

codex alimentarius commission



FOOD AND AGRICULTURE
ORGANIZATION
OF THE UNITED NATIONS

WORLD
HEALTH
ORGANIZATION



JOINT OFFICE: Viale delle Terme di Caracalla 00153 ROME Tel: 39 06 57051 www.codexalimentarius.net Email: codex@fao.org Facsimile: 39 06 5705 4593

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 microbioassay 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 Rodrigez, 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 CCNFSDU 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

**LIST OF PARTICIPANTS
LISTE DES PARTICIPANTS
LISTA DE PARTICIPANTES**

CHAIRPERSON/PRESIDENT/PRESIDENTE

Dr Rolf Grossklaus
Director and Professor
Federal Institute for Risk Assessment (BfR)
P.O. Box 33 00 13
14191 Berlin,
Germany
Tel: +49 (30) 8412 – 3230
Fax: +49 (288) 99 529 – 4965
E-Mail: ccnfsdu@bmelv.bund.de

VICE CHAIRPERSON / VICE PRÉSIDENT / VICE PRESIDENTE

Dr Lorena Rodriguez
Medical Doctor
Ministry of Health
Mac Iver 459 8° Floor
Food and Nutrition Department
Santiago
Chile
Tel.: +56 (2) 5740 474
E-Mail: lrodriguez@minsal.cl

***ASSISTANTS TO THE CHAIRPERSON/ASSISTANT AU PRÉSIDENT/
ASISTENTE AL PRESIDENTE***

Ms Katharina Adler
Federal Ministry of Food, Agriculture
and Consumer Protection
Rochusstraße 1
53123 Bonn
Germany
Tel: +49 (228) 99 529 4647
Fax: +49 (228) 99 529 4965
E-Mail: ccnfsdu@bmelv.bund.de

**MEMBER COUNTRIES/PAYS MEMBRES/
PAYSES MIEMBROS**

ARGENTINA / ARGENTINE

Prof Maria Luz Martinez
Farm./Lic. en Industrias
Ministerio de Salud de la Nación
ANMAT / INAL
Estados Unidos 25
1101 Ciudad Autónoma de Buenos Aires
Argentina
Tel.: +54 (11) 4340 0800 int 3514
Fax: +54 (11) 4373 2001
E-Mail: mmartin@anmat.gov.ar

Mrs Elizabeth Miriam Kleiman

Lic. Nutrición
Ministerio de Agricultura, Ganadería y Pesca de la Nación
Av. Paseo Colón 922 Piso 2 Of. 226
C1063ACW Buenos Aires
Argentina
Tel.: +54 (11) 4349 2175
Fax: +54 (11) 4349 2097
E-Mail: ekleim@minprod.gov.ar

Dr Maria Cristina **López**
 Licenciada en Ciencias Químicas
 Instituto Nacional de Tecnología
 Industrial-Cereales y Oleaginosas
 Colectora Gral Paz 5445
 1650 San Martín – Provincia de Buenos Aires
 Argentina
 Tel.: +54 (11) 4753 5743
 Fax: +54 (11) 4653 5743
 E-Mail: kitty@inti.gob.ar

AUSTRALIA / AUSTRALIE

Ms Janine **Lewis**
 Principal Nutritionist
 Food Standards Australia New Zealand
 P.O.Box 7186
 Canberra BC ACT 2610
 Australia
 Tel.: +61 (2) 6271 2245
 Fax: +61 (2) 6271 2278
 E-Mail: janine.lewis@foodstandards.gov.au

AUSTRIA/AUTRICHE

Dr Fritz **Wagner**
 Dept. Director
 Federal Ministry of Health
 Radetzkystrasse 2
 1030 Vienna
 Austria
 Tel.: +43 (1) 71100 4426
 Fax: +43 (1) 713404 1644
 E-Mail: fritz.wagner@bmg.gv.at

Mr Andreas **Kadi**
 Chief Science Officer
 Red Bull GmbH
 Am Brunnen 1
 5330 Fuschl am See
 Austria
 Tel.: +43 662 6582 7249
 Fax: +43 662 6582 67249
 E-Mail: andreas.kadi@at.redbull.com

BANGLADESH

Mr Mohammad Nazrul **Islam**
 Embassy of the Peoples Republic of Bangladesh
 Dovestraße 1
 10587 Berlin
 Germany
 Tel.: +49 (30) 3989 7540
 Fax: +49 (30) 3989 7510
 E-Mail: chancery@bangladeshembassy.de

BELGIUM / BELGIQUE / BELGICA

Pascale **De Gryse**
 Expert
 Service public fédéral de la Santé Publique, Sécurité de
 la Chaîne alimentaire et Environnement
 Eurostation Bloc II
 Place Victor Horta 40 bte 10
 1060 Bruxelles
 Belgium
 Tel.: +32 (0) 2 524 7368
 Fax: +32 (0) 2 524 7399
 E-Mail: pascale.degryse@health.fgov.be

BENIN/BENIN

Dr Yombo **Maleté**
 Directeur de l'Alimentation et de la Nutrition Appliquée
 (DANA) ; Ministère de l'Agriculture, de l'Elevage et de
 la Pêche
 Boulevard lagunaire de Porto-Novo
 3^e Arrondissement de Porto-Novo
 BP 295 Porto-Novo
 Benin
 Tel.: +229 2021 2670
 Fax: +229 2021 3963
 E-Mail: maepdana@ymail.com/yombomaleté@yahoo.fr

BOLIVIA / BOLIVIE

Ms Catalina **Fuentes Zenteno**
 Ingeniero en Alimentos
 Unidad Nutritión
 Ministerio de Salud y Deportes
 Calle Capitan Ravelo # 2199
 La Paz
 Bolivia
 Tel.: +591 (2) 2427 259
 Fax: +591 (2) 2427259
 E-Mail: catalina_csfz@hotmail.com

BRAZIL / BRÉSIL / BRASIL

Mrs Elisabete **Gonçalves Dutra**
 Technical Assistant
 National Health Surveillance Agency – Anvisa
 SIA, Trecho 5, Área Especial 57
 71205-050 Brasilia – DF
 Brazil
 Tel.: +55 (61) 3462 5333
 Fax: +55 (61) 3462 5315
 E-Mail: elisabete.goncalves@anvisa.gov.br

Ms Aline **Cristino Figueiredo**
 Specialist in Health Surveillance
 National Health Surveillance Agency
 Ministry of Health
 SIA, Trecho 5, Área Especial 57
 71.205-050 Brasilia DF
 Brazil
 Tel.: +55 (61) 3462 5329
 Fax: +55 (61) 3462 5315
 E-Mail: aline.figueiredo@anvisa.gov.br

Mr Carlos Alexandre **Biella**

Brazilian Association of the Food Industry
Av. Brigadeiro Faria Lima, 1478-11° Andar
01451-001 São Paulo
Brazil

Tel.: +55 (11) 5508 5744

Fax: +55 (11) 5508 7503

E-Mail: alexandre.biella@br.nestle.com

Mr Antonio **Mantoan**

ABIA – Associacao Brasileira das Industrias de
Alimentacao

av Faria Lima, 1478, 11 andar

010451-001 Sao Paulo

Brazil

Tel.: +55 (11) 3030 1353

E-Mail: antonio.mantoan@mjn.com

BURKINA FASO

Mrs Dowrot Bertine **Quaro Dabire**

Ministry of Health

Division of Nutrition

Head of Dietetics and Healthy Diet Promotion

Department

BP 7068 Quagadougou

Burkina Faso

tel.: +226 7026 0197

Fax: +226 5032 4553

E-Mail: dowrot@yahoo.fr

CAMBODIA/CAMBODGE/CAMBOYA

Mr Hoksrun **Aing**

Deputy Chief of Food Safety Bureau

Department of Drugs and Food, Ministry of Health

No. 8 St. Ung Pokun (109) Sangkat Mittapheap

Khan 7 Makara

Phnom Penh

Cambodia

Tel.: +855 85 538 066

Fax: +855 23 880 247

E-Mail: hoksrun@yahoo.com

CANADA/CANADÁ

Ms Nora **Lee**

Acting Director

Bureau of Nutritional Sciences

Health Canada

251 Sir Frederick Banting Driveway

K1A OK9 Ottawa, Ontario

Canada

Tel.: +1 (613) 948 8476

Fax: +1 (613) 948 8470

E-Mail: nora_lee@hc-sc.gc.ca

Ms Christina **Zehaluk**

Head, Special Purpose Foods

Bureau of Nutritional Sciences

Health Canada

251 Sir Frederick Banting Driveway

K1A OK9 Ottawa, Ontario

Canada

Tel.: +1 (613) 957 1739

Fax: +1 (613) 941 6636

E-Mail: christina_zehaluk@hc-sc.gc.ca

Ms Charmaine **Kuran**

National Manager

Nutrition and Health Claims, Consumer Protection
Division

Canadian Food Inspection Agency

1400 Merivale Road, T2-6C

K1A0Y9 Ottawa, Ontario

Canada

Tel.: +1 (613) 773 5497

Fax: +1 (613) 773 5603

E-Mail: charmaine.kuran@inspection.gc.ca

CHILE/CHILI

Dr Lorena **Rodriguez**

Medical Doctor

Ministry of Health

Mac Iver 459 8° Floor

Food and Nutrition Department

Santiago

Chile

Tel.: +56 (2) 5740 474

E-Mail: lrodriguez@minsal.cl

Ms Luisa **Kipreos**

Agronomist

Ministry of Health

Mac Iver 459 8th Floor

Food and Nutrition Department

Santiago

Chile

Tel.: +56 (2) 5740 474

E-Mail: lkipreos@minsal.cl

Mr Juan Carlos **Sola Alcázar**

Dietitian

Abbott, Chile

Av El Salto 5380 Huechuraba

Santiago

Chile

Tel.: +56 (2) 750 6043

E-Mail: juan.sola@abbott.com

CHINA/CHINE**Prof Shi An Yin**

Director of Maternal and Child Nutrition
National Institute for Nutrition and Food Safety
Chinese Center for Diseases Control and
Prevention
29 Nan Wei Road, Xuanwu District
100050 Beijing
P. R. China

Tel.: +86 (10) 8313 2932

Fax: +86 (10) 8313 2932

E-Mail: shianyin@gmail.com**Jingyu Gu**

Director of Division of Hygienic Standard
32 Jiadaokou, Dongcheng District
10007 Beijing
P.R. China

Tel.:

E-Mail:

Xiaoning Qi

Research Associate
1 Xizhimenwai, Xichen District
Beijing 100044
P. R. China

Tel.: +86 (10) 6879 2838

E-Mail:

Mr Jianbo Zhang

National Institute for Nutrition and Food Safety
7 Panjiayuan Nan li, Chaoyang District,
100021 Beijing
P.R. China

Tel.: +86 (10) 8777 6914

Fax: +86 (10) 6771 1813

E-Mail: zhjb318@163.com**Prof. Shao Wei Deng**

Director
Chinese Medical Products
Center for Health Food Evaluation SFDA
11-15 Building, ABP, No. 188
Western Road, South 4th Road
100070 Beijing
P.R. China

Tel.: +86 (10) 1370 1090 101

Fax: +86 (10) 6370 3550

E-Mail: swdeng2008@yahoo.com.cn**Prof. Hong Yu Liu**

Chinese Medical Products
Center for Health Food Evaluation SFDA
11-15 Building, ABP, No. 188
Western Road, South 4th Road
100070 Beijing
P.R. China

Tel.: +86 (10) 1342 6060 359

Fax: +86 (10) 6370 3550

E-Mail: liuhynn@hotmail.com**Mr Wentao Ling**

Standard and Regulation Research Center, AQSIQ
Room 2408, B Tower No. 9 MaDian DongLu
HaiDian District
100088 Beijing
P. R. China

Tel.: +86 (10) 8226 2412

Fax: +86 (10) 8226 0617

E-Mail: lingwt@aqsiq.gov.cn**Ms Melissa Liu**

Scientific Officer
Food and Environmental Hygiene Department
3/F, 4 Hospital Road, Sai Ying Poon
Hong Kong
China

Tel.: +852 3962 2065

E-Mail: mpslu@fehd.gov.hk**Dr Xuejun Zhao**

Scientific and Regulatory Affairs Director
Dumex Baby Food Co. Ltd.
Building 12, Jin Qiao Office Park,
27 Xin Jin Qiao Rd. Pudong
Shanghai, 201206
P. R. China

Tel.: +86 (21) 3860 8888

E-Mail: xuejun.zhao@dumex.com.cn**Mr Hongmin Xu**

Director of Technical and Regulatory
Amway (China) Co.Ltd
41/F CITIC Plaza
233 Tianhe N. Road
510613 Guangzhou
P. R. China

Tel. : +86 (20) 8519 8818

Fax : +86 (20) 3891 2877

E-Mail : hongmin_xu@amway.com**Mr Jiaqi Cai**

Senior Regulatory Affair Manager
Shanghai Wyeth Nutrition Co. Ltd
Rm 901
China Life Tower Building No 16
Chaoyangmenwai Avenue
100020 Beijing
P.R. China

Tel.: +86 (10) 6580 5268

Fax: +86 (10) 6580 5389

E-Mail: caij@wyeth.com

COLOMBIA/COLOMBIEMrs Liliana **Peñaloza**

Ministerio de la Protección Social

Carrera 13 No. 32-76 Piso 14

57 1 Bogotá

Colombia

Tel.: +57 (1) 330 5000 ext. 1400-1419

Fax: +57 (1) 330 5050 ext. 1400

E-Mail: lpenalaza@minproteccionsocial.gov.coMs Laura **Otalora**

Representante de la Industria del Comité Nacional de

Regimes especiales

Mead Johnson Nutrition

CII 76 N°11-17 Piso 3

57 1 Bogota

Colombia

Tel.: +57 (1) 3190 830 Ext. 238/218

Fax: +57 (1) 3190 857

E-Mail: laura.otalora@mjn.com**CONGO, DEMOCRATIC REPUBLIC OF / CONGO,
REPUBLIQUE DEMOCRATIQUE DU / CONGO, REPÚBLICA
DEMOCRÁTICA DEL**Dr Honore N'**Lemba Mabela**

Directeur Chef de Service de la Production et Santé

Animales

Délégué de l'OIE

Ministere de L'Agriculture

c/o Faor B.P. 16096 Kinshasa 1 RDC

Kinshasa

Republique Democratique du Congo

Tel. : +243 9999 02967

Fax +243 8126 16289

E-Mail : dr_nlemba@yahoo.fr**COSTA RICA**Ms Alejandra **Chaverri**

Ministry of Health

Calle 16, Avenidas 6Y8

San José

Costa Rica

Tel. : +506 2233 6922

Fax : +506 2255 4512

E-Mail : achaverri@netsalud.sa.cr**COTE D'IVOIRE**Dr Patricia N'**Goran T. Yoboue**

Directeur Coordonnateur

Ministere de la Sante et de l'Hygiene Publique

(Programme national de Nutrition)

18 BP 976 Abidjan 18

Cote d'Ivoire

Tel. : +225 2021 8483

Fax : +225 2021 8461

E-Mail : patricianty@yahoo.fr**CROATIA/CROATIE/CROACIA**Ms Vedrana **Hasanbašić**

Head of Section

Ministry of Agriculture, Fisheries and Rural

Development

Directory for Food Safety and Quality

Ulica grada Vukovara 78

10000 Zagreb

Croatia

Tel. : +385 (1) 610 9681

Fax : +385 (1) 610 9189

E-Mail : vedrana.hasanbasic@mps.hrMsc Dražen **Knežević**

Expert Associate

Croatian Food Agency, Department for Risk Assessment

I. Gundulića, 36b

31000 Osijek

Croatia

Tel. : +381 (31) 227 672

Fax: +381 (31) 214 901

E-Mail: dknezevic@hah.hr**CZECH REPUBLIC / TCHÈQUE RÉPUBLIQUE CHECA
REPUBLICA**Ms Eva **Příbylová**

Head of Unit

Ministry of Health

Palackewo Nam. 4

128 01 Praha 2

Czech Republic

Tel. : +420 224 972 188

Fax: +420 224 972 105

E-Mail: eva.pribylova@mzcr.cz**DEMOCRATIC PEOPLE'S REPUBLIC OR KOREA/
RÉPUBLIQUE POPULAIRE DÉMOCRATIQUE DE CORÉE/
REPÚBLICA POPULAR DEMOCRÁTICA DE COREA**Dr Ri **Kyong Il**

Researcher, Nutrition Institute

Academy of Health & Food Science

Ryongbuk-dong, Daesong District Pyongyang

P.O.Box 901 Pyongyang

D.P.R. Korea

Tel. : +85 (02) 18111, ext. 381-8011

Fax : +85 (02) 381 4605

E-Mail : ksctc151@co.chesin.comDr Kong **Jong Son**

Researcher, Institute of Chemical Analysis

Academy of Health & Food Science

Academy of Health & Food Science

Ryongbuk-dong, Daesong District Pyongyang

P.O.Box 901 Pyongyang

D.P.R. Korea

Tel. : +85 (02) 18111, ext. 381-8011

Fax : +85 (02) 381 4605

E-Mail : ksctc151@co.chesin.com

EGYPT / ÉGYPTE / EGIPTOMr Yasser **Khalil**

Technical Specialist

Egyptian Chamber of Food Industries

1195 Cornish El-Nil, Beaulac

19 Cairo

Egypt

Tel.: +202 2574 8627

Fax: +202 2574 8312

E-Mail: yasser@egycfi.org.egProf Gihan M. **El-Moghazy**

Chief Researcher, Head of Food Safety and

Biotechnology dept.

Regional Center for Food & feed, Agriculture Research
Center

P.O.Box 580 Orman

9 El Gamaa St. Giza

12111 Cairo

Egypt

Tel.: +202 12233 1390

Fax: +202 35713250

E-Mail: g_rcff@yahoo.comDr Mohamed-Kamal **Abd El-Rahman**

Head of Laboratory of National Nutrition Institute

NNI

16 Kaser Elamiyen Str.

Cairo

Egypt

Tel.: +202 010 11703 77

Fax: +202 2364 7476

E-Mail: mk_mansour_egypt@yahoo.com**ERITREA / ÉRITHRÉE**Mr Abraham Tesfaselasse **Weldeab**

Public Health Officer

Ministry of Health

Dept. of Regulatory National Quarantine

P.O.Box 212

Asmara

Eritrea

Tel.: +291 (1) 125525

Fax: +291 (1) 122899

E-Mail: abremo05@yahoo.com**ESTONIA/ESTONIE**Ms Ursula **Siim**Chief Specialist of the Food Safety Bureau
of the Food and Veterinary Department

Ministry of Agriculture

39/41 Lai Street

15056 Tallinn

Estonia

Tel.: +372 625 6547

Fax: +372 625 6210

E-Mail: ursula.siim@agri.ee**ETHIOPIA / ÉTHIOPIE / ETIOPIÁ**Ms Asrat **Wondimu**

Associate Researcher

Ethiopian Health and Nutrition Research Institute
(EHNRI)

1242 OR 5654 Addis Ababa

Ethiopia

Tel.: +251 911 256391

Fax: +251 112 757722

E-Mail: asrat1976@yahoo.com**EUROPEAN COMMUNITY / COMMUNAUTÉ EUROPÉENNE /
COMUNIDAD EUROPEA**Mr Basil **Mathioudakis**

Head of Unit

European Commission

Directorate-General SANCO

Office F101 8/82

Rue Froissart 101

1049 Brussels

Belgium

Tel.: +32 (2) 2959 182

Fax: +32 (2) 2951 735

E-Mail: basil.mathioudakis@ec.europa.euDr Eva Maria **Zamora Escribano**

Administrator responsible for Codex issues

European Commission

Rue Froissart 101

1049 Brussels

Belgium

Tel.: +32 (2) 299 8682

Fax: +32 (2) 299 8566

E-Mail: eva-maria.zamora-escribano@ec.europa.euMs Helen **Lee**

European Commission

Directorate-General SANCO

Office B232 08/48

Rue Froissart 101

1049 Brussels

Belgium

Tel.: +32 (2) 2998 668

E-Mail: helen.lee@ec.europa.euMs Stephanie **Bodenbach**

European Commission

Directorate-General SANCO

Office B232 08/25

Rue Froissart 101

1049 Brussels

Belgium

Tel.: +32 (2) 2980 938

E-Mail: Stephanie.bodenbach@ec.europa.eu

Ms Ariane Vander Stappen

European Commission
 Directorate-General SANCO
 Office F101 8/58
 Rue Froissart 101
 1049 Brussels
 Belgium
 Tel.: +32 (2) 2952 158
 Fax: +32 (2) 2951 735
 E-Mail: ariane.vander-stappen@ec.europa.eu

Ms Almudena de Arriba Hervás

European Commission
 Health and Consumer
 Directorate-General (SANCO)
 1049 Brussels
 E-Mail: almudena.arriba-hervas@ec.europa.eu

FINLAND / FINLANDE / FINLANDIA**Ms Anna Lemström**

Senior Adviser
 Ministry of Agriculture and Forestry
 P.O.Box 30
 00023 Government, Helsinki
 Finland
 Tel.: +358 (9) 1605 2305
 Fax: +358 (9) 1605 3338
 E-Mail: anna.lemstrom@mmm.fi

FRANCE / FRANCIA**Mrs Marianne Dessen-Mugniot**

Direction Générale de la concurrence, de la
 consommation et de la répression des fraudes
 Bureau D3 – Nutrition et Diététique
 59 bd Vincent Auriol
 75013 Paris 13^e
 France
 Tel. : +33 (1) 4497 2415
 Fax : +33 (1) 4497 3048
 E-Mail :
marianne.dessen-mugniot@dgccrf.finances.gouv.fr

Pascal Audebert

Point de Contact du Codex alimentarius en France
 Premier Ministre
 Secrétariat général des Affaires européennes
 2, boulevard Diderot
 75572 Paris Cedex 12
 France
 Tel.: +33 (1) 44 87 16 03
 Fax: +33 (1) 44 87 16 04
 E-Mail: pascal.audebert@sgae.gouv.fr

Mrs Françoise Costes

Association de la Transformation Laitière Française
 ATLA
 42 Rue de Châteaudun
 75314 Paris Cedex 09
 France
 Tel.: +33 (1) 4970 7269
 Fax: +33 (1) 4280 6362
 E-Mail: trs@atla.asso.fr

Mr Thierry Geslain

Chef de Service Codex et Normalisation
 CNIEL
 42, rue de Châteaudun
 75009 Paris
 France
 Tel. : +33 (1) 4970 7115
 Fax : +33 (1) 4280 6345
 E-Mail: tgeslain@cniel.com

Ms Elisabeth Goidin

Regulatory Affairs
 (Ania) Roquette
 Rue Haute Loge
 62080 Lestrem
 France
 Tel.: +33 (3) 2163 9669
 Fax: +33 (3) 2163 3882
 E-Mail: elisabeth.goidin@roquette.com

Ms Catherine Vigreux

Regulatory Affairs Advisor
 (Ania) Roquette
 Rue Haute Loge
 62080 Lestrem
 France
 Tel.: +33 (3) 2163 3763
 Fax: +33 (3) 2163 3882
 E-Mail: Catherine.vigreux@roquette.com

Mrs Jolanta Leone

Danone DBN
 383 Rue Philippe Héron
 69654 Villefranche sur Saône
 France
 Tel. : +33 (4) 7462 6374
 Fax : +33 (4) 7462 6183
 E-Mail : jolanta.leone@danone.com

Mrs Annie Loch

Corporate Food Law Director
 Groupe Danone
 15 Rue du Helder
 75009 Paris
 France
 Tel.: +33 (1) 061 4672 825
 Fax: +33 (1) 014 4352 695
 E-Mail: annie.loch@danone.com

GERMANY / ALLEMAGNE / ALEMANIA**Dr Pia Noble**

Federal Ministry of Food,
Agriculture and Consumer Protection
Rochusstrasse 1
53123 Bonn
Germany
Tel.: +49 (228) 99 529 4665
Fax: +49 (228) 99 529 4965
E-Mail: pia.noble@bmelv.bund.de

Dr Anke Niederhaus

Federal Ministry of Food,
Agriculture and Consumer Protection
Rochusstrasse 1
53123 Bonn
Germany
Tel.: +49 (228) 99 529 4172
Fax: +49 (228) 99 529 4965
E-Mail : anke.niederhaus@bmelv.bund.de

Mrs Marie Dubitsky

Maria Dubitky Consulting GmbH
Andreas-Kasperbauer-Straße 13
85540 Haar
Germany
Tel. : +49 (89) 680 4131
Fax : +49 (89) 4614 8492
E-Mail : marie@dubitsky.de

Dr Constanze Hiepler

Scientific & Regulatory Affairs
Bundesverband der Hersteller für eine besondere
Ernährung (Diätverband) e.V.
Godesberger Allee 142-148
53175 Bonn
Germany
Tel.: +49 (228) 308 5111
Fax: +49 (228) 308 5150
E-Mail: hiepler@diaetverband.de

Dr Gerda Jost

Manager Corporate & Regulatory Affairs
Milupa GmbH
Bahnstraße 14-30
61381 Friedrichsdorf
Germany
Tel. : +49 (6172) 99 1423
Fax : +49 (6172) 00 1244
E-Mail : gerda.jost@milupa.de

Dr. Susanne Kettler

Director Regulatory Affairs
Eu-Scientific & Regulatory Affairs
Coca-Cola Services s.a.
Chaussee de Mons 1424
1070 Brüssel
Belgium
Tel.: +32 (2) 559 2218
Fax: +32 (2) 559 2378
E-Mail: skettler@eur.ko.com

Dr Angela Kohl

Nutrition Policy Manager
Bund für Lebensmittelrecht und Lebensmittelkunde
(BLL)
Godesberger Allee 142-148
53175 Bonn
Germany
Tel.: +49 (228) 81993-173
Fax: +49 (228) 8199 3200
E-Mail: akohl@bll.de

Dr. Gert Krabichler

Capsugel – a division of Pfizer
10, rue Timken
68027 Colmar
France
Tel.: +33 (3) 8920 4957
Fax: +33 (3) 8941 4811
E-Mail: gert.krabichler@pfizer.com

Mrs Angelika Mrohs

Bund für Lebensmittelrecht und Lebensmittelkunde
(BLL)
Godesberger Allee 142-148
53175 Bonn
Germany
Tel.: +49 (228) 8199 3133
Fax: +49 (228) 8199 3233
E-Mail: amrohs@bll.de

Dr. Michael Packert

Südzucker AG
Maximilianstraße 10
68165 Mannheim
Germany
Tel.: +49 (621) 421 573
Fax: +49 (621) 421 574
E-Mail: michael.packert@suedzucker.de

Mr Norbert Pahne

Manager
Bundesverband der Hersteller für eine besondere
Ernährung (Diätverband) e.V.
Godesberger Allee 142-148
53175 Bonn
Germany
Tel. : +49 (228) 308 5110
Fax : +49 (228) 308 5150
E-Mail : pahne@diaetverband.de

Mrs Antje Preußker

Bund für Lebensmittelrecht und Lebensmittelkunde
(BLL)
Godesberger Allee 142-148
53175 Bonn
Germany
Tel.: +49 (228) 8199 3146
Fax: +49 (228) 8199 3246
E-Mail: apreussker@bll.de

Anke Weissenborn

Bundesinstitut für Risikobewertung
Federal Institute for Risk Assessment
Thielallee 88-92
14195 Berlin
Germany
Tel.: +49 (30) 8412 3812
Fax: +49 (30) 8412 3715
E-Mail: anke.weissenborn@bfr.bund.de

Dr Ulrich Schlemmer

Max-Rubner-Institut
Federal Research Institute of Nutrition and Food
Haid-und-Neu-Straße 9
76131 Karlsruhe
Tel.: +49 (721) 6625 409
Fax: +49 (721) 6625 404
E-Mail: ulrich.schlemmer@mri.bund.de

GHANA**Prof Anna Lartey**

Associate Professor
University of Ghana, Department of Nutrition and Food
Science
P.O.Box LG 134, Legon
Accra
Ghana
Tel.: +233 (21) 513294
E-Mail: aalartey@ug.edu.gh

Ms Isabella Mansa Agra

Food and Drugs Board
P.O.Box CT 2783
Accra
Ghana
Tel.: +233 244 337249
E-Mail: isabelmansa@yahoo.com

GREECE / GRÈCE / GRECIA**Dr Georgios Marakis**

Officer – Nutritionist
Hellenic Food Authority (EFET)
Kifisias Av. 124 & Iatridou 2
11526 Athens
Greece
Tel.: +30 2106 971660
Fax: +30 2106 971552
E-Mail: codex@efet.gr

HUNGARY / HONGRIE / HUNGRIA**Dr Marta Horacsek**

Head of Department of Notification and Experts
National Institute for Nutrition and Food Science
Gyáli út 3/a
1097 Budapest
Hungary
Tel.: +36 (1) 476 6447
Fax: +36 (1) 215 5369
E-Mail: horacsek.marta@oeti.antsz.hu

INDIA / INDE**Dr. Shreeranjana**

Joint Secretary
Ministry of Women and Child Development
Room No. 605, A Wing Shastri Bhawan
110001 New Delhi
India
Tel.: +91 9650 110096
Fax: +91 11 2307 0479
E-Mail: shreeranjana85@gmail.com

Mr Mahesh Arora

Director
Ministry of Women and Child Development
Room No. 638, A Wing, Shastri Bhawan
New Delhi - 110001
India
Tel.: +91 98102 40151
Fax: +91 11 2307 4215
E-Mail: mcarora2@yahoo.co.in

Mr Yogesh Kumar Verma

Food Regulatory Affairs Manager
Confederation of Indian Industry
India Habitat Centre, Core 4A
4th Floor, Lodi Road
110 003 New Delhi
India
Tel.: +91 997 1552655
E-Mail: vermayk@indiatimes.com

INDONESIA / INDONÉSIE**Dr Husniah Rubiana Thamrin Akib**

National Agency of Drug and Food Control
Jl. Percetakan Negara No 23
10560 Jakarta
Indonesia
Tel.: +62 (21) 4244 688
Fax: +62 (21) 4250 764
E-Mail: tukepalabadan@yahoo.com;
husniaht@yahoo.com

Dr Ina Hernawati

Director of Community Nutrition, MOH
Ministry of Health
JI HR Rasuna Said, Kav 4-9, Kuningan
12950 South Jakarta
Indonesia
Tel.: +62 (21) 5203 883
Fax: +62 (21) 5210 176
E-Mail: hernawati_ina@yahoo.com

Mrs Tetty Helfery Sihombing

Director of Food Product Standardization
National Agency of Drug and Food Control
Jl. Percetakan Negara No 23
10560 Jakarta
Indonesia
Tel.: +62 (21) 4287 5584

Fax: +62 (21) 4287 5780

E-Mail: tettyhelfery@yahoo.com

IRAN (ISLAMIC REPUBLIC OF)- IRAN (REPUBLIQUE ISLAMIQUE DE) – IRÁN (REPÚBLICA ISLÁMICA DE

Mrs Farnaz **Dastmalchi**

Researcher

Institute of standards and Industrial Research of Iran

P.O.Box 31585-163 Karaj

Iran

Tel.: +98 (261) 280 2130

Fax: +98 (261) 280 2130

E-Mail: farnazdastmalchi@yahoo.com

IRAQ

Dr. Mohammed **Abduljabbar**

Specialist Doctor/Public Health

Ministry of Health/Nutritional Research Institute

Adamia Ragiba Khatoon/District 320

Avenue 17, House n° 3

Baghdad

Iraq

Tel.: +964 07707 803436

E-Mail: maj_51@yahoo.com

ISRAEL / ISRAËL

Dr Ziva **Stahl**

Director Nutrition Department

Ministry of Health

20 King David Street

91010 Jerusalem

Israel

Tel.: +972 (2) 6228 855

Fax: +972 (2) 6247 173

E-Mail: ziva.stahl@moh.health.gov.il

ITALY/ITALIE/ITALIA

Dr Lucia **Guidarelli**

Food Safety and Nutrition Directorate

Head of Nutrition Unit

Welfare, Health and Social Affairs Ministry

Via Giorgio Ribotta 5

00144 Roma

Italy

Tel.: +39 (6) 5994 6828

Fax: +39 (6) 5994 3598

E-Mail: lguidarelli@sanita.it

Dr Stefania **Giammarioli**

Senior Resercher

Instituto Superiore di Sanità

Viale Regina Elena 299

00162 Roma

Italy

Te.: +39 (6) 4990 2626

Fax: +39 (6) 4938 7101

E-Mail: giammas@iss.it

Mrs Brunella **Lo Turco**

Ministero Politiche AgricoleAlimentari e Forestali

Via XX Settembre, 20

00187 Rome

Italy

Tel.: +39 (6) 46656041

Fax: +39 (6) 4880273

E-Mail: saco8@politicheagricole.gov.it

Dr. Massimo **Liotta**

Food Regulatory Affairs – Area Manager

Ferrero

c/o Ferrero S.P.A.

Piazzale Pietro Ferrero 1

12051 Alba

Italy

Tel.: +39 173 313050

Fax: +39 173 313977

E-Mail: massimo.liotta@ferrero.com

JAPAN / JAPON / JAPÓN

Mr Hiroshi **Aimoto**

Director

Consumer Affairs Agency

Food Labeling Division

2-11-1 Nagata-cyo, Chiyoda-ward

100-6178 Tokyo

Japan

Tel.: +81 (3) 3507 9221

Fax: +81 (3) 3507 9292

E-Mail: g.foodlabeling@caa.go.jp

Dr Megumi **Haga**

Deputy Director

Consumer Affairs Agency

Food Labeling Division

2-11-1 Nagata-cyo, Chiyoda-ward

100-6178 Tokyo

Japan

Tel.: +81 (3) 3507 9221

Fax: +81 (3) 3507 9292

Mr Hiroaki **Hamano**

Technical Adviser

Japan Health Food and Nutrition Food Association

2-7-27 Sadoharacho Ichigaya, Shink'juku-ku

162-0842 Tokyo

Japan

Tel.: +81 (3) 3268 3134

Fax: +81 (3) 3268 3136

E-Mail: hiroaki.hamano@danisco.com

Dr Hiroshi **Tsuchita**

Technical Adviser

Japan Food Hygiene Association

2.6.1 Jungu-mae, Shibuya-ku

150-0001 Tokyo

Japan

Tel.: +81 (3) 3403 2112

Fax: +81 (3) 3403 2384

E-Mail: idfjapan@rapid.ocn.ne.jp

Dr Fumi Irie

Deputy Director

Standards and Evaluation Division

Department of Food Safety, Pharmaceutical and Food
Safety Bureau, Ministry of Health, Labour and Welfare

1-2-2 Kasumigaseki

Chiyoda-ku, 100-8916 Tokyo

Japan

Tel.: +81 (3) 3595 2341

Fax: +81 (3) 3501 4868

E-Mail: codexj@mhlw.go.jp

Prof Kazuhiko Yamada

Technical Advisor

Kagawa Nutrition University

3-9-21, Chiyoda, Sakado

350 0288 Saitama

Japan

Tel.: +81 (49) 282 3708

Fax: +81 (49) 282 3708

E-Mail: g.foodlabeling@caa.go.jp

KENYA

Mr Peter Mutua

Standards Officer

Kenya Bureau of Standards

P.O.Box 54974

00200 Nairobi

Kenya

Tel.: +254 (20) 609 660

E-Mail: mutuap@kebs.org

Ms Chemutai Sawe

Kenya Bureau of Standards

P.O.Box 54974

00200 Nairobi

Kenya

Tel.: +254 (20) 6948000

E-Mail: sawec@kebs.org

KUWEIT/KOWEÏT

Mrs Hashmia Al Enezi

Chief Standards Engineer

Public Authority for Industry

South of surra – Ministries Area

P.O.Box 4690 safat

13047 Kuwait South Surra

Kuwait

Tel.: +965 2530 2672

Fax: +965 2530 2625

E-Mail: h.alanzei@pai.gov.kw

Dr Nawal Al Hamad

Director of Food and Nutrition

Ministry of Health

Food and Nutrition Administration

76655 Al-shwaikh

Kuwait

Tel.: +965 9967 7663

Fax: +965 2481 3905

E-Mail: nutrition90@hotmail.com

LIBYA/LIBYE/LIBIA

Prof Marwan Marghani

Chairman – Libyan Committee “food for special dietary
uses

Libyan National Center for Standarization and
Methology

P.O.Box 723

Tripoli

Libya

Tel.: +218 (92) 835 3210

LITHUANIA / LITUANIE / LITUANIA

Ms Svetlana Kornysova

Public Health specialist

The State of Environmental Health Center

Kal Va Ri Ju st. 153

208221 Vilnius

Lithuania

tel.: +370 5276 1341

Fax: +370 5373 7397

E-Mail: svetlan@rmc.lt

MALAYSIA / MALASIE / MALASIA

Ms Rokiah Don

Director

Nutrition Division

Ministry of Health Malaysia

Level 7, Block E 10, Parcel E

Federal Government Administrative Complex

62590 Putrajaya

Malaysia

Tel.: +60 (3) 8883 4086

Fax: +60 (3) 8888 4647

E-Mail: rokiah@moh.gov.my

Dr Nagendran Bala Sundram

Embassy of Malaysia

Avenue de Tervueren 414 A

1150 Brussels

Belgium

Tel.: +32 (2) 762 8997

Fax: +32 (2) 762 8998

E-Mail: nagen@mpob.gov.my

Ms Kanga Rani Selvaduray

Malaysian Palm Oil Board

No 6, Persiaran Institusi, Bandar Baru Bangi

Kajang, Selangor

43000 Kajang

Malaysia

Tel.: +60 (3) 8769 4606
 Fax: +60 (3) 8922 1742
 E-Mail: krani@mpob.gov.my

MEXICO / MEXIQUE / MÈXICO

Ms Elizabeth **Díaz Bautista**
 International manager on Food Affairs
 Comisión Federal para la Protección contra Riesgos
 Sanitarios
 Monterrey 33, 1er. Piso, Col. Roma, Delegación
 Cuauhtémoc, Mexico D.F.
 06700 México
 México
 Tel.: +52 5080 5389
 E-Mail: ediazb@cofepris.gob.mx

Ms Claudia **Jáquez**
 Regulatory Affairs
 Abbott Laboratories de México, S.A. de C.V.
 04980 México, D.F.
 México
 Tel.: +52 (55) 5809 7500
 Fax: +52 (55) 5809 7706
 E-Mail: claudia.jaquez@abbott.com

Mr Carlos **Almanza**
 Technical Coordinator CA of Nutrition Committee
 ILSI de México A.C./ Kellogg Company México
 FCO Petrarca No 133-403
 11570 Mexico D.F.
 México
 Tel.: +52 442 221 1300
 E-Mail: carlos.almanza@kellogg.com

MONGOLIA / MONGOLIE

Mrs Batsaikhan **Enkhtungalag**
 Head of Nutrition & Food Safety Team
 Public Health Institute under
 Ministry of Health
 Peace Avenue-17, Bayanzurkh District
 210349 Ulaanbaatar
 Mongolia
 Tel.: +976 (11) 451 127
 Fax: +976 (11) 451 127
 E-Mail: dulaanuul@hotmail.com

MOZAMBIQUE

Ms Julia **Nhacule**
 Nutritionist
 Ministry of Health
 Av. Eduardo Mondlane/Salvador Allende
 Maputo
 Mozambique
 Tel.: +258 (21) 310 281
 Fax: +258 (21) 326 164
 E-Mail: juliekool2002@yahoo.com.br

NETHERLANDS / PAYS BAS / PAÍSES BAJOS

Ms Letteke **Boot**
 Policy Advisor Nutrition
 Ministry of Health, Welfare and Sport
 P.O.Box 20350
 2500 EJ The Hague
 Netherlands
 Tel.: +31 (70) 3405447
 Fax: +31 (70) 3407303
 E-Mail: ca.boot@minvws.nl

Dr Jaap **Schrijver**
 Manager Regulatory Affairs Baby Foods
 Danone Baby Nutrition
 P.O.Box 75538
 1118 ZN Schiphol Airport
 Netherlands
 Tel.: +31 (20) 456 9466
 Fax: +31 (20) 456 8466
 E-Mail: jaap.schrijver@danone.com

NEW ZEALAND / NOUVELLE-ZÉLANDE / NUEVA ZELANDA

Ms Jenny **Reid**
 Deputy Director (Science)
 New Zealand Food Safety Authority
 PO Box 2835
 Wellington 6012
 New Zealand
 Tel.: +64 (4) 894 2582
 Fax: +64 (4) 894 2530
 E-Mail: jenny.reid@nzfsa.govt.nz

Mr David **Roberts**
 Programme Manager (Nutrition)
 New Zealand Food Safety Authority
 PO Box 2835
 Wellington 6012
 New Zealand
 Tel.: +64 (4) 894 4236
 Fax: +64 (4) 894 2530
 E-Mail: david.roberts@nzfsa.govt.nz

NIGER

Mr Dioffo Alahouynouma **Salou**
 Chef Bureau Etudes et Enquêtes
 Ministère de la Santé Publique (MPS)
 Direction de la Nutrition/MSP BP623NY
 623 Niamey
 Niger
 Tel.: +227 9656 6866
 E-Mail: dioffosalou@yahoo.fr

Mrs Hassane Aissatou **Cisse**
 Chef Service Nutrition et Alimentation
 Ministère du Développement Agricole (MDA)
 Direction Générale de l'Agriculture/MDA BP323NY
 323 Niamey
 Niger
 Tel.: +227 9696 9423
 E-Mail: hassan_sido@yahoo.fr

NIGERIA**Mrs Rebecca Akerele-Nwaha**

Ag. Head of Department
Federal Ministry of Health
Food & Drug Services Dept.
Abuja
Nigeria
Tel.: +234 80 3303 0391

Mr Abiola Komolafe

Deputy Director
Standards Organization of Nigeria
52, Lome Crescent, Wuse Zone 7
Abuja
Nigeria
Tel.: +234 8023 288411
Fax: +234 952 39353
E-Mail: abikomos@yahoo.com

Dr James Mbachiantim

Special Assistant
National Agency for Food and Drug Administration and
Control (NAFDAC)
Plot 2032, Olusegun Obasanjo Way
Wuse Zone 7
Abuja
Nigeria
tel.: +294 (9) 6718008
E-Mail: jmbachiantim@yahoo.com

Mrs Patricia Monwuba

Deputy Director
National Agency for Food, Drug Administration and
Control
Plot 2032 Olusegun Obasanjo Way
Wuse Zone 7
Abuja
Nigeria
Tel.: +234 7037 884145
E-Mail: patmonwuba@yahoo.com

Mr Dennis Onyeagocha

Deputy Director
Federal Ministry of Health
Food and Drug Services Department
Abuja
Nigeria
Tel.: +234 80 3314 7808
E-Mail: dennyo_2003@yahoo.com

Mrs Omolara Okunlola

Chief Standards Officer
Standards Organization of Nigeria
Plot 13/14 Victoria Arobieke Street
Lekki Victoria Island
Lagos
Nigeria
Tel.: +234 8023 590639
Fax: +234 9523 9353
E-Mail: omolara_okunlola@yahoo.com

Mrs Chinyere Ikejiofor

Senior Laboratory technologist
National Agency for Food, Drug Administration and
Control
Plot 2032 Olusegun Obasanjo Way
Wuse Zone 7
Abuja
Nigeria
Tel.: +234 8033 836173
E-Mail: innopluschy@yahoo.com

NORWAY / NORVÈGE / NORUEGA**Ms Svanhild Vaskinn**

Senior Adviser
Norwegian Food Safety Authority
P.O. Box 383
N-2381 Brumunddal
Norway
Tel.: +47 (23) 21 6800
Fax: +47 (23) 21 6801
E-Mail: svvas@mattilsynet.no

Ms Ida Tidemann-Andersen

Senior Adviser
Norwegian Food Safety Authority
P.O.Box 383
N-2381 Brumunddal
Norway
Tel.: +47 (23) 216800
Fax: +47 (23) 216801
E-Mail: idthid@mattilsynet.no

Mrs Marianne H. Aaberg

Regulatory Affairs manager
Norwegian Food & Drink Federation/Nestlé Norway
Postbox 683 Skøyen
0214 Oslo
Norway
Tel.: +476781 7364
E-Mail: marianne.aaberg@no.nestle.com

PARAGUAY**Mr Alberto Francisco Bareiro Arce**

Licenciado en Nutrición
Instituto Nacional de Alimentación y Nutrición
Ministerio de Salud Pública y Bienestar Social
Trinidad C / Itapúa
Asunción
Paraguay
Tel.: +595 (21) 294073
Fax: +595 (21) 206874
E-Mail: albareiro@gmail.com

PHILIPPINES / FILIPINAS

Mrs Maria Victoria **Pinion**
 Nutritionist-Dietitian III; Chairman, Technical
 Committee, National Codex Organization
 Food and Drug Administration – Department of Health
 Civic Drive Filinvest Corporate City
 Alabang, Muntinlupa City
 1770 Muntinlupa
 Philippines
 Tel.: +63 (2) 542 5606
 Fax: +63 (2) 542 5606
 E-Mail: mavspinion@yahoo.com

Mr Israel **Dela Cruz**
 Senior Science Research Specialist
 Bureau of Agriculture and Fisheries Product Standards
 Department of Agriculture
 BPI Compound, Visayas Avenue, Diliman
 1101 Quezon City
 Philippines
 Tel.: +63 (2) 920 6131
 Fax: +63 (2) 455 2858
 E-Mail: iqdelacruz@gmail.com

POLAND/POLOGNE/POLONIA

Prof. Hanna **Kunachowicz**
 Head of Department of Nutritive Value of Food
 National Food and Nutrition Institute
 Powsinska 61/63
 02.903 Warsaw
 Poland
 Tel.: +48 (22) 5509 708
 E-Mail: hkunachowicz@izz.waw.pl

Dr Katarzyna **Stos**
 Head of Food Safety Department
 National Food and Nutrition Institute
 Powsinska 61/63
 02-903 Warsaw
 Poland
 Tel.: +48 (22) 5509 781
 E-Mail: kstos@izz.waw.pl

REPUBLIC OF KIRIBATI

Ms Eretii T. **Timeon**
 Nutritionist
 Ministry of Health
 P.O.Box 268
 Bikenibeu
 Tarawa
 Republic of Kiribati
 Tel.: +686 28549
 Fax: +686 28158
 E-Mail: bjteraoui@yahoo.co.uk

REPUBLIC OF KOREA/RÉPUBLIQUE DE CORÉE/REPÚBLICA DE COREA

Dr Hye-Kyung **Park**
 Director
 Nutrition Policy Division

Korea Food and Drug Administration
 194 Tongil-ro, Eunpyung-gu
 122-704 Seoul
 Republic of Korea
 Tel.: +82 (2) 380 1315
 E-Mail: phkfda@korea.kr

Prof. Oran **Kwon**
 Associate Professor
 Ewha Womans' Univ
 Dept of Nutritional Science & Food Management
 Human Ecology BLD #301
 11-1 Daehyun-dong, Seodaemoon-gu
 120-750 Seoul
 Republic of Korea
 Tel.: +82 (2) 3277 6860
 Fax: +82 (2) 3277 6860
 E-Mail: orank@ewha.ac.kr

Dr Seongsoo **Park**
 Deputy Director
 Nutrition Policy Division
 Korea Food and Drug Administration
 194 Tongil-ro, Eunpyung-gu
 122-704 Seoul
 Republic of Korea
 Tel.: +82 (2) 380 1311
 Fax: +82 (2) 382 6380
 E-Mail: sspark65@korea.kr

Mr Jae Woo **Park**
 DVM
 Ministry for Food, Agriculture, Forestry and Fisheries
 National Veterinary Research and Quarantine Service
 Chungang-ro 335, Manan-gu Anyang-si
 430 824 Gyunggi-do
 Republic of Korea
 Tel.: +82 (31) 467 1986
 Fax: +82 (31) 467 1989
 E-Mail: jwpark@nvrqs.go.kr

Ms Soh Yoon **Yun**
 Senior Researcher
 Ministry of Health, Welfare and Family Affairs
 75 Yulgong-ro, Jongno-gu
 110-793 Seoul
 Republic of Korea
 Tel.: +82 (2) 2023 7790
 Fax: +82 (2) 2023 7780
 E-Mail: ysy0614@korea.kr

SAMOA

Mrs Palanitina Tupuimatagi **Toelupe**
 Director General of Health
 Ministry of Health
 Motootua
 Private Bag Apia
 Samoa
 Tel.: +685 68100
 Fax: +685 26553
 E-Mail: ceo@health.gov.ws

Ms Christine **Quested**

Principal Nutritionist
Ministry of Health
Private Bag Apia
Samoa

Tel.: +685 68137

E-Mail: christineq@health.gov.ws

SAUDI ARABIA / AR SAOUDITE / AR SAUDITA

Dr. Khalid S. Almurshed

Consultant

Food Sector

Saudi Food & Drug Authority

3292 Northern Ring Road, Al Nafel Area

Riyadh 13312 – 6288

Kingdom of Saudi Arabia

Tel.: +966 (1) 2759 222

Fax: +966 (1) 2757 238

E-Mail: kalmurshed@sfga.gov.sa

SIERRA LEONE

Mr Amadu Jogor **Bah**

Deputy Director

Sierra Leone Standards Bureau

SLPMB Headquarter Building

232 Freetown

Sierra Leone

Tel: +232 7620 2010

E-Mail: slstandards2007@yahoo.com

SINGAPORE / SINGAPOUR / SINGAPUR

Ms Huay Leng **Seah**

Deputy Director (Food Control)

Agri-Food & Veterinary Authority

5 Maxwell Road, Tower Block #18-00

Singapore 069110

Tel. +65 6325 5480

Fax: +65 6324 4563

E-Mail: seah_huay_leng@ava.gov.sg

Mr Sean **Wong**

Section Head, Policy and Codex

Agri-Food and Veterinary Authority

5, Maxwell Road, #18-00, Tower block, MND Complex

069110 Singapore

Singapore

Tel.: +65 6325 7829

Fax: +65 6324 4563

E-Mail: sean_wong@ava.gov.sg

SOUTH AFRICA / AFRIQUE DE SUD / SUDÁFRICA

Mrs Lynn **Moeng**

Director Nutrition

National Department of Health

Directorate Nutrition

Private Bag X828,

0001 Pretoria

South Africa

Tel.: +27 (12) 312 0071

Fax: +27 (12) 312 3112

E-Mail: MoengL@health.gov.za

Miss Andiswa **Ngqaka**

Assistant Director Nutrition

National Department of Health

Directorate: Nutrition

Private Bag X828

0001 Pretoria

South Africa

Tel.: +27 (12) 312 0873

Fax: +27 (12) 312 3112

Email: NgqakA@health.gov.za

Mrs Antoinette **Booyzen**

Assistant Director Regulatory Nutrition and Labelling

National Department of Health

Directorate Food Control

Private Bag X828

0001 Pretoria

South Africa

Tel.: +27 (12) 312 0163

Fax: +27 (12) 312 3180

E-Mail: booyza@health.gov.za

Prof Hester Hendrina(Este) **Vorster**

Director: Center of Excellence for Nutrition

Faculty of Health Sciences

North-West University

Private Bag X6001

2520 Potchefstroom

South Africa

Tel.: +27 (18) 299 4237

Fax: +27 (18) 299 2464

E-Mail: este.vorster@nwu.ac.za

SPAIN / ESPAGNE / ESPAÑA

Ms Almudena **Rollán Gordo**

Spanish Food Safety and Nutrition Agency

Alcalá, no 56

28071 Madrid

Spain

Tel.: +34 (91) 3380 710

Fax: +34 (91) 3380 169

E-Mail: arollan@wanadoo.es

Mrs Irene **Gadea Cazalilla**

Spanish Food Safety and Nutrition Agency

Alcalá, no 56

28071 Madrid

Spain

Tel.: +34 (91) 3380 919

Fax: +34 (91) 3380 883

E-Mail: igadea@yahoo.es

SUDAN / SOUDAN / SUDÁN

Dr Awad Mohamed Ahmed **Sukrab**

Technical Department Manager

Sudanese Standards and Metrology Organization

P.O.Box 13573

Khartoum

Sudan

Tel :: +249 (91) 239 1190

Fax : +249 1837 62737

E-Mail : awadsokrab@hotmail.com

Dr Galila Hassan **Onsa**
 Head Department of Foods Chemistry & Nutrition
 Food Processing Research Center
 Ministry of Science & Technology
 Agriculture Research Corporation
 Shambat, Khartoum North
 Khartoum
 Sudan
 Tel.: +249 12244 6429
 Fax: +249 8531 1049
 E-Mail: galilah@hotmail.com

Ms Nadia Abdalla Abdalrahman **Elshiekh**
 Head of Dairy Sector
 Ministry of Animal Resources & Fisheries
 Khartoum
 Sudan
 Tel.: +249 9222 12862
 Fax: +249 1834 75996
 E-Mail: nadiavet5@yahoo.com

Ms Ibtehad Mahgoub Almobark **Ibaid**
 Head of Food Safety Section
 Federal Ministry of Health
 00249 Khartoum
 Sudan
 Tel.: +249 912468362
 Fax: +249 01551 45620
 E-Mail: ibtehadmoba@yahoo.com

SWEDEN / SUÈDE / SUECIA

Mrs Kerstin **Jansson**
 Deputy Director
 Ministry of Agriculture
 Fredsgatan 8
 SE-103 33 Stockholm
 Sweden
 Tel.: +46 (8) 405 1168
 Fax: +46 (8) 206496
 E-Mail: kerstin.jansson@agriculture.ministry.se

Mrs Kristina Lagestrand **Sjölin**
 Principal Administrative Officer
 National Food Administration
 Box 622
 SE-751 26 Uppsala
 Sweden
 Tel.: +46 (18) 175500
 Fax: +46 (18) 105848
 E-Mail: codex@slv.se

Mrs Catharina **Rosqvist**
 Senior Administrative Officer
 Ministry of Agriculture
 Fredsgatan 8
 SE-103 33 Stockholm
 Sweden
 Tel.: +46 (8) 405 3782
 Fax: +46 (8) 206496
 E-Mail: catharina.rosqvist@agriculture.ministry.se

Ms Lena **Björck**
 Nutritionist
 National Food Administration
 Box 622
 SE-751 26 Uppsala
 Sweden
 Tel.: +46 (18) 175500
 Fax: +46 (18) 105848
 E-Mail: codex@slv.se

Ms Pilar **Velazquez**
 Administrator
 Council Secretariat of the European Union
 The Swedish Presidency
 175 Rue de la Loi
 1048 Brussels
 Belgium
 Tel: +32 (2) 281 6628
 Fax: +32 (2) 281 6198
 E-Mail: pilar.velazquez@consilium.europa.eu

SWITZERLAND / SUISSE / SUIZA

Ms Elisabeth **Nellen-Regli**
 Pharmacist
 Federal Office of Public Health
 Consumer Protection Directorate
 Schwarzenburgstr. 165
 CH-3003 Bern
 Switzerland
 Tel.: +41 (31) 322 9560
 Fax: +41 (31) 322 9574
 E-Mail: elisabeth.nellen@bag.admin.ch

Dr Dirk **Cremer**
 Global Regulatory Affairs Manager
 DSM Nutritional Products
 P.O.Box 2676, Bldg. 241/919
 CH-4002 Basel
 Switzerland
 Tel.: +41 (61) 815 8109
 Fax: +41 (61) 815 8770
 E-Mail: dirk.cremer@dsm.com

Mr Hervé **Nordmann**
 Scientific & Regulatory Affairs
 EMEA
 Ajinomoto Co Inc
 En Crochet 1
 CH-1143 Apples
 Switzerland
 Tel.: +41 (21) 800 3763
 Fax: +41 (21) 800 4087
 E-Mail: herve.nordmann@asg.ajinomoto.com

Dr. Philippe **Pittet**
Deputy Head Regulatory Affairs
Nestec Ltd.
Avenue Nestlé 55
CH-1800 Vevey
Switzerland
Tel.: +41 (21) 924 4264
Fax: +41 (21) 924 4547
E-Mail: philippe.pittet@nestle.com

THAILAND / THAÏLANDE / TAILANDIA

Prof Kraisd **Tontisirin**
Senior Advisor
National Bureau of Agricultural Commodity
and Food Standards
Ministry of Agriculture and Cooperatives
50 Phaholyothin Road, Ladyao, Chatuchak
Bangkok 10900
Thailand
Tel.: +66 (2) 561 2277
Fax: +66 (2) 561 3357
E-Mail: karisid.tontisirin@gmail.com

Ms Churairat **Arpanantikul**
The Federation of Thai Industries
Food Processing Industry Club
Queen Sirikit National Conventions Center, Zone C,
4th Floor
60 New Rachadapisek Road, Klongtoey
Bangkok 10110
Thailand
Tel.: +66 (2) 345 1167
Fax: +66 (2) 345 1281-3
E-Mail: churairat_arp@hotmail.com

Ms Mayuree **Ditmetharoj**
Food and Drug Technical Officer
Food and Drug Administration
Ministry of Public Health
Tiwanond Road
11000 Nondhaburi
Thailand
Tel.: +66 (2) 590 77208
Fax: +66 (2) 590 7011
E-Mail: iam_nuengl@yahoo.com

Ms Sanida **Khoonpanich**
Standards Officer
National Bureau of Agricultural Commodity and Food
Standards
Ministry of Agriculture and Cooperative
50 Phaholyothin Road, Ladyao, Chatuchak, Bangkok
Bangkok 10900
Thailand
Tel.: +66 (2) 561 2277 ext. 1445
Fax: +66 (2) 561 3373
E-Mail: sanida.sk@gmail.com

Dr Hataya Kongchuntuk **Rodbumrung**
Director Regulatory Affairs Asia-Pacific

Mead Johnson Nutrition
388 Exchange Tower, 14th Floor,
Sukhumvit Rd, Klongtory
Bangkok 10110
Thailand
Tel.: +66 (2) 345 1167
Fax: +66 (2) 345 1281-3
E-Mail: hataya.kongchuntuk@mjin.com

TURKEY / TURQUIE / TURQUIA

Ms Ayla **Sener**
Food Engineer
Ministry of Agriculture and Rural Affairs
General Directorate of Protection and Control
Akay Cad. No 3 Ankara
06100 Bakanliklar/Ankara
Turkey
Tel.: +90 312 417 4176
Fax: +90 312 425 4416
E-Mail: asener@kkgm.gov.tr

UNITED KINGDOM / ROYAUME-UNI / REINO UNIDO

Mr. Mark **Willis**
Food Standards Agency
Aviation House
125 Kingsway
WC2B 6NH London
United Kingdom
Tel: +44 207 276 8150
Fax: +44 207 276 8193
E-Mail: mark.willis@foodstandards.gsi.gov.uk

UNITED STATES OF AMERICA / ÉTATS-UNIS D'AMÉRIQUE / ESTADOS UNIDOS DE AMÉRICA

Dr Barbara O. **Schneeman**
Director, Office of Nutrition
Labeling and Dietary Supplements
Center for Food Safety & Applied Nutrition
U.S. Food and Drug Administration (HFS-800)
5100 Paint Branch Parkway
College Park, MD 20740
USA
Tel.: +1 (301) 436 2373
Fax: +1 (301) 436 2636
E-Mail: barbara.schneeman@fda.hhs.gov

Dr Allison A. **Yates**
Director
Beltsville Human Nutrition Research Center
Agricultural Research Service
U.S. Department of Agriculture
10300 Baltimore Avenue
Bldg 307C, Rm. 117
Beltsville, MD 20705
USA
Tel.: +1 (301) 504-8157
Fax: +1 (301) 504-9381
E-Mail: allison.yates@ars.usda.gov

Dr Sue A. **Anderson**

Team Leader

Regulations and Review Team

Office of Nutrition, Labeling and Dietary Supplements

Center for Food Safety & Applied Nutrition

Food and Drug Administration (HFS-850)

5100 Paint Branch Parkway

College Park, MD 20740

USA

Tel.: +1 (301) 436 1450

Fax: +1 (301) 436 2636

E-Mail: sue.anderson@fda.hhs.gov

Ms Nancy T. **Crane**

Expert Regulatory Review Scientist

Office of Nutrition, Labeling and Dietary Supplements

Center for Food Safety & Applied Nutrition

Food and Drug Administration (HFS-830)

5100 Paint Branch Parkway

College Park, MD 20740

USA

Tel.: +1 (301) 436 1450

Fax: +1(301) 436 2636

E-Mail: nancy.crane@fda.hhs.gov

Mrs Doreen **Chen-Moulec**

U.S. Codex Officer

U.S. Codex Office

Food Safety and Inspection Service

U.S. Department of Agriculture

1400 Independence Avenue, S.W.

Washington, DC 20250

USA

Tel.: +1 (202) 720 4063

Fax: +1 (202) 720 3157

E-Mail: Doreen-chen-moulec@fsis.usda.gov

Dr Julie **Moss**

Deputy Director, International Affairs Staff

Center for Food Safety & Applied Nutrition

U.S. Food and Drug Administration (HFS-550)

5100 Point Branch Parkway

College Park, MD 20740

USA

Tel.: +1 (301) 436 2031

Fax: +1 (301) 436 2618

E-Mail: julie.moss@fda.hhs.gov

Non-Government Advisors

Dr Lisa **Craig**

Director, Regulatory Affairs

Abbott Nutrition

RP3-2, Dept. 06NG

625 Cleveland Avenue

Columbus, Ohio 43215

USA

Tel.: +1 (614) 624 3696

Fax: +1 (614) 727 3696

E-Mail: lisa.craig@abbott.com

Dr Kenneth J. **Falci**

Senior Director

Scientific Regulatory Operations

Kellogg Company

Porter Street Office Complex

235 Porter Street

Battle Creek, Michigan 49014

USA

Tel.: +1 (269) 961 3632

E-Mail: ken.falci@kellogg.com

Dr James C. **Griffiths**

Vice President

Food, Dietary Supplements and Excipient Standards

US Pharmacopeia

12601 Twinbrook Parkway

Rockville, MD 20852

USA

Tel.: +1 (301) 998 6811

Fax: +1 (301) 816 8157

E-Mail: jp@usp.org

Dr Willian C. **MacLean, Jr.**

Consultant – self employed

1800 Upper Chelsea Road

Columbus, Ohio 43212

USA

Tel.: +1 (614) 486 6170

E-Mail: william.maclean@earthlink.net

Ms Mardi K. **Mountford**

Executive Vice President

International Formula Council

1100 Johnson Ferry Road, Suite 300

Atlanta, Georgia 30342

USA

Tel.: +1 (404) 252 3663

Fax: +1 (404) 252 0774

E-Mail: mmountford@kellencompany.com

Dr Lisa A. **Sutherland**

Assistant Professor

Department of Pediatrics

Senior Nutrition Scientist

Hood Center for Children and Families

Dartmouth Medical School

HB 7465, One Medical Center Drive

Lebanon, New Hampshire 03756

USA

Tel.: +1 (603) 667 7979

Fax: +1 (603) 653 0790

E-Mail: lisa.a.sutherland@dartmouth.edu

INTERNATIONAL NON-GOVERNMENTAL ORGANIZATIONS

AAF – ASSOCIATION DES AMIDONNIERS ET FECULIERS

Mrs Julie **Scott**

AAF

Avenue des Arts 43

1040 Bruxelles
Belgium
Tel.: +32 (2) 289 6760
E-Mail : aaf@aaf-eu.org

AESGP – ASSOCIATION OF THE EUROPEAN SELF-MEDICATION INDUSTRY

Dr. Rose **Schraitle**
Drug Regulatory Affairs Manager
AESGP
7 Avenue de Tervuren
1040 Brussels
Belgium
Tel.: +32 (2) 735 5130
Fax: +32 (2) 735 5222
E-Mail: info@aesgp.be

AIDGUM – INTERNATIONAL ASSOCIATION FOR THE DEVELOPMENT OF NATURAL GUM

Mr Gontran **Dondain**
President
International Association for the Development of Natural Gum (AIDGUM)
129 Chemin de Croisset
76723 Rouen
France
Tel.: +33 (2) 3283 1818
Fax: +32 (2) 3283 1919
E-Mail: gdondain@eniworld.com

Dr John **Lupien**
Vice President, Scientific Adviser
International Association for the Development of Natural Gum (AIDGUM)
129 Chemin de Croisset
76723 Rouen
France
Tel.: +33 (2) 3283 1818
Fax: +32 (2) 3283 1919
E-Mail: john@lupien.net

CEFIC - CONSEIL EUROPEEN DE L'INDUSTRIE CHIMIQUE)

Dr Huub **Scheres**
Cefic/Danisco
Av. Van Nieuwenhuyse 4
1160 Brussels
Belgium
Tel.: +31 62 909 3600
Fax: +31 71 568 6169
E-Mail : huub.scheres@danisco.com

CEFS – COMITÉ EUROPÉEN DES FABRICANTS DE SUCRE

Mrs Camille **Perrin**
Scientific & Regulatory Affairs Manager
CEFS- Comité Européen des Fabricants de Sucre
Avenue de Tervuren 182
1150 Brussels
Belgium
Tel.: +32 (2) 774 5106

Fax : +32 (2) 771 0026
E-Mail : camille.perrin@cefs.org

CIAA - CONFEDERATION DES INDUSTRIES AGRO-ALIMENTAIRES DE L'UE

Mrs Susanne **Döring**
Director, Consumer Information, Diet and Health
CIAA
Avenue des Arts 43
1040 Brussels
Belgium
Tel.: +32 (2) 500 8755
Fax: +32 (2) 508 1021
E-Mail: s.doring@ciaa.eu

Dr Paul **Tenning**
Danisco
Langebrogade 1
1001 Copenhagen
Denmark
Tel.: +45 3266 2028
Fax: +45 3266 2189
E-Mail: paul.tenning@danisco.com

COUNCIL FOR RESPONSIBLE NUTRITION – CRN

Dr John **Hathcock**
Senior Vice President
CRN
1828 L St, NW Suite 510
20036 Washington, DC
USA
Tel.: +1 202 204 7662
Fax: +1 202 204 7701
E-Mail: jhathcock@crnusa.org

Mr Mark **Ledoux**
Chairman
Natural Alternatives International
1185 Linda Vista Drive
92078 San Marcos, California
USA
Tel: +1 760 736 7741
Fax: +1 760 591 9637
E-Mail: mledoux@nai-online.com

Ms Michelle **Stout**
Regulatory Policy Director
Anway/Nutriline
5600 Beach Blvd.
90621 Buena Park, CA
USA
Tel.: +1 714 562 1893
Fax: +1 714 562 7952
E-Mail: michelle.stout@amway.com

Mr John **Venardos**
Chair
International Trade and Market Development Committee
CRN
1828 L Street NW, Suite 510
20036 Washington, DC

USA

Tel.: +1 310 851 2346

Fax: +1 310 767 3316

E-Mail: johnv@herbalife.com

EFLA – EUROPEAN FOOD AND LAW ASSOCIATION

Mr Xavier **Lavigne**

Food Law Manager

EFLA

Avenue de l'Association No 50

1000 Brussels

Belgium

Tel.: +32 (2) 218 1470

E-Mail: secretariat@efla-aeda.org

Mr Matias **Cortes**

Member

EFLA

Avenue de l'Association No 50

1000 Brussels

Belgium

Tel.: +32 (2) 218 1470

Fax: +32 (2) 219 7342

E-Mail: secretariat@efla-aeda.org

EHPM – EUROPEAN FEDERATION OF ASSOCIATIONS OF HEALTH PRODUCT MANUFACTURERS

Dr Derek **Shrimpton**

Scientific Advisor

EHPM

Rue de l'association 50

1000 Brussels

Belgium

Tel.: +32 (2) 209 1145

Fax: +32 (2) 223 3064

E-Mail: secretariat@ehpm.be

ENCA – EUROPEAN NETWORK OF CHILDBIRTH

Mrs Jos **Voss**

ENCA – ENCA Luxemburg AAPE

AAPE, BP 45

L 3444 Dudelange

Luxembourg

Tel.: +352 525291

E-Mail: aape@pt.lu

GAIN – GLOBAL ALLIANCE FOR IMPROVED NUTRITION

Dr Jonathan **Siekman**

Senior Associate, Infant and young Child Nutrition

GAIN

Rue de Vermont 37-39

P.O.Box 55

CH-1211 Geneva 20

Switzerland

Tel.: +41 (22) 749 1850

Fax: +41 (22) 749 1851

E-Mail: jsiekman@gainhealth.org

IACFO - INTERNATIONAL ASSOCIATION OF CONSUMER FOOD ORGANIZATIONS

Ms Patti **Rundall**

Policy Director - Baby Milk Action

34 Trumpington Street

Cambridge CB2 1QY

United Kingdom

Tel.: +44 (1223) 464420

Fax: +44 (1223) 464417

E-Mail: prundall@babymilkaction.org

IADSA - INTERNATIONAL ALLIANCE OF DIETARY / FOOD SUPPLEMENT ASSOCIATIONS

Mr Byron **Johnson**

Chairman

International Alliance of Dietary/Food Supplement

Associations (IADSA)

50, Rue de l'Association

1000 Brussels

Belgium

Tel.: +32 (2) 2 09 11 55

Fax: +32 (2) 2 23 30 64

E-Mail: byronjohnson@iadsa.be

Ms Ainhoa **Larranaga**

International Alliance of Dietary/Food Supplement

Associations (IADSA)

50, Rue de l'Association

1000 Brussels

Belgium

Tel.: +32 (2) 2 09 11 55

Fax: +32 (2) 2 23 30 64

E-Mail: ainhoalarranaga@iadsa.be

Dr Boris **Pimentel**

International Alliance of Dietary/Food Supplement

Associations (IADSA)

50, Rue de l'Association

1000 Brussels

Belgium

Tel.: +32 (2) 2 09 1155

Fax: +32 (2) 2 23 3064

E-Mail: secretariat@iadsa.be

Mr David **Pineda Ereño**

Director, Regulatory Affairs

International Alliance of Dietary/Food Supplement

Associations (IADSA)

Rue de l'Association 50

1000 Brussels

Belgium

Tel.: +32 (2) 209 1155

Fax: +32 (2) 223 3064

E-Mail: davidpineda@iadsa.be

Prof David **Richardson**

Scientific Advisor

International Alliance of Dietary/Food Supplement

Associations (IADSA)

50, Rue de l'Association

1000 Brussels

Belgium

Tel.: +32 (2) 2 09 11 55

Fax: +32 (2) 2 23 30 64

E-Mail: secretariat@iadsa.be

Mr Nico **Raczek**

Secretariat

International Alliance of Dietary/Food Supplement

Associations (IADSA)

Rue de l'Association 50

1000 Brussels

Belgium

Tel.: +32 (2) 209 1155

Fax: +32 (2) 223 3064

E-Mail: secretariat@iadsa.be

**IBFAN - INTERNATIONAL BABY FOOD ACTION
NETWORK**

Ms Elisabeth **Sterken**

Director

INFACCT Canada/IBFAN North America

6 Trinity Square

M5G 1B1 Toronto, Ontario

Canada

Tel.: +1 (416) 595 9819

Fax: +1 (416) 591 9355

E-Mail: esterken@infactcanada.ca

Mr Mosadeq **Sahebodin**

Executive Member

IBFAN Africa

Sunset Lane, La Caverne

Box 1134

Vacaos

Mauritius

Tel.: +230 757 1438

E-Mail: mosadeq53@intnet.mu

Mrs Rufaro **Madzima**

Infant and Young Child Nutrition Consultant

IBFAN Africa

8 Southam Road, Greystone Park

Harare

Zimbabwe

Tel.: +263 9122 30815

E-Mail: rcmadzima@yahoo.com

ICA - INTERNATIONAL CO-OPERATIVE ALLIANCE

Mr Kazuo **Onitake**

Japanese Consumers' Co-operative Union

Head of Unit, Safety Policy Service

Co-Op Plaza, 3-29-8, Shibuya, Shibuya-Ku

150-8913 Tokyo

Japan

Tel.: +81 (3) 5778 8109

Fax: +81 (3) 5778 8125

E-Mail: kazuo.onitake@jccu.coop

**ICBA - INTERNATIONAL COUNCIL OF BEVERAGES
ASSOCIATIONS**

Mrs Helen **Falco**

Technical Advisor

International Council of Beverages Associations

c/o American Beverage Association

1101 Sixteenth Street NW

20036 Washington, D.C.

USA

Tel.: +1 (202) 463 6790

Fax: +1 (202) 659 5349

E-Mail: hefalco@na.ko.com

Mr Hiromi **Ohta**

Technical Advisor

Japan Soft Drinks Association

3-3-3 Nihonbashi-Muromachi Chuo Ku

Tokyo

Japan

Tel.: +81 (3) 3270 7300

Fax: +81 (3) 3270 7306

E-Mail: hiromi_ohta@suntory.co.jp

ICGA - INTERNATIONAL CHEWING GUM ASSOCIATION

Mr Christophe **Leprêtre**

Manager

International Chewing Gum Association (ICGA)

c/o Keller and Heckman LLP

Avenue Louise 523

B-1050 Brussels

Belgium

Tel.: +32 (2) 6455060

Fax: +32 (2) 6455050

E-Mail: icga@gumassociation.org

**ICGMA - INTERNATIONAL COUNCIL OF GROCERY
MANUFACTURERS ASSOCIATIONS**

Mr Robert **Earl**

Vice President for Science Policy, Nutrition and Health

ICGMA

1350 I Street, NW, Suite 300

2005 Washington, DC

USA

Tel.: +1 (202) 639 5970

Fax: +1 (202) 639 5991

E-Mail: rearl@gmaonline.org

**IDACE - ASSOCIATION DES INDUSTRIES DES ALIMENTS
DIETETIQUES DE L'UNION EUROPEENNE**

Ms Aleksandra **Wesolowska**

Association des Industries des Aliments Diététiques de

l'Union Européenne (IDACE)

194, Rue de Rivoli

75001 Paris

France

Tel.: +32 476 501963

Dr. Marie-Odile **Gailing**
 Association des Industries des Aliments Diététiques de
 l'Union Européenne (IDACE)
 194 Rue de Revoli
 75001 Paris
 France
 Tel.: +33 153 45 8787
 E-Mail: marie.odile.gailing@nestle.com

IDF - INTERNATIONAL DAIRY FEDERATION

Ms Isabelle **Neiderer**
 Director of Nutrition
 Dairy Farmers of Canada
 1801 McGill College Avenue, Suite 700
 H3E 2N4 Montreal
 Canada
 Tel.: +1 (514) 284 1092
 Fax: +1 (514) 284 0449
 E-Mail: isabelle.neiderer@dfc-plc.ca

Mr Eric **Grande**
 Regulatory Affairs Director
 Groupe LACTALIS
 10.20 rue Adolphe Beck
 53089 Laval Cedex 9
 France
 Tel.: +33 (2) 4359 5123
 E-Mail: eric.grande@lactalis.fr

Ms Sandra **Tuijelaars**
 Nutrition Officer
 International Dairy Federation
 80, Boulevard Auguste Reyers
 1030 Brussels
 Belgium
 Tel.: +32 (2) 706 8650
 Fax: +32 (2) 733 0413
 E-Mail: stuijelaars@fil-idf.org

IFAC - INTERNATIONAL FOOD ADDITIVES COUNCIL

Ms Victoria **Betteridge**
 Group Regulatory Affairs
 Tate & Lyle PLC
 Lower Thomas Street
 Sugar Quay
 EC3R 6DQ London
 United Kingdom
 Tel.: +44 (20) 79787 6295
 E-Mail: victoria.betteridge@tateandlyle.com

Mr Wim **Caers**
 Manager Regulatory Affairs
 Beneo Group
 Aandorenstraat 12
 3300 Tienen
 Belgium
 Tel.: +32 (16) 801 483
 Fax: +49 (21)421 165
 E-Mail: wim.caers@beneo-group.com

Dr. Pierre **Kirsch**
 Scientific & Regulatory Advisor to Lubrizol Company
 Lubrizol
 Avenue du Pesage 18/9
 B-1050 Brussels
 Belgium
 Tel.: +32 (4) 7397 4002
 E-Mail: kirsch@skynet.be

Prof Barry **McCleary**
 Methodology Expert
 Megazyme
 Megazyme International Ireland Ltd.
 Bray Business Park, Bray
 Co Wicklow Ireland
 Bray
 Ireland
 Tel.: +353 (1) 286 1220
 Fax: +353 (1) 286 1264
 E-Mail: barry@megazyme.com

Dr Rosemary **Walzem, RD**
 Associate Professor of Nutrition
 Texas A&M University
 Kleberg Center RM 242
 77843-2472 College Station, TX
 USA
 Tel.: +1 (979) 845 7537
 Fax: +1 (979) 845 1921
 E-Mail: rwalzem@poultry.tamu.edu

Dr Rodney J.H. **Gray**
 Vice President Regulatory Affairs
 Martek Biosciences
 6480 Dobbin Road
 21045 Columbia, Maryland
 USA
 Tel.: +1 (410) 740 0081
 Fax: +1 (410) 470 2985
 E-Mail: rgray@martek.com

Ms Gloria **Brooks-Ray**
 Advisor, Codex and International Regulatory Affairs
 Exponent
 Center for Chemical Regulation and Food Safety
 P.O.Box 97
 07046 Mountain Lakes NJ
 USA
 Tel.: +1 (973) 334 4652
 E-Mail: gbrooksray@exponent.com

ILCA - INTERNATIONAL LACTATION CONSULTANT ASSOCIATION

Maryse **Arendt**
 Director Initiativ Liewensufank
 International Lactation Consultant Association - ILCA
 Initiativ Liewensufank
 20 rue de Contern
 5955 Itzig
 Luxembourg

Tel.: +352 360597 13
E-Mail: info@liewensufank.lu

ILSI – INTERNATIONAL LIFE SCIENCES INSTITUTEMrs Fabienne **Malherbe**

ILSI Europe

Av. E. Mounier 83, box 6

B-1200 Brussels

Belgium

Tel.: +32 (2) 771 0014

Fax: +32 (2) 762 0044

E-Mail: fmalherbe@ilsieurope.beMs Laura **Bonilla**

Regulatory Affairs Manager

Unilever de Mexico

Paseo de Los Tamarindos No. 150

Col. Bosques de Las Lomas

Deleg. Cuajimalpa

05120 Mexico, D.F.

Mexico

Tel.: +52 (55) 1105 4487

Fax: +52 (55) 1105 4462

E-Mail: laura.bonilla@unilever.comDr. Shuji **Iwata**

Director ILSI Japan

ILSI Japan

Kojimachi R, K Bldg. 2-6-7

Kojimachi, Chiyoda-ku

102-0083 Tokyo

Japan

Tel.: +81 (3) 5215 3535

Fax: +81 (3) 5215 3537

E-Mail: shu-iwata@ilsijapan.orgMs Olive **Misa**

Abbott Nutrition International

Cooperate Relations Director

102 Edsa Corner Madison

1554 Mandaluyong

Philippines

Tel.: +63 702 8543

E-Mail: maolivia.misa@abbott.comMr Kazuo **Sueki**

Director Scientific Information

ILSI Japan

Kojimachi R, K Bldg. 2-6-7

Kojimachi, Chiyoda-ku

102-0083 Tokyo

Japan

Tel.: +81 (3) 5215 3535

Fax: +81 (3) 5215 3537

E-Mail: kazuo.sueki@aifn.org**ISDI – INTERNATIONAL SPECIAL DIETARY FOODS****INDUSTRIES**

Dr Andrée Bronner

International Special Dietary Foods Industries (ISDI)

194 Rue de Rivoli

F-75001 Paris

France

Tel.: +33 (1) 5345 8787

Fax: +33 (1) 5345 8780

E-Mail: andree.bronner@isdifederation.orgMs Cristine **Bradley**

Regulatory Science

International Special Dietary Foods Industries (ISDI)

194 Rue de Rivoli

F-75001 Paris

France

Tel.: +33 (1) 5345 8787

Fax: +33 (1) 5345 8780

E-Mail: andree.bronner@isdifederation.orgMr Jean-Claude **Javet**

International Special Dietary Foods Industries (ISDI)

194 Rue de Rivoli

F-75001 Paris

France

Tel.: +33 (1) 5345 8787

Fax: +33 (1) 5345 8780

E-Mail: andree.bronner@isdifederation.orgMrs Jayne **Davies**

Associate Director, International Affairs

Wyeth Nutrition

200 Campus Drive

19426 Collegeville, PA

USA

Tel.: +1 (484) 865 58546

Fax: +1 (484) 865 0664

E-Mail: daviesj2@wyeth.comandree.bronner@isdifederation.orgMs Stéphanie **Kramer-Jutant**

International Special Dietary Foods Industries (ISDI)

194 Rue de Rivoli

75001 Paris, France

Tel.: +33 (1) 5345 8787

Fax: +33 (1) 5345 8780

E-Mail: andree.bronner@isdifederation.orgMrs Leoniek **Robroch**

Friesland Campina

P.O.Box 8

9410AA Beilen

Netherlands

Tel.: +31 (6) 1297 4416

E-Mail: leoniek.robroch@frieslandcampina.comMr Peter **Van Dael**

International Special Dietary Foods Industries (ISDI)

194 Rue de Rivoli

75001 Paris

France

Tel.: +33 (1) 5345 8787

Fax: +33 (1) 5345 8780

E-Mail: andree.bronner@isdifederation.org

IWGA – INTERNATIONAL WHEAT GLUTEN ASSOCIATION

Dr Marcel **Feys**
Regulatory Affairs Manager
SYRAL Belgium N.V.
Burchstraat 10
9300 Aalst
Belgium
Tel.: +32 (53) 733315
Fax: +32 (53) 733028
E-Mail: marcel.feys@syral.com

NHF – NATIONAL HEALTH FEDERATION

Dr Scott C. **Tips**
General Legal Counsel
National Health Federation
PO Box 688
Monrovia, California 91017
USA
Tel.: +1 (626) 357 2182
Fax: +1 (626) 303 0642
E-Mail: scott@rivieramail.com

Ms Monika **Wehling**
National Health Federation
PO Box 688
Monrovia, California 91017
USA
Tel.: +1 (626) 357 2182
Fax: +1 (626) 303 0642

Ms Petra **Weiss**
National Health Federation
PO Box 688
Monrovia, California 91017
USA
Tel.: +1 (626) 357 2182
Fax: +1 (626) 303 0642

WORLD SUGAR RESEARCH ORGANIZATION

Dr Richard **Cottrell**
Director General
WSRO
70 Collingwood House
Dolphin Square
SWIV 3LX London
United Kingdom
Tel.: +44 (20) 7821 6800
Fax: +44 (20) 7834 4137
E-Mail: rcottrell@wsro.org

Dr. Charles **Baker**
Scientific Committee Member
WSRO
70 Collingwood House
Dolphin Square
SWIV 3LX London
United Kingdom
Tel: +44 (20) 7821 6800
Fax: +44 (20) 7834 4137
E-Mail: cbaker@sugar.org

INTERNATIONAL GOVERNMENTAL ORGANIZATION**WHO - WORLD HEALTH ORGANIZATION**

Dr Chizuru **Nishida**
Scientist
Department of Nutrition for Health and Development
NHD)
WHO
20. Avenue Appia
1211 Geneva 27
Switzerland
Tel.: +41 (22) 791 3317/3455
Fax: +41 (22) 791 4156
E-Mail: nishidac@who.int

Dr Lisa **Rogers**
Technical Officer
Department of Nutrition for Health and Development
(NHD)
WHO
20, Avenue Appia
1211 Geneva
Switzerland
Tel.: +41 (22) 791 1957
Fax: +41 (22) 791 4156
E-Mail: rogersl@who.int

Prof John **Cummings**
WHO Temporary Adviser
c/o Dr Chizuru Nishida, Nutrition for Health and
Development
WHO
20. Avenue Appia
1211 Geneva 27
Switzerland
Tel.: +41 (22) 791 3317/3455
Fax: +41 (22) 791 4156
E-Mail: j.h.cummings@dundee.ac.uk

Dr Soren Bo **Madsen**
Technical Officer Food and Chemical Safety
WHO, Regional Office for the Eastern Mediterranean
Abdul Razzak Al Sanhoury Street
P.O.Box 7608 Nasr City
11371 Cairo
Egypt
Tel.: +202 276 65317
Fax: +202 227 65415
E-Mail: madsens@emro.who.int

FAO – FOOD AND AGRICULTURE ORGANIZATION OF THE UNITED NATIONSMrs Ruth **Charrondiere**

Nutrition Officer

FAO

Viale delle Terme di Caracalla

00153 Rome

Italy

Tel.: +39 (6) 570 56134

Fax: +39 (6) 570 54593

E-Mail: ruth.charrondiere@fao.org**GERMAN SECRETARIAT**Mr Georg **Müller**

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: cnfsdu@bmelv.bund.deMrs Ursula **Siebert**

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: cnfsdu@bmelv.bund.deMr Peter **Braun**

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: cnfsdu@bmelv.bund.de**CODEX SECRETARIAT**

Ms Selma Doyran

Codex Secretary

Joint FAO/WHO Food Standards Programm

Viale delle Terme di Caracalla

00153 Rome

Italy

Tel.: +39 (6) 570 55826

Fax: +39 (6) 570 54593

E-Mail: selma.doyran@fao.orgDr Jeronimas **Maskeliunas**

Food Standards Officer

Joint FAO/WHO Food Standards Programm

Viale delle Terme di Caracalla

00153 Rome

Italy

Tel.: +39 (6) 570 53967

Fax: +39 (6) 570 54593

E-Mail: jeronimas.maskeliunas@fao.orgMr Yongxiang **Fan**

WHO Fellowship/FAO Consultant

Joint FAO/WHO Food standards Programm

Viale delle Terme di Caracalla

00153 Rome

Italy

Tel.: +39 (6) 570 55629

Fax: +39 (6) 570 54593

E-Mail: yongxiang.fan@fao.org

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.