

## CODEX MOVES CLOSER TO EU BLUEPRINT

*For immediate release*

**18 November 2007**

The 29<sup>th</sup> session of the Codex Committee on Nutrition and Foods for Special Dietary Uses, held at Bad Neuenahr, Germany, ended on Friday, November 16, 2007, following a week of deliberations. This Codex committee, more than any other, is deciding the fate of international principles, guidelines, and standards affecting natural health products and health claims. The US-based, international non-governmental organization (INGO), the National Health Federation (NHF), was the only INGO present representing consumers' rights to freedom of choice in healthcare, and its three-person delegation was responsible for more interventions during the course of the meetings than all other INGOs put together.

The NHF and its European partner organization, the Alliance for Natural Health (ANH), have long argued that risk assessment of nutrients could pose one of the greatest threats to the future availability of food supplements used for the purpose of promoting health by millions of people around the world. The ANH has recently released a position paper that demonstrates major flaws in proposed risk-assessment and risk-management procedures, which, unless modified, will result in the European Commission setting, within the next two years, excessively low maximum permitted levels for food supplements to be sold throughout the European Union. This paper demonstrated that, for example, the maximum permitted beta-carotene level in supplements could be less than that found in two carrots, while that for selenium could be less than that found in two brazil nuts.

Paul Anthony Taylor, Chairman of the NHF, and one of the three members on the NHF delegation in Bad Neuenahr, said, *"Although we made some important interventions during the Electronic Working Group last Sunday, it is worrying to see how fast the Committee's host country, Germany, is wanting to finalize a document that details the principles to be used by the Committee in its work on risk assessment. They got the document to Step 5 of the 8-step procedure this meeting, and, once finalized, it will be included in the Codex Procedural Manual. This could happen as early as the next session of the committee, due to be held in November 2008 in South Africa. What's particularly worrying for all of us working to protect health freedom is that the principles run so tightly with the approach used in Europe, which has itself been heavily influenced by the ultra-cautionary Federal Risk Assessment Institute in Germany, the very organization from which the Codex committee's chairman, Dr Rolf Grossklaus, hails."*

Another key issue being dealt with at last week's Codex committee session was the development of internationally agreed-upon Nutrient Reference Values (NRVs), which would establish the daily amounts of particular vitamins and minerals required by adults and infants. Speaking about one of the NHF's many interventions during the meeting, Scott Tips, both President and Legal Counsel for the NHF as well as its Codex delegation head, said, *"The Committee noted in its report our intervention which suggested that*

*there should be an additional NRV for adults, which caters for population groups with the greatest need. We were demonstrating that an average value simply doesn't work. For example, in the case of iron, most children need extra iron in supplementary form as do menstruating women. But most adult men do not; indeed, it is unhealthy for most men. If we could have at least one extra category, we could cater to the higher amounts required by pre-menopausal women rather than them having to accept the fact that half the population, in this case men, lower the value of the average that is then imposed on all adults. The bad news was that, despite the logic of this, and the fact that the intervention was recorded in the final report of the meeting, the Committee did not accept it. Codex, as so often happens, trundles on regardless of the needs of particular population groups who don't fit the law of averages."*

Dr Robert Verkerk, scientific advisor to the NHF and executive and scientific director of the ANH, indicated that this was a critical time to re-appraise the principles and methods applied to and in risk assessment. *"This area of risk assessment is really the ticking time bomb for natural health,"* said Dr Verkerk, *"it's high time that we see some top academic groups contributing to this rapidly developing field, which is now at the mercy of politics and economics, more than it is to science. You can't expect regulators lacking a thorough grasp of the science to get it right, particularly when pressure by large food and pharmaceutical interests are pushing for such low nutrient dosages that they could never be used for health promotion purposes. Governments need to recognise that health promotion using foods and food-based ingredients, in conjunction with modified lifestyles, is the new, sustainable paradigm in healthcare."*

The NHF also intervened at one point to make the argument that NRVs should reflect the fact that the nutrient levels in soils had been greatly depleted over the last 50 years, as confirmed by a major UK study which analyses government records over this period. Similar findings have been found through analyses of US Department of Agriculture records in the United States. The Chairman of the Codex committee strongly disagreed with the NHF position, saying that a German study had stated otherwise. NHF responded that both US and Canadian studies had also confirmed the UK study. The Chairman, unmoved, refused to let the report reflect this intervention by NHF.

Another crucial agenda item of contention was the scientific basis of health claims. Just as with risk assessment, the progress of the meeting confirmed that Codex is running parallel with recent European legislation, in this case the Nutrition & Health Claims Regulation, which came into effect across the EU on 1 July 2007. In order to substantiate health claims, there is a real risk that health claims will require evidence from randomized controlled trials, which are prohibitively expensive for all but the largest food corporations. Furthermore, the NHF and other INGOs argued that observation evidence where this was of a high quality should suffice in place of randomised controlled trials, as the latter were unable to yield accurate results given that control groups could not be deprived of nutrients. The NHF continues to be deeply concerned that the scientific requirements are being set deliberately high to exclude smaller companies, which have, in fact, been the pioneers in the area of health and functional foods. Dr Verkerk echoed his concerns about the European legislation indicating that the system under consideration in Codex, just like the current EU model, is a *"passport system for big business."*

**ENDS.**

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**Editor's Notes:**

- 1. Codex Committee on Nutrition and Food for Special Dietary Uses (CCNFSDU):** one of 27 committees of the Codex Alimentarius Commission, established under the auspices of the Food & Agricultural Organization and World Health Organization.  
[www.codexalimentarius.net](http://www.codexalimentarius.net).
- 2. National Health Federation:** established in 1955, the National Health Federation is a consumer-education, health-freedom organization working to protect individuals' rights to choose to consume healthy food, take supplements and use alternative therapies without unnecessary government restrictions. The NHF is the only such organization with recognized observer status at Codex meetings.  
[www.thenhf.com](http://www.thenhf.com).
- 3. Alliance for Natural Health:** The Alliance for Natural Health (ANH), founded in 2002, is a UK-based, internationally-active not-for-profit campaign organisation working to protect and promote sustainable approaches to healthcare through the use of 'good science' and 'good law.'  
[www.anhcampaign.org](http://www.anhcampaign.org).

For ANH position paper on Maximum Permitted Levels in the European Union, October 2007, see: [http://www.alliance-natural-health.org/\\_docs/ANHwebsiteDoc\\_292.pdf](http://www.alliance-natural-health.org/_docs/ANHwebsiteDoc_292.pdf)