

# IADSA NEWSFLASH

## MARCH 2013

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#### KEY EVENTS

## **IADSA**

The International Alliance of Dietary /Food Supplements Associations was founded in 1998 to address the globalization of food supplement markets and increasing regulatory challenges. IADSA brings together more than 50 food supplement associations with the aim of building a sound legislative and political environment for the development of the food supplement market worldwide.

IADSA serves its worldwide network of associations and companies by:

- Providing a fast flow of regulatory and policy information on food supplements, ensuring that there is an awareness and understanding of new developments.
- Coordinating strategy and action on global regulatory issues, particularly in relation to Codex Alimentarius initiatives.
- Widening and deepening the network of associations around the world by helping the establishment of new food supplement associations and supporting existing national associations.
- Organizing global and regional events to promote dialogue on the scientific and regulatory issues underpinning the food supplement market.

## **INTERNATIONAL DEVELOPMENTS**

### **CODEX**

#### **DRAFT STANDARD FOR FISH OILS**

The Codex Committee on Fats and Oils (CCFO), which met recently in Malaysia, finished its discussion on the Proposed Draft Standard for Fish Oils with an outcome in line with IADSA's position.

There was a proposal to limit the application of the standard to fish oils used in food. Although food supplements are regulated as foods in most of the countries in the world, IADSA intervened to request that the standard explicitly mentioned that it applies to food and food supplements, so as to avoid any potential confusion and barriers to trade. This suggestion was supported by a significant number of countries and the CCFO agreed to include wording to reflect the point.

In respect of the section on named fish oils and unnamed fish oils, the CCFO agreed that the standard should focus on those that are traded internationally in significant volumes.

IADSA's concerns on the scientific validity of the fatty acid profiles, as presented in Table 1 of the proposed draft standard as an identifier for named fish oils, were overwhelmingly supported by a large number of countries. The CCFO agreed that the values and ranges of the profiles need to be scientifically validated with robust data, as recommended by IADSA.

An electronic working group was established by the CCFO, led by Switzerland, which will redraft the proposed draft standard taking into account data on the trade volumes of fish oils, scientific data to set fatty acid profiles as an identification tool of named fish oils, and the comments expressed during the meeting on the various sections on the draft standard.

For further detail, contact: [secretariat@iadsa.org](mailto:secretariat@iadsa.org)

Source: IADSA

## **ASIA**

### **JAPAN**

#### THE NATIONAL HEALTH AND NUTRITION SURVEY IN JAPAN

The Japanese Ministry of Health, Labour and Welfare (MHLW) has published The National Health and Nutrition Examination Survey of November 2011, which includes data on consumption of fresh foods. This is because 'The Second Healthy Nippon 21 Project' will start this year, and the government needs to understand the relationship between health and social economical factors.

In summary, data on the intake of vegetables, fruits, fish and meat in 2001 were compared with data from 2011. In the mean value analysis, the amount of intake of vegetables, fruits and fish in 2011 had decreased. In contrast, the intake of meat in 2011 had increased when compared with that of 2001.

Consumption of vegetables, fruits and fish was particularly low for 20~40 year olds, and, in relation to consumption of fresh foods and income, intake of vegetables, fruits and meats decreased in proportion to income.

Additionally the Survey covered data on physical status, nutrient intake status, dietary habits, physical activity, exercise, rest (sleep), alcohol drinking, smoking and dental health etc.

Source: AIFN

#### THE ESTABLISHMENT OF THE DRI 2015 EXPERT COMMITTEE

The Ministry of Health, Labour and Welfare (MHLW) has established a new DRI Dietary Reference Intake (DRI) Expert Committee to decide on DRIs in Japan from 2015.

Issues discussed at the first meeting included:

- In addition to health promotion and reduction in the incidence of lifestyle-related diseases, reduction in the increase in severity of those diseases will be discussed. This is seen as a major challenge.
- The balance between energy and intake of macro nutrients.
- In relation to life stages and the elderly, the importance not just of reducing the incidence of disease, but also of reducing physical fragility. As regards maintaining

health in future generations, the importance of considering DRI for pregnant women, infants and young children.

- For future perspectives, the committee should discuss the importance of circadian dysfunction in diseases.
- With regard to review of related data, the working group of DRI should emphasize the importance of both quantity and quality.

The new DRI will be finalised by the middle of 2014 and become effective in April 2015.

Source: AIFN

## **EUROPE**

### **EUROPEAN UNION**

#### HEALTH CLAIMS UPDATE

The draft Regulation amending the authorised list of article 13 claims has been sent to the European Parliament and Council for scrutiny. The following is confirmed:

- Transition phase: a 6-month period is proposed to comply with the new requirements.
- Claims on-hold: 4 categories of claims will remain on-hold, namely:
  - Claims on plant or herbal substances,
  - Claims on foods for use in very low calorie diets and foods with reduced lactose content,
  - Claims on caffeine,
  - A claim on carbohydrates.

The scrutiny period will end on 23 May, after which the text should be officially adopted before being published.

Source: ERNA

#### REVIEW OF THE PARNUTS FRAMEWORK DIRECTIVE

In relation to the Review of the Products for Particular Nutritional Uses (PARNUTS), Directive, 2009/39/EC. the Council of the European Union has now agreed a regulation on food intended for infants and young children, food for special medical purposes and total diet replacement for weight control. The regulation will need to be formally endorsed by the European Parliament in the spring and will then be adopted and published in the Official journal of the European Union (OJ). The agreed text can be seen at:

<http://register.consilium.europa.eu/pdf/en/12/st16/st16961.en12.pdf>

Key areas of the new Framework Regulation include:

- Retaining within the scope rules on Infant formula, follow-on formula, cereal-based baby foods, and foods for special medical purposes.
- New rules for 'total diet replacement for weight control', which covers low calorie diets and very low calorie diets for weight control.

- The establishment of a ‘Union list’ of substances that may be added to foods covered by the regulation. This consolidates the current lists of vitamins, minerals, amino acids etc. under existing legislation.
- The establishment of an Interpretation Procedure to enable the Commission to adopt implementing acts to decide whether a food falls within the scope of the regulation and specify which category a food belongs to. This is seen as helpful in harmonising the interpretation of the regulation and determining, for example, whether a product is a medical food or an infant formula.
- The concept and definition of ‘dietetic food’ is removed. Foods currently marketed as ‘dietetic food’ falling outside the scope, will in future be regulated under general food law.
- Gluten-free foods (and in future lactose-free foods), will be transferred under the Regulation on Food Information to Consumers (1169/2011), maintaining the current high level of protection under Regulation 41/2009.
- Slimming foods (other than total diet replacements) will be regulated under general food law.
- Foods for people with diabetes are removed from the scope as there is no scientific basis for these foods.
- Sports food and milk-based drinks intended for young children (Growing –up milks/toddler milks) are outside the scope and will be regulated under general food law. However, the Commission, with the assistance of the European Food Safety Authority, will provide within two years of entry into force of the Framework, a report on the necessity of specific rules on these foodstuffs, which may result in future legislative proposals.

The Regulation will apply from 3 years after the date of entry into force (20 days after publication in the OJ). In addition, foods placed on the market or labelled before the end of the transition period, may continue to be marketed until stocks are exhausted.

Within two years of entry into force of the Framework, specific rules will be adopted (known as ‘delegated acts’) for each of the food categories above. The delegated acts will take account of the existing legislation and establish specific rules on composition, labelling and advertising of these foods.

Source: ERNA

### EFSA STUDY ON ENERGY DRINK CONSUMPTION

EFSA has published a report on a commissioned study that for the first time collates data on the consumption of “energy” drinks at European level by specific population groups, including children and adolescents. The study also estimates consumers’ exposure, through both acute and chronic consumption, to some active ingredients found in “energy” drinks – primarily caffeine, taurine and D-glucurono-y-lactone. The study found that, among respondents, the age group most likely to consume “energy” drinks was adolescents – 68% of total respondents – and that “energy” drinks when consumed by children aged 3 to 10 years account for an estimated 43% of their total caffeine exposure.

The external study also examined specific “energy” drink consumption habits – co-consumption with alcohol or consumption associated with intense physical exercise – among adolescents and adults. The results provide important data for EFSA’s forthcoming risk assessment on the safety of caffeine and, in the context of a broader mandate, the European Commission’s request to EFSA to determine whether and the extent to which

the consumption of caffeine together with other food constituents such as alcohol or substances found in "energy" drinks could present a risk to health as a result of interactions of these constituents.

The study was based on the results of a EU-wide questionnaire-based survey - involving more than 52.000 participants from 16 different EU Member States [1] (MS) - adults 14.500 participant; adolescents 32.000; children 5.500. The key findings of the survey were:

- Adults (18-65 years): Approximately 30% of adults consumed energy drinks, with about 12% of these being "high chronic" consumers (regularly consuming on 4-5 days a week or more), with an average consumption of 4.5 litres a month. About 11% of consumers were "high acute" consumers (drinking at least 1 litre in a single session).
- Adolescents (10-18 years): Approximately 68%. Of these, about 12% were "high chronic" consumers, with an average consumption of 7 litres a month, and 12% were "high acute" consumers.
- Children (3-10 years): Approximately 18% consumed "energy" drinks, with around 16% being "high chronic" consumers, with average consumption of 0.95 litres a week (almost 4 litres per month).
- Co-consumption with alcohol: adults (56%); adolescents (53%).
- Consumption associated with sporting activities: Approximately 52% of adults and 41% of adolescents
- Contribution of "energy" drinks to total caffeine exposure: Approximately 8% for adults, 13% for adolescents and 43% for children.

Source: ERNA

### ADDITIVES – PATENT BLUE

The European Food Safety Authority recently published a scientific opinion on the re-evaluation of Patent Blue V (E131) as a food additive which concluded that the colour Patent Blue V is not a safety concern for people at current levels of use.

Patent Blue V is a colour that can currently be used singly or in combination at a combined level of 300 mg/kg in solid food supplements and 100 mg/l in supplements supplied in liquid forms.

This opinion follows a request of the European Commission to re-evaluate by 2020 all food additives authorised for use in the EU prior to 20 January 2009 before they can be included on an EU list of approved food additives. The deadline for completion was initially set as 31 December 2010. However, following a call for data, EFSA was informed that a new genotoxicity study was commissioned. The deadline was thus extended so that the results could be taken into consideration for the risk assessment.

For further detail, see <http://www.efsa.europa.eu/en/efsajournal/pub/2818.htm>

Source: ERNA

## FLAVOURINGS

The European Commission, at a recent Standing Committee meeting, has presented its interpretation of Article 16(4) of Regulation (EC) No 1334/2008 on flavourings, in respect of the assessment of the "95/5-ratio".

From the Commission's perspective, the amount of 'flavouring preparations' and 'natural flavouring substances' should be included in the calculation of the '95/5-ratio'. This interpretation was agreed by the majority of the Member States. However, it should be noted that this interpretation is not legally binding.

Source: ERNA

## ASPARTAME

EFSA is to hold a meeting with all contributing stakeholders and other relevant parties on comments received during the public consultation on the Authority's first full risk assessment of the sweetener aspartame. From the meeting, EFSA aims to ensure a full understanding of the comments received during the online consultation phase prior to the final adoption of its scientific opinion in May 2013.

Source: ERNA

## EFSA'S WORKPLAN

The EFSA Work Plan for 2013 is now published. During the year, EFSA expects to deliver around 690 scientific outputs. Priorities for will include the provision of scientific advice and evaluation of regulated products including:

- The setting of Dietary References Values (DRV)
- A full programme of evaluations or re-evaluations of products that will include food additives, health claims applications, safety assessment of Novel Food, Pesticides etc.

To increase the efficacy of application, EFSA will also look at a feasibility study on electronic submission systems used by other European agencies, such as the European Chemicals agency (ECHA) and the European Medicines agency (EMA).

Scientific cooperation with national competent authorities responsible for food and feed safety risk assessment will be another key priority. A review of planning in scientific cooperation is also foreseen in order to adopt an approach in line with the Science Strategy. Additionally, there will be dialogue with stakeholders via the Stakeholder Consultative Platform, consultative workshops, technical meetings etc.

Source: ERNA

## EFSA REQUEST FOR DATA ON EPHEDRA AND YOHIMBE

EFSA has contacted the European Responsible Nutrition Alliance (ERNA) to request any available data in order to carry out a risk assessment of Ephedra species and *Pausinystalia Yohimbe* (K.Schum) in relation to its use in food and food supplements. This follows the submission of these substances after a request from the German Authorities under the Article 8 procedure of Reg. 1925/2006 (Addition of Nutrients to Foods)

EFSA is seeking information on the following:

- Ephedra species (herb), their extracts and their individual components: eg (-) – ephedrine, (-) - norephedrine, (-) – methylephedrine, (+) – pseudoephedrine, (+) – norpseudoephedrine (Cathine)
- Pausinystalia Yohimbe (bark), its extracts and their individual components: e.g. yohimbine, ajmaline and ajmalicine (raubasine).

In particular, EFSA is interested in any available technical data, toxicological data and in information concerning the number of serious adverse events reported, and any other information relevant to their safety assessment.

Source: ERNA, EBF

## **BELGIUM**

### e-NOTIFICATION FOR FOOD SUPPLEMENTS

An electronic system for the legal notification of food supplements and fortified foods was launched in Belgium in February 2013. The new application, 'FOODSUP', for electronic notification allows faster processing records of notification by the Belgian Ministry of Health and a more effective communication with businesses and other agencies.

The notification procedure is mandatory for food supplements and foodstuffs with added nutrients which are put on the Belgian market, and can from now on be done online.

For further information, see:

<http://www.health.belgium.be/eportal/foodsafety/foodstuffs/foodsupplements/841608?fodnl ang=en#Notification>

Source: NAREDI

## **FRANCE**

### APPLICATION OF THE HEALTH CLAIMS REGULATION IN FRANCE

Regulation (EU) No 432/2012 establishing the list of permitted claims came into force on 14 December 2012 in all Member States of the European Union. As a result, checks may be made by the authorities to verify the compliance of products with the appropriate lists of claims.

Thanks to the action of the supplement trade association, SYNADIET, in relation to the short time given for professionals to comply with the Regulations, the French authority, DGCCRF, has shown pragmatism in affirming the principle of a proportionate approach controls.

Its aim will be to promote consistent and proportionate implementation of Community obligations based on observations made. Thus, the controls will check bona fide operators through the steps taken to ensure compliance of the labeling, presentation and advertising associated with their products with claims not in accordance with Regulation (EU) No 432/2012."



The French central government provides guidance to the decentralized control services – the Departmental Office for the Protection of Populations (DDPP) - who ultimately own the decision and the choice of action, depending on the context.

Source: Synadiet

## **IRELAND**

### FSAI LAUNCHES FOOD SAFETY TRAINING WEBSITE

The Food Safety Authority of Ireland (FSAI) has launched a dedicated food safety training facility on its website to provide free online e-learning resources for food businesses.

The first of the e-learning resources, which takes about 45 minutes to complete, deals with food additives and flavourings, including the regulatory requirements and controls governing their use. It covers the terminology and definitions associated with additives, along with an overview of functional classes, labelling requirements and relevant legislation. For further information see: [http://www.fsai.ie/news\\_centre/press\\_releases/e-learning\\_for\\_food\\_industry\\_27022013.html](http://www.fsai.ie/news_centre/press_releases/e-learning_for_food_industry_27022013.html)

Source: IADSA

## **NORWAY**

### COMMITTEE EVALUATES MAXIMUM LIMITS FOR VITAMINS A AND D

The Norwegian Food Safety Authority has asked the Norwegian Scientific Committee for Food Safety (VKM) to evaluate the national maximum limits for vitamin A and vitamin D in food supplements. (The current maximum limit for vitamin A is 1500 microgram Retinol equivalents /daily dose, and 10 microgram/daily dose for vitamin D).

The UL for retinol is 3000 microgram/day for adults and between 1100 microgram /day and 2600 microgram/day for children and adolescents. Recommended intake of vitamin A is 900 and 700 microgram/day for men and women, respectively, and between 350 microgram day and 600 microgram/day for children and adolescents.

The VKM found that the existing maximum limit for vitamin A in food supplements exceeds the recommended intakes in all age groups, and some age groups already have an intake of retinol that exceeds the UL. Additionally, in all of the investigated population groups except for women, the intake in the 95th percentile without supplements would exceed the UL if 1500 microgram retinol (the existing maximum limit for vitamin A in food supplements) were added to the intake. Furthermore, because of the risk of exceeding an intake associated with increased risk of osteoporosis, the VKM concluded that the maximum limit for vitamin A in food supplements should not be increased.

The UL for vitamin D is 100 microgram/day for children and adolescents above 10 years and adults, and 50 microgram/day for children 1-10 years. The recommended intake of vitamin D is 10 microgram/day for children above two years, adolescents and adults, and 20 microgram/day for elderly above 75 years. However, less than 50% of the adult

population meets the recommended intake of vitamin D. The existing maximum limit for vitamin D in food supplements is equivalent to the recommendation for daily intake for children and adults under 75 years.

Therefore, to ensure intake of 20 microgram vitamin D per day in the elderly, a daily dosage of 20 microgram from food supplements is justifiable. And, if the maximum limit for vitamin D in supplements is increased to 20 microgram per daily dosage, all age groups including elderly above 75 years can cover the recommended intake without any risk of exceeding UL. The VKM therefore suggests a new maximum limit at 20 microgram per recommended daily doses in food supplements and recommends that the minimum limit for vitamin D in food supplements is evaluated.

For the full report, see:

[http://english.vkm.no/eway/default.aspx?pid=278&trg=Content\\_6390&Content\\_6390=6393:1894292::0:6745:3:::0:0](http://english.vkm.no/eway/default.aspx?pid=278&trg=Content_6390&Content_6390=6393:1894292::0:6745:3:::0:0)

Source: BRN

### RISK ASSESSMENT FOR AMINO ACIDS

In 2011, the Norwegian Scientific Committee for Food Safety (VKM) conducted a risk categorisation of 30 amino acids and amino acid compounds. Based on potential health risks related to high intakes of the amino acids they were categorised into low, moderate or high risk groups. The amino acids histidine, methionine, S-adenosylmethionine (SAM) and tryptophan were categorised into the high-risk group in this first screening.

Now, the Norwegian Food Safety Authority has asked VKM to risk assess these four amino acids added to foods and drinks and in food supplements. This opinion is limited to the use of single free amino acids in food supplements or fortified foods and drinks, and does not elaborate on risks related to protein hydrolysates or high protein intake. Previous work by the US Institute of Medicine had concluded that there were insufficient data available to evaluate the safety of single free amino acids and that no tolerable upper intake levels (UL) could be established. Mild adverse effects such as nausea and reduced appetite were reported with the use of all four amino acids.

Intake of methionine supplement has been a concern because increased concentration of its metabolite homocysteine in plasma may be associated with cardiovascular disease. Intake of tryptophan supplement (single dose 6 g) has resulted in a significant increase in lipid peroxidation products, indicating an increased oxidative stress level. Intake of tryptophan supplement (4.2 g/day) possibly linked the development of eosinophilia, which may be a health concern.

Because no dose-response studies or adverse health effects related to dose were found, ULs for these four amino acids could not be established. However, a tentative guidance level (GL) at 210 mg/day is suggested for methionine, and 220 mg/day for tryptophan.

Source: BRN

## **UNITED KINGDOM**

### JOINT INDUSTRY DISEASE RISK REDUCTION CLAIM FOR FOLIC ACID

A joint application from the UK supplement associations, the Health Food Manufacturers' Association (HFMA) the Council for Responsible Nutrition (CRN UK) and the Over-the-Counter (OTC) medicines association, the Proprietary Association of Great Britain (PAGB) in conjunction with Shine, a charity which works to help those affected by spina bifida and hydrocephalus, for an Article 14.1a disease risk reduction claim for folic acid.

The application, based on maternal red blood cell folate as the risk factor, for reduced risk of neural tube defects in the foetus, has now been submitted by the UK Department of Health (DH) to the European Food Safety Authority (EFSA) for assessment.

Source: HFMA, CRN UK

### CONSULTATION ON PROPOSED SCOTTISH FOOD AUTHORITY

The shape of a new Scottish food body is set to be sketched out following a consultation period opened last week on the responsibilities and functions of an authority separate from the UK's Food Standards Agency (FSA).

The consultation period will consider how the food safety body will operate – including the possibility that it could have wider responsibilities than the FSA in Scotland, such as monitoring problems like alcohol, obesity and food poverty, or advising on health claims in food advertisements. Others have suggested a new Scottish food authority could also include issues like the environment, food provenance, sustainability or food security in its scope.

For further detail, see:

[www.food.gov.uk/newsupdates/news/2013/mar/scotconsult#.UUCuO9ZH2f4](http://www.food.gov.uk/newsupdates/news/2013/mar/scotconsult#.UUCuO9ZH2f4)

Source: HFMA, CRN UK

## **NORTH AMERICA**

### **CANADA**

#### HEALTH CANADA APPROVES PREBIOTIC FIBRE

Under its revised Fibre Policy for Labelling and Advertising of Dietary Fibre-Containing Food Products, introduced in February 2012, Health Canada has recently approved a prebiotic fibre prepared from sugar cane as a source of dietary fibre.

Source: IADSA

## UNITED STATES

### WHY ADULTS IN THE U.S. USE SUPPLEMENTS

An analysis, reported in a recent edition of the Journal of the American Medicine Association (JAMA), aims to examine the motivations for dietary supplement use, characterize the types of products used for the most commonly reported motivations, and to examine the role of physicians and health care practitioners in guiding choices about dietary supplements. Data from adults (≥20 years; n=11956) were examined in the 2007-2010 National Health and Nutrition Examination Survey, a nationally representative, cross-sectional, population-based survey.

The analysis found that the most commonly reported reasons for using supplements were to “improve” (45%) or “maintain” (33%) overall health. Women used calcium products for “bone health” (36%), whereas men were more likely to report supplement use for “heart health or to lower cholesterol” (18%). Older adults (≥60 years) were more likely than younger individuals to report motivations related to site-specific reasons like heart, bone and joint, and eye health. Only 23% of products were used based on recommendations of a health care provider.

Multivitamin-mineral products were the most frequently reported type of supplement taken, followed by calcium and ω-3 or fish oil supplements. Supplement users are more likely to report very good or excellent health, have health insurance, use alcohol moderately, eschew cigarette smoking, and exercise more frequently than nonusers.

The conclusions of the analysis were that supplement users reported motivations related to overall health more commonly than for supplementing nutrients from food intakes. Use of supplements was related to more favourable health and lifestyle choices. Less than a quarter of supplements used by adults were recommended by a physician or health care provider.

Source: AHPA

### SUPPLEMENT SAFETY, SUPPLY CHAIN MANAGEMENT, SCIENTIFIC REPORT

- *Supplement safety*: dietary supplement safety was the subject of a Session, moderated by staff from CRN USA, the annual Society of Toxicology Meeting held recently San Antonio. Entitled, “*Translational methods to assess the safety of natural health products, including traditional medicines and dietary supplements*”, topics covered included *in silico* translational methods, *in vitro* and *in vivo* approaches, computational methods, herbogenomics and evidence-based reviews.
- *Supply chain management*: CRN USA’s presentation entitled “*Managing Your Supply Chain: What is the cost of compliance?*” at the recent Engredea/Expo West Meeting in Anaheim, California provided a useful opportunity to emphasize the importance of supply chain management and to highlight the activities of the SIDI Work Group, an industry wide coalition that has provided several voluntary guidelines to help dietary supplement firms achieve cGMP compliance.

- *Proceedings from International Scientific Symposium:* A proceedings from the CRN-International Scientific Symposium held in December, 2012 in Kronberg, Germany has been published in the *European Journal of Nutrition*, entitled “*Nutrient reference values for bioactives: New approaches needed? A conference report*”. A pdf copy is available from CRN USA.

For further information on the above, please contact Dr. James Griffiths at CRN USA ([jgriffiths@crnusa.org](mailto:jgriffiths@crnusa.org)).

Source: CRN USA

### THE GAO REPORT ON DIETARY SUPPLEMENTS

The US Council for Responsible Nutrition (CRNUSA), together with other trade and consumer organizations, including IADSA member associations the American Herbal Products Association (AHPA), and the United Natural Products Alliance (UNPA), have for some time been working with the US Food and Drug Administration (FDA) on the reporting of serious adverse events.

Now, the U.S. Government Accountability Office (GAO) has published a report, “*Dietary Supplements: FDA May Have Opportunities to Expand Its Use of Reported Health Problems to Oversee Products*”, which indicates that 71% of serious adverse events reported to FDA come from the industry itself.

In response to the recommendations of the report Steven Mister, CRN USA president and CEO, expresses the wish of the dietary supplement industry to continue to work with FDA on issues arising from the report and is quoted as saying: *We certainly support transparency for consumers with regard to adverse event reporting to the extent that consumers will benefit from that transparency and that industry will not be made the victim of frivolous lawsuits because of it. However, along with transparency, there must be context and education, so that consumers are not misled and clearly understand that just because a consumer may have taken a product at the same time they experience an adverse symptom, it may not translate into a causal relationship between a product and the adverse event itself.*

Mr Mister goes on to say, “ *we commend the GAO for urging FDA to finalize its draft guidance on 1) New Dietary Ingredients and 2) distinguishing liquid dietary supplements from conventional foods. In their final form, these guidance documents will provide much needed clarity to companies manufacturing and marketing dietary supplements*”.

Source: CRN USA

### CONSUMER CONFUSION ON VITAMIN D RECOMMENDATIONS?

In response to recent recommendations on vitamin D and calcium from the U.S. Preventive Services Task Force (USPSTF), the US Council for Responsible Nutrition (CRN) has said that they represent a limited review of the literature leading to controversial conclusions on preventing fractures in adults—which could result in widespread confusion

for consumers who already are not getting enough calcium, and who further could benefit from the growing body of research that demonstrates multiple reasons to take vitamin D.

According to CRN's Taylor C. Wallace, Ph.D., senior director, scientific and regulatory affairs, *"These recommendations fail to recognize the well-established role of calcium and vitamin D in maintaining bone health. If these recommendations are taken to heart, or misconstrued as general recommendations against calcium and vitamin D, consumers could be compromising their bone health and missing out on important other benefits from these nutrients. The bottom line: calcium and vitamin D are vital to staying healthy."*

Source: CRN USA

### NEW EDITION OF BOTANICAL SAFETY HANDBOOK

The American Herbal Product Association (AHPA) *Botanical Safety Handbook, Second Edition* is now available in both print and digital versions

With input from respected experts in herbal and integrative medicine, the completely revised edition reviews both traditional knowledge and contemporary research on herbs. Offering an authoritative resource on botanical safety, the book covers more than 500 species of herbs and provides a broad understanding of safety through data compiled from clinical trials, pharmacological and toxicological studies, medical case reports, and historical texts.

Source: AHPA

### SUPPORT GROWS FOR BOTANICAL ADULTERANTS PROGRAMME

An education programme resulting from collaboration between the American Botanical Council, the American Herbal Pharmacopoeia, and the National Centre for Natural Products Research at the University of Mississippi, is now supported by over 100 companies, independent laboratories, schools and institutes of natural medicine, media, law firms, and trade associations. Managed by Mark Blumenthal, founder and executive director of the American Botanical Council, the programme's goal is to reduce, 'perhaps even eliminate', adulteration in the herbal dietary supplement industry which is now estimated to be worth \$5.3 billion (USD) in retail product sales.

Source: CRN, UNPA

## **SOUTH WEST PACIFIC**

### **AUSTRALIA & NEW ZEALAND**

#### THE TGA AND REFORMS TO COMPLEMENTARY MEDICINES

The Australian Therapeutic Goods Administration (TGA) has started work on a series of reforms to complementary medicines that seeks to improve community confidence in the safety and quality of these medicines.

TGA aim to achieve this by:

- Ensuring that the TGA effectively informs the community of its role in providing timely access to the therapeutic goods that Australians need, and that they meet appropriate standards of quality, safety and efficacy
- Clarifying requirements for sponsors of complementary medicines
- Improving the Australian community's understanding of the TGA's regulatory processes and decisions for complementary medicines
- Strengthening the integrity and transparency of the regulatory framework for complementary medicines
- Enhancing the complementary medicine regulatory framework to ensure that it remains adaptable to community and industry expectations.
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The reforms will initially focus on:

- Key regulatory guidance materials
- Standard indications
- Publishing outcomes of listing compliance reviews
- Using risk profiles in listing compliance reviews
- Investigation processes for advertising breaches

Source: CHC

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- **CHC (Complementary Healthcare Council of Australia):** [chc@chc.org.au](mailto:chc@chc.org.au)
- **CRN (UK) (Council for Responsible Nutrition):** [secretariat@crnuk.org](mailto:secretariat@crnuk.org)
- **CRN (US) (Council for Responsible Nutrition):** [jgriffiths@crnusa.org](mailto:jgriffiths@crnusa.org)
- **EBF (European Botanical Forum):** [info@botanical-forum.be](mailto:info@botanical-forum.be)
- **ERNA (European Responsible Nutrition Alliance):** [secretariat@erna.be](mailto:secretariat@erna.be)
- **HFMA (UK) (Health Food Manufacturers' Association):** [hfma@hfma.co.uk](mailto:hfma@hfma.co.uk)
- **NAREDI (Federatie van handel en nijverheid in Natuur-, Reform- en dieetwaren in België / Fédération belge de l'industrie et du commerce des produits naturels, de réforme et de diététique ):** [www.naredi.be](http://www.naredi.be)
- **SYNADIET (France) (Syndicat des Fabricants de Produits Naturels, Diététiques et Compléments Alimentaires):** [gdedurat@synadiet.org](mailto:gdedurat@synadiet.org)
- **UNPA (US) (United Natural Products Alliance):** [loren@unpa.com](mailto:loren@unpa.com)

## KEY EVENTS 2013 APRIL – DECEMBER 2013

Date	Conference	Place
April 03 - 05	WorldFood Uzbekistan <a href="http://www.ite-uzbekistan.uz/vis/worldfood/eng/index.php">http://www.ite-uzbekistan.uz/vis/worldfood/eng/index.php</a>	Tashkent, Uzbekistan
April 08 - 12	Codex Committee on Contaminants in Foods <a href="http://www.codexalimentarius.org/meetings-reports/en/">http://www.codexalimentarius.org/meetings-reports/en/</a>	The Hague, Netherlands
April 19 - 21	Cosmofarma Exhibition 2013 <a href="http://www.cosmofarma.com/index.asp">http://www.cosmofarma.com/index.asp</a>	Bologna, Italy
April 30 - May 02	Supply Side MarketPlace <a href="http://www.supplysideshow.com/2012/marketplace/home.html">http://www.supplysideshow.com/2012/marketplace/home.html</a>	New York, United States
May 07 - 09	Food Ingredients Istanbul 2013 <a href="http://fi-istanbul.ingredientsnetwork.com">http://fi-istanbul.ingredientsnetwork.com</a>	Istanbul, Turkey
May 14 - 16	Vitafoods Europe <a href="http://www.vitafoods.eu.com">www.vitafoods.eu.com</a>	Geneva, Switzerland
May 15 - 17	Codex Committee on Food Labelling <a href="http://www.codexalimentarius.org/meetings-reports/en/">http://www.codexalimentarius.org/meetings-reports/en/</a>	Canada
June 25 – 27	Natural Products Association MarketPlace <a href="http://www.naturalmarketplaceshow.com/nm12/Public/enter.aspx">http://www.naturalmarketplaceshow.com/nm12/Public/enter.aspx</a>	Las Vegas, NV, United States
June 25 - 28	Executive Committee of the Codex Alimentarius Commission <a href="http://www.codexalimentarius.org/meetings-reports/en/">http://www.codexalimentarius.org/meetings-reports/en/</a>	Rome, Italy
June 26 - 28	Natural Ingredients / Health Ingredients China 2013 <a href="http://fiasiachina.ingredientsnetwork.com/home">http://fiasiachina.ingredientsnetwork.com/home</a>	Shanghai, China



Date	Conference	Place
June 26 - 28	Health Ingredients Philippines 2013 <a href="http://fiphilippines.ingredientsnetwork.com/">http://fiphilippines.ingredientsnetwork.com/</a>	Manila, Philippines
July 01 - 05	Codex Alimentarius Commission <a href="http://www.codexalimentarius.org/meetings-reports/en/">http://www.codexalimentarius.org/meetings-reports/en/</a>	Rome, Italy
July 14 - 16	Cosmoprof North America 2012 <a href="http://www.cosmoprofnorthamerica.com/">www.cosmoprofnorthamerica.com/</a>	Las Vegas, NV, United States
August 06 - 08	Food Ingredients South America <a href="http://fi-southamerica.ingredientsnetwork.com/home">http://fi-southamerica.ingredientsnetwork.com/home</a>	Sao Paulo, Brazil
August 26 - 29	13 <sup>th</sup> International Nutrition & Diagnostics Conference <a href="http://www.indc.cz/en/">http://www.indc.cz/en/</a>	Olomouc, Czech Republic
August 29 - 31	Natural Products Expo Asia 2013 <a href="http://www.naturalproductsasia.com/ea13/public/enter.asp">http://www.naturalproductsasia.com/ea13/public/enter.a spx</a>	Hong Kong, China
September 07 - 10	25 <sup>th</sup> SANA 2013 <a href="http://www.sana.it/en/">http://www.sana.it/en/</a>	Bologna, Italy
September 11 - 13	Food Ingredients Asia - Thailand <a href="http://fiasia-thailand.ingredientsnetwork.com/">http://fiasia-thailand.ingredientsnetwork.com/</a>	Bangkok, Germany
September 25 - 28	Natural Products Expo East <a href="http://www.expoeast.com/expoeast2013/public/enter.aspx">http://www.expoeast.com/expoeast2013/public/enter.as px</a>	Baltimore, MD, United States
October 03 - 05	Food Ingredients India <a href="http://fiindia.ingredientsnetwork.com/">http://fiindia.ingredientsnetwork.com/</a>	Mumbai, India
October 09 - 11	Health Ingredients Japan <a href="http://www.hijapan.info/eng/">http://www.hijapan.info/eng/</a>	Tokyo, Japan

Date	Conference	Place
October 30 - November 01	Worldfood Ukraine 2013 <a href="http://www.worldfood.com.ua/en/exhibition/about/">http://www.worldfood.com.ua/en/exhibition/about/</a>	Kyiv, Ukraine
November 04 - 08	Codex Committee on Nutrition and Foods for Special Dietary Uses <a href="http://www.codexalimentarius.org/meetings-reports/en/">http://www.codexalimentarius.org/meetings-reports/en/</a>	Germany
November 13 - 15	Cosmoprof Asia 2013 <a href="http://www.cosmoprof-asia.com/">http://www.cosmoprof-asia.com/</a>	Hong Kong, China
November 19 - 21	Food Ingredients Europe & Natural Ingredients <a href="http://fieurope.ingredientsnetwork.com/home">http://fieurope.ingredientsnetwork.com/home</a>	Frankfurt, Germany

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