proposed draft product definition and labelling for [product] for young children (at Step 4).

We would like to provide comments on this subject as follows:

PREAMBLE

We propose text and to insert the word “promote” in the first sentence as follows:

“The Codex Alimentarius Commission acknowledges the need to ~~protect, promote and support~~ ~~recognize~~ breastfeeding as an unequalled way of providing ideal food for the healthy growth and development of infants. At the same time Codex acknowledges that numerous formulae have been produced, intended for use, where ~~necessary~~ ~~appropriate~~, as a substitute for human milk in meeting the normal nutritional requirements of infants provided they are prepared under hygienic conditions and given in adequate amounts. In addition, various products have also been produced intended specifically for young children as they progress to a more diversified diet of family foods and these products should not discourage breastfeeding.

The production, distribution, sale and use of follow-up formula for older infants and [name of product] for young children should be consistent with national health and nutrition policies and relevant national/regional legislation, and take into account, ~~as appropriate~~, the recommendations made in the International Code of Marketing of Breast-milk Substitute (1981) and the Global Strategy for Infant and Young Child Feeding.

Relevant WHO guidelines and policies as well as relevant World Health Assembly (WHA) resolutions that have been ~~endorsed~~ ~~supported~~ by member states ~~may also~~ provide guidance to countries in this context.

This Standard is divided into two sections. Section A refers to Follow-up Formula for Older Infants (6 to 12 months of age), and Section B deals with [Name of Product] for Young Children (12 to 36 months of age). It does not apply to products covered by the Codex Standard for Infant Formula (CXS 72 – 1981).

2 DESCRIPTION**2.1 Product Definition**

We agree on the proposed text with additional amendment as follows;

“2.1.1 **[Name of product] for young children** means a product ~~specifically formulated and~~ manufactured for use ~~as a breast-milk substitute~~, as a liquid part of the ~~progressively~~ [diversified] diet of young children **[in order to contribute to the nutritional needs of young children]** ~~when nutrient intakes may not be adequate to meet nutritional requirements.~~”

9.2 List of Ingredients and 9.3 Declaration of Nutritive Value

We agree on the amendment proposal by the CCFL in section 9.2.2 as the functional classes were applicable to food additives and not ingredients as required by section 4.2.3.3 of GSLPF and the units in Section 9.3 should be in the abbreviated form (e.g., ml) as more appropriate for labelling propose and in line with the standard for follow-up formula for older infant.

9.4 Date Marking and Storage Instructions**9.4.1 (i) The “Best Before Date” or “Best Quality Before Date”**

According to the terms in the General Standard for the Labelling of Prepackaged Foods (CXS 1-1985), “Use-by Date” or “Expiration Date” can clearly demonstrate both safety and quality. The young children at the ages of 12 to 36 months are susceptible to microbiological risk and malnutrition. The products must be consumed before the date marking to ensure safety and quality. Therefore, we proposed that the term “Use-by Date” or “Expiration Date” should be used in this provision, rather than “Best Before Date” or Best Quality Before Date.”

9.6 Additional Labelling Requirements

We propose to remove the text in the square bracket as follows:

“**[9.6.1 The label of [name of product] for young children shall have no image, text or representation [including pictures of feeding bottles], that could undermine or discourage breastfeeding or which idealises the use of [name of product] for young children. The terms ‘humanized’, ‘maternalized’ or other similar terms must not be used on the label.]**”

AGENDA ITEM 4D)

Thailand would like to express our appreciation for the electronic working group (eWG) led by New Zealand, France and Indonesia for preparing a document for Proposed draft follow up formula for older infants and [product] for young children (CX/NFSDU 19/41/5).

We would like to provide comments as follows:

Recommendation 9

For clarity and consistency with follow up formula for older infants, we prefer to use option 2.

“Option 2: Adopt the text from the Infant Formula Standards and the Standard for Processed Cereal-based foods for Infants and Young Children for the carry-over of food additives and nutrient carriers.”

Recommendation 13

To avoid repetition, we agree that the packaging gases are only listed in the Section 4 Food Additives. Therefore, the packing media in section 7.1 should be removed.

APPENDIX II: SECTION 4 FOOD ADDITIVES

We agree with the revised table in the Section 4 - Food Additives (Appendix II).

AGENDA ITEM 5B)

Thailand would like to express our appreciation for the electronic working group (eWG) led by South Africa, Senegal and Uganda for preparing a document for Proposed Draft Guidelines for Ready-to-use Therapeutic Foods (CX/NFSDU 19/41/6).

We would like to provide comments as follows:

4. SUMMARY OF DISCUSSION

4.1 Food Additives

Recommendation 1:

We agree to the proposed list of food additives and their functional class in Table I. And, we prefer Option 1 as the reference should be based on relevant infant and young children standards such as CXS 72-1981, CXS 156-1987 and CXG 8-1991.

Recommendation 2:

Seeking advice from CCFA

We agree that CCNFSDU should ask CCFA to confirm if RUTF Guidelines belong to FC 13.3 and if FC 13.3 is the right FC then CCFA should consider aligning the proposed food additives listed in Table 1 of this document with Food category 13.3 of the GSFA.

Recommendation 3:

We agree with proposed text in RUTF Guidelines.

Recommendation 4.1:

We agree to the proposed protein value in RUTF Guidelines.

Recommendation 4.2:

We agree to the proposed texts on protein quality assessment in RUTF Guidelines.

Recommendation 5:

Processing Technologies

We agree to the proposed texts on “Processing Technologies” in RUTF Guidelines.

APPENDIX II: Proposed Draft Guidelines for Ready to use Therapeutic Foods (RUTF)

1. PREAMBLE

- the first paragraph

We note that RUTF has been used as the therapeutic foods for children with severe acute malnutrition (SAM). To avoid misuse, the RUTF should only be used with a specific age group from 6 to 59 months. Therefore, we propose to delete last sentence as follows;

“1. PREAMBLE

Children affected by severe acute malnutrition (SAM)... ~~[Since RUTF are prescribed according to weight, National Authorities may decide to include the provision of RUTF in their national protocols for use by other age groups].”~~

Section 12. LABELLING

Additional Mandatory Labelling Requirements

It is important to note that RUTF has been used as the therapeutic foods for children with severe acute malnutrition in short period; however, the RUTF is not the breastmilk substitutes. Therefore, we propose to remove the bullet 7 as follows;

“Additional Mandatory Labelling Requirements

The following statements shall appear on the label of RUTF:

"USE UNDER MEDICAL SUPERVISION" shall appear on the label in bold letters in an area separated from the written, printed, or graphic information.

"For the dietary management of severe acute malnutrition" shall appear on the label.

A prominent warning statement consisting of an explanatory statement in bold letters indicating that RUTF are for special medical purposes and may pose a health hazard when consumed by individuals who do not have the disease(s), disorder(s) or medical condition(s) for which the food is intended.

The product is not to be used for parenteral, rectal or Nasogastric Tube (NG tube) administration.

A statement indicating whether the product is or is not intended as the sole source of nutrition.

A statement indicating that RUTF are not breastmilk substitutes and shall not be presented as such.

~~[Exclusive breastfeeding is recommended for the first 6 months of life, and continued breastfeeding is recommended for at least 24 months.]~~

Instructions for use

The label should indicate clearly from which age the product is recommended for use. This age shall not be less than six months for any product.

Feeding instructions shall be given; preferably accompanied by graphical presentations.

The time in which the product should be consumed after opening should be clearly indicated.”

AGENDA ITEM 6B)

Thailand would like to express our appreciations for the efforts of Canada for preparing a Discussion Paper on Risk management possibilities for the reduction of TFAs (CX/NFSDU 19/41/7).

We would like to provide comments as follows:

Table 1. Risk management roles for Codex to reduce population-level intake of trans fatty acids.

We agree with option C: Adopt regulations that prohibit the use of partially hydrogenated oil (PHO) in processed foods.

Since Thailand has issued a law to prohibit the use of PHOs. Consequently, we implement the monitoring plan for the detection of PHOs using the analytical methods approved by the AOAC International. The outcomes of this implementation are used to revise the monitoring plan annually. Moreover, our studies have shown that the prohibition of PHOs can effectively control PHOs in the finished products. Those of Thailand’s studies are as follows:

- “Thailand’s Situation and Food Policy on Trans Fat”
- “Overcoming the Trans Fat Problem in Thailand”

The full publication can be viewed as the attached documents.

AGENDA ITEM 8)

Thailand would like to express our appreciations for the electronic working group (eWG) led by Ireland, United States of America and Mexico for preparing a document for Discussion paper on NRV-R for older infants and young children (CX/NFSDU 19/41/8).

We would like to provide comments as follows:

General comments

In principle, we agree with the document. Since, there are information, i.e. nutrients and value, for consumers.

However, we propose that this work be carried out by the Joint FAO/WHO Expert Meetings on Nutrition (JEMNU), the scientific advice mechanism (JEMNU) with high credibility and acceptance from all parties concerned.

AGENDA ITEM 9A)

Thailand would like to express our appreciation for the efforts of the European Union and the Russian Federation for preparing a document for Mechanism/framework for considering the technological justification of food additives (CX/NFSDU 18/40/11).

We would like to provide comments as follows:

In principle, Thailand agrees to continue the work on align food additive provisions in CCNFSDU texts with the GSFA.

From our view, the sufficient information has been provided to demonstrate the technological need for the three additives. Therefore, we agree with the technological need for the proposed use of xanthan gum (INS 415), pectin (INS 440) and gellan gum (INS 418) taking into account the information submitted by the applicant (Annex D).

AGENDA ITEM 9B)

Thailand would like to express our appreciation for the efforts of Germany for preparing a document for Alignment of food additive provisions in CCNFSDU standards with the GSFA (CX/NFSDU 19/41/9).

We would like to provide comments as follows:

Part A Standard for Infant Formula and Formulas for Special Medical Purposes Intended for Infants (CXS 72-1981)

Food category 13.1.1:

We agree with the proposed text that adding a new note to the provisions for Lecithin and Mono- and diglycerides of fatty acids as follows:

“If Lecithin (INS 322 (i)) is used in combination with Mono- and diglycerides of fatty acids (INS 471) the maximum level for each of the substances is lowered with the relative part as present of the other substance.”

6. Section 7.1 Packaging)CXS 72-1981)

To avoid repetition, we agree that the packaging gases are only listed in the Section 4 Food Additives. Therefore, the packing media in section 7.1 should be removed.

AGENDA ITEM 10

Thailand would like to express our appreciations for the efforts of the Secretariat for preparing a Discussion paper on a prioritization mechanism to better manage the work of CCNFSDU (CX/NFSDU 19/41/10).

We would like to provide comments as follows:

General comments

We would like to support the prioritization mechanism using a decision tree. However, the prioritization should be fit to the CCNFSDU's objectives. Thus, we would like to propose the arrangement of the criteria to score or rate priority into high, medium and low impact as follows:

1. Impact on the CCNFSDU objective criteria such as consumer health, food safety, nutritional values and fair practices in food trade.
2. Available scientific evidence and scientific advice from experts such as FAO / WHO / JEMNU.
3. Working process by considering requests from the CAC, member country, member organization, other Codex committees, FAO, WHO, respectively.
4. Target groups such as infants, young children, elderly, malnutrition, general population.

AGENDA ITEM 11

Thailand would like to express our appreciations for the efforts of Argentina for preparing a Discussion paper on harmonized probiotic guidelines for use in foods and dietary supplements (CX/NFSDU 19/41/11).

We would like to provide comments as follows:

This proposal on new work to define probiotic is important as probiotic has been used in both foods for human and animal including food supplement. Evidence on safety and potential health benefits should have strongly scientific evidences. However, we note that this document should be considered in accordance with the priority mechanism by taking into account the criteria of prioritize and specific to CCNFSDU.

AGENDA ITEM 12)

Thailand would like to express our appreciations for the efforts of Costa Rica, the United States of America and Paraguay for preparing a Discussion paper on General guidelines to establish nutrient profiles (CX/NFSDU 19/41/12).

We would like to provide comments as follows:

General comments

Nutritional Information on the label should give only the essential detail which is directly related to the non-communicable disease and it should be simple for the consumers to understand. Therefore, we propose to establish the guidelines on the nutrient profiles which are specific to consumer groups such as children, mothers, healthy diet groups with their dietary concerns (e.g., low fat, low sodium, low sugar). From our experience, Thailand has announced the Healthier Choice by using the nutritional logo in 2016. This logo can educate the consumers.

In this connection, we are pleased to present our Guidelines for applying the “Healthier Choice” nutritional logo in 2016)see <https://bit.ly/331m2XS>) which the guidance approves by the National Strategic Steering Committee on linkage food, nutrition for the better quality of life, under the National Food Committee and conform with the Public Health Ministry Notification on food labelling. Moreover, the Guidelines are review every five years.