

CODEx ALIMENTARIUS COMMISSION



Food and Agriculture
Organization of the
United Nations



World Health
Organization

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Agenda Item 1, 2, 4b and 5

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

Fortieth Session

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Comments of Nigeria

AGENDA ITEM 1

Comment: Nigeria supports the adoption of the provisional agenda as circulated.

AGENDA ITEM 2

Matters for Action

1: Nigeria supports the development of prioritization mechanism to better manage the Committee's work.

Justification: There is need to established criteria which will be used by the Committee to make objective decision on the work to be prioritized within the constraints of time and other resources with the increasing number of new work.

2: Nigeria supports the requirement of Vitamin D to be maintained as Vitamin D3 in CXS 72-1981

Justification: Vitamin D3 is more efficient in raising plasma concentration of D3 which more beneficial and potent for infants, and can be sourced from animals.

3: Nigeria supports CCFA recommendation to revoke the food additives.

Justification: Food additives should only be used where there is a requisite technological justification and where JECFA has fully published the evaluated safety and specifications which are reduced to the barest minimum for infants and young children.

AGENDA ITEM 4 b)

Preamble:

Nigeria supports having a preamble to this standard and proposes the preamble be amended to read as follows:

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

*The production, distribution, sale and use of follow-up formula for older infants and [name of product] for young children should be consistent with national health and nutrition policies and relevant national/regional legislation, and take into account, the recommendations made in the International Code of Marketing of Breast-milk Substitute (1981) and the Global Strategy for Infant and Young Child Feeding. Relevant WHO guidelines and policies, as well as relevant World Health Assembly (WHA) resolutions that have been **supported** by member states **should** provide guidance to countries in this context.*

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

Justification: This provides a strong recommendation to apply the International Code of Marketing of BMS as well as the WHA resolutions to users of the standard.

The word '**promote**' is in the first paragraph of the preamble is consistent with the intent of protecting, promoting and supporting breast feeding. The deletion of the word '**necessary**' and replacement with the word '**appropriate**' connotes with "suitability". This word necessary creates the impression that the products are not nutritionally essential.

We propose deletion of the words '**as appropriate**' in the second paragraph, to make the recommendations of the Code taken into consideration. The words '**endorsed** and **supported**' should be sustained, while the word '**may be**' is replaced with '**should**' to strengthen the recommendation.

Recommendations 1, 2, 3, 4, 5 and 6:

Nigeria supports the proposed scope for follow-up formula for older infants with '**shall**' in 1.3 that implies mandatory compliance

Justification: The proposed scope ensures precision and specification and complies with the procedural manual to avoid ambiguity in the standard.

Recommendation 7:

Nigeria supports the adoption of the definition as presented.

Justification: The deletion of the word '**specially**' will eliminate any importance given to the products that may create misleading impression of a special product to users, and is against the spirit and intent of breast milk substitutes and the Code for Marketing of Breast Milk Substitutes.

Recommendation 8:

Nigeria proposes the definition that refers to the products as breast milk substitute as follows: ***[Name of product] for young children means a product manufactured for use as a breast-milk substitute, as a liquid part of the diversified diet of young children in order to contribute to the nutritional needs of young children.***

Justification: The WHA resolution 69/7 addendum 1, treats any product manufactured targeting infants and young children from 6 to 36 months as BMS, therefore the words, '**as a breast-milk substitute**' should be retained in the definition, for consistency with the age group in consideration.

Recommendation 9:

Nigeria supports the proposed deletion in the provided text:

Justification: The Clause 1.4 of the *Guidelines for Use of Nutrition and Health Claims (CXG 23-1997)*, prohibits the use of nutrition claims in products intended for infants and young children to avoid unnecessary conflicts of Codex Standards.

Recommendation 10:

Nigeria agrees with the recommendations for the deletions in 9.6 .1c), 9.6.1d), and 9.6.2 and remove the brackets in 9.6.2 – 9.6.2.5 and 9.6.4 that makes 9.6 "Additional Labelling Requirements" read as:

Justification: This is to ensure that breast feeding is protected and promoted, and eliminates confusion of the products for illiterate populations who may rely on features, such as, colour or shape. This will reduce chances of cross-promotion of related products.

Recommendation 11:

Nigeria supports the proposed deletion in the provided text:

Justification: Clause 1.4 of the *Guidelines for Use of Nutrition and Health Claims (CXG 23-1997)*, clearly prohibits use of nutrition claims in products intended for infants and young children.

Recommendation 12:

Nigeria supports the proposed clause 9.1 in its entirety:

Justification: The clause requires proper naming of the products according to the source of protein in order to identify the true nature of the product and enable consumers make informed choice of product.

Recommendation 13:

Nigeria supports the proposed clause 9.2 and recommends the opening of the bracket on "***including optional ingredients***" in 9.2.1

Justification: This makes provision for other optional ingredients not included in the complete list, while clause 9.2.2 obligates the specific declaration of the name, INS numbers and class names of the food additives.

Recommendation 14:

Nigeria agrees with the recommendation of the EWG.

Justification: The clause makes it mandatory to declare both the amount of energy as well as vitamins and minerals in per 100grams, 100 millilitres and serving size of a ready to use products after reconstitution to guidance to consumers on the intended benefits.

Recommendation 15:

Nigeria supports the proposed clause 9.4 in its entirety.

Justification: It is consistent with the published Codex texts which requires that dates be declared as “Best Before Date” or “Best Quality Before Date”.

Recommendation 16:

Nigeria supports the proposed clause 9.5 with the open bracket in 9.5.3.

Justification: The clause provides sufficient instruction related to use and storage of the products and consistency with labeling requirements. The word ‘Good Hygiene Practice’ is in line with the current understanding of the term.

Recommendation 17:

Nigeria supports the proposed clause 9.6, and the opening of the square brackets and the strike through.

Justification: The statement in 9.6.1 addresses the appropriate marketing of the products, while the statement in 9.6.2 will eliminate confusion of the products and prevent cross promotion of the products.

Recommendation 18:

Nigeria does not support inclusion of the term ‘**Formulated**’ to the name of the product.

Justification: It is proposed that a prefix that denotes the major food matrix which describes the true nature of the product is used before the ‘drink for young children’. Thus if the product is based on milk, it becomes ‘**Milk-based**’ *drink for young children*

Recommendation 19:

Nigeria supports that the standard should be developed as one standard with two parts.

Justification: This is based on previous consensus by the committee that though two products are related, but has a point of differentiation at 12 months of age for nutrient requirements of young children change. Therefore, it is preferable to have the two related standards as one standard for ease of references, convenience and implementation by the government and the industry.

AGENDA ITEM 5

Recommendation 1:

Nigeria supports the preamble

Justification: The preamble provides the justification for the standard and provides the important reference materials that must be used with the guidelines in formulating RUTF products.

Recommendation 2:

Nigeria proposes the that the WHO document read, ‘*appendix 4 of WHO Management of severe malnutrition: A manual for physicians and other senior health workers (1999)*’ and the opening of brackets of the last sentence of paragraph 2

Justification: The referencing documents external to Codex is at the specific area of the text, not the whole document. The opening of square brackets ensures appropriate compensation for the potency of the various nutrients in the formulation.

Recommendation 3:

Nigeria proposes the text to read:

‘Available Carbohydrates² the palatability of the RUTF can be increased by the addition of available carbohydrates. Honey should not be used in RUTF due to the risk of infant botulism from Clostridium botulinum.’

Justification: The retention of the text, mandates the use of carbohydrates only in Codex texts, but the guidelines should make specific reference to Codex texts where they exist.

Recommendation 4:

Nigeria does not support the adoption of this recommendation and the accompanying Table 1

Justification: Most of the food additives are approved for use in complementary foods, Formula for Special Medical Purposes for Infants (FC 13.1.3) or Dietary Products (FC 13.3). It is un-procedural to adopt these food additives without consulting with CCFA on how to proceed with the provisions.

Recommendation 6:

Nigeria supports the energy density value as proposed

Justification: The proposed energy density value per 100g is sufficient to manage SAM. It is similar to those published by the Joint UNICEF/WHO statement on the management of SAM

Recommendation 7:

Nigeria supports the recommendation on “not to set the level for carbohydrates”

Justification: This will allow flexibility in the amount of carbohydrates used, since the guidelines provide specific guidance for protein and fats, leaving provision for carbohydrates to provide the remaining energy density.

Recommendation 8:

Nigeria supports the recommendation for providing 10 – 12 % of energy from protein

Justification: The proposed level of protein ensures that the potential for accumulation of ammonia is reduced in populations whose metabolism is already compromised. This will protect the organs of children which cannot digest as much protein as adults.

Recommendation 9:

Nigeria supports the recommendation to keep the text in square bracket.

Justification: The Committee should wait for the guidance of FAO on the method of comparing quality of protein before a final decision.

Recommendation 10 and 11:

Nigeria supports the recommended levels.

Justification: This will ensure that children attain the daily energy requirements despite consuming small amounts due to reduced appetite. It is also important to include essential fatty acids for normal functioning of the body to support recovery and development of cognitive abilities.

Recommendation 12:

Nigeria supports adoption of the maximum level of 1.2 mg RE/100g (0.22 mg/ RE/100kcal and 220 µg RE/100kcal) and the accompanying note

Justification: The proposed level is less likely to predispose the children to the risk of toxicity associated with high consumption of Vitamin A, while the higher level provides overages to account for losses during production given the narrow range provided (0.8 – 1.2 mg RE/100g).

Recommendation 13:

Nigeria supports adoption of the maximum level of 20 µg/100 g (3.6 µg/100 kcal) together with the foot note 3, for vitamin D3.

Justification: The range provided (15 – 20 µg/100 g) is sufficient to enable manufacturers to formulate products that achieve the levels with overages and the maximum limit consistent as recommended in the Joint WHO/UNICEF statement.

Recommendation 14:

Nigeria supports the adoption of the minimum level of 20 mg/100 g (4 mg α-TE /100 kcal) together with foot note 4 as it is unlikely to have Vitamin E toxicity or maximum limit.

Justification: Vitamin E is an important antioxidant in the body and thus there is the need to set a minimum that will provide benefits to the consumers.

Recommendation 15:

Nigeria supports the adoption of the proposed levels for these nutrients.

Justification: The levels are derived from WHO/UNICEF joint statement which has been the basis of most of the RUTF in the markets with desired positive results for the children.

Recommendation 16:

Nigeria supports the adoption of the proposed levels for these nutrients with maximum levels of 600 mg/100 g, 600 mg/100 g and 140 mg/100 g for calcium, phosphorus and magnesium respectively.

Justification: These levels are based on WHO/UNICEF Joint statement. We seek clarification on the sources of the alternative maximum levels of calcium (785 mg/100 g), phosphorus (785 mg/100 g) and magnesium (235 mg/100 g) for informed comment or position.

Recommendation 17, 18 and 19:

Nigeria supports these recommendations.

Justification: The recommended levels in the 2007 Joint Statement have been implemented over time with convincing results on production, new technologies/methodologies and innovation, and is consistent with the Codex procedural manual that requires committees to make reference where codex texts exists.

Recommendation 20:

Nigeria proposes the text to be amended to read as:

It is recommended that methods of analysis and sampling of RUTF be in accordance with the Recommended Methods of Analysis and Sampling (CXS 234-1999)

Justification: The clause should only make reference to the *Codex methods of analysis and Sampling (CXS 234-1999)*.

Recommendation 21:

Nigeria supports this recommendation.

Justification: The proposed text is comprehensive to address packaging of the products and is consistent with similar clauses in other existing Codex Standards.

Recommendation 22:

Nigeria proposes to amend the first bullet of additional mandatory labelling by replacing “medical” with “health workers” to support the adoption.

Justification: The proposed text comprehensively addresses the labelling aspects with reference to Codex labelling Standards and consistent with the current practice where the products are used under the supervision of other health workers.