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July 15,2002

TODr. Elizabeth A. Yetley, Chief Scientist CFSAN/FDA/H&HS 02-022N 02-022N-8

US. Delegate to the Codex Alimentarius Nutrition Committee Karl Riedel FR: Karl Riedel

RE: Comments on the Draft Codex Guidelines on Vitamin and Mineral Supplements

We sincerely appreciate this opportunity to provide comments on these important guidelines. As we have provided extensive comments to you in past years on these same issues, we apologize in advance for any egregiously repetitive comments.

The most significant change to the current *draft* is the 2001 proposal of the European Commission to revise point 3.2.2. In the context of the recently adopted European Directive on Food Supplements, for which the proposed wording was *developed*, the compromise text provided a political solution acceptable to EU Member States which facilitated the parliamentary adoption of that Directive. However, for the purposes of Codex, we believe that their proposed text provides insufficient clarity on the process to be used in, and inadequate scientific justification for, setting maximum nutrient levels for vitamin and mineral supplements.

Reference intake values may be a useful marker which may help a **risk** assessor to establish the range of **minimal** safe intake, below which intake range there is **an** increased **risk** of deficiency. Reference intake values, however, have **no** direct relationship with the range of optimal safe intake of supplemental vitamins and minerals. The setting of upper tolerable intake levels (UL) and maximum supplement levels, if and where necessary, should be a nutrient appropriate scientific assessment which needs to be undertaken by qualified scientific bodies. In order to reduce trade barriers, these assessments should not be subject to national interpretations, unless **risk** managers document valid safety concerns from national dietary patterns.

The EC 3.2.2. proposal also fails to adequately define the scientific body responsible for establishing Upper Safe Levels. The proposal also includes the dangerously malleable term "generally accepted scientific data", which has caused considerable difficulty in its application here in the US in relation to dietary supplements, and should be eschewed by the CCNFSDU.

Attached for your review and use are our detailed comments and recommendations on the current draft Guidelines and we again thank you for your consideration of our input.

- Regards & Health

Preamble Most people who have access to a balanced diet can usually obtain all the nutrients they require from their normal Because foods contain many substances that **promote** health, **people** should therefore be encouraged to select a diet from food before considering any vitamin and mineral supplement. In cases where the intake from the diet is insufficient or where consumers consider their diet requires supplementation, vitamin and mineral supplements serve to supplement the daily

We absolutely support the principle that *people* should be encouraged to select a balanced diet from food." preamble, however, implies that supplementation detracts from good diet by inclusion of the statement "before considering any vitanin and mineral supplement". Existing evidence suggests that supplement consumers are very conscious of their nutrient intake supplement their diet with the aim of achieving an optimal state of health, rather than just preventing deficiency diseases. Moreover, NAS/IOM/F&NB reports validate that only a small percent of the US population actually obtains 100% of the RDA micro-nutrients from a normal diet. Evidence is also clear that suboptimal, but **RDA** adequate vitamin/mineral intake is associated with chronic disease. (Ref: "Vitamins for Chronic Disease Prevention in Adults" -Journal of the American Medical Association -Vol. **287**, **No. 23**, June 19, 2002. We therefore strongly recommend that "before considering any vitamin and mineral supplement" be deleted, at the least, be placed in square brackets.

Scope

1.1 These guidelines apply to vitamins and minerals intended for supplementing the daily diet (if and where necessary with vitamins and/or minerals.

1.2 It is left to national authorities to decide whether vitamin and mineral supplements are **drugs** or foods. These Guidelines do apply in those jurisdictions where products defined in **2.1** are regulated as foods.]

Delete the bracketed [if and where necessary] as redundant and superfluous. We strongly urge adding [infoods] at the end of 11. to preclude the need for 1.2.

The Codex Alimentarius mandate is limited to food products. It is also committed to reducing existing barriers to trade. In some countries trade barriers are caused by the classification of food supplements as drugs. Some countries assume that supplements not considered foods are automatically classified as drugs, and some have stated that as vitamin/mineral supplements are not foods, then **they** are prohibited as drugs.

If the guidelines are to be of practical value, and hold to Codex General Principles, they should at least ensure minimum standards for opportunities to trade on a global basis. Any reference to national classification should therefore be removed from the guidelines as a barrier to trade

We therefore strongly recommend deletion of the entire 12 as it violates Codex General Principles.

13 Foods for special dietary uses as defined in the General Standard for the Labelling of and Claims for Prepackaged Foods for Special Dietary Uses (CODEX STAN 146-1985) are not covered by these

Guidelines.

No comment on 13

2.1 Vitamin and mineral supplements for the We urge deletion of "and do not provide **Definitions** a significant amount of energy", as many purpose of these guidelines derive their nutritional relevance primarily from the of the most popular vitamin/mineral minerals and/or vitamins they contain. supplements are blended with sweeteneners and are sold as powders, liquids concentrates, chewable tablets, lozenges Vitamin and mineral supplements are sources in concentrated forms of those and bars; many of which have "significant" nutrients, alone or in combinations, marketed in capsules, tablets, powders, amounts of energy, usually solutions etc., not in a conventional food carbohydrates. form and do not provide a significant amount of energy. [They serve to We recommend deleting the first supplement the daily diet with these **sentence** as the "purpose" of vitamin and nutrients in cases when the intake from food mineral supplements is already covered in is insufficient or where the consumers the preamble, making this sentence their diet redundant. consider requires supplementation.] We recommend removing the square brackets from the last sentence. 3.1 Selection of vitamins and mirerals Composition **3.1.1** Vitamin and mineral supplements No comment should contain vitamins/provitamins and minerals whose nutritional value for human beings has been proven by scientific data and whose status as vitamins and minerals is recognized by FAO and WHO. We strongly recommend deletion of **3.1.2.** The selection of admissible ingredient **3.1.2** as **3.1.1** already defines vitamins and sources of nutrient or compounds should be minerals selection criteria according to based on criteria such as safety and bio-Codex standards. Limitations imposed on availability. In addition, purity criteria the use of individual vitamins and minerals should take into account the FAO/WHO or for reasons of safety must be based on Pharmacopeias [and national legislation adequate scientific risk assessment, which where applicable]. for essential nutrients does not vary significantly based on regional or national 'peculiarities', with the possible exception of selenium. National exemptions pre-empt and emasculate the entire Codex process and violate Codex General Principles. **3.1.3.** The use of individual vitamins and We strongly recommend deletion of minerals in supplements can be [limited] for **3.1.2** as the right of any health authority to reasons of health protection and consumer act to protect consumer health is implicit safety, taking into account regional or and embodied in Codex. Limitations national peculiarities concerning the supply imposed on the use of individual vitamins situation of the population.] and minerals for reasons of safety must be scientific adequate based onassessment, which for essential nutrients does not vary significantly based on regional or national 'peculiarities', with the possible exception of selenium National exemptions pre-empt and emasculate the entire Codex process and violate Codex General Principles.

3.1.4 Vitamin and mineral supplements *may*

contain all vitamins and minerals that comply with the Criteria in 3.1.1, a single vitamin and/or mineral or an appropriate combination of vitamins and/or minerals.

No Comment

Composition

3.2 Contents of vitamins and minerals

3.2.1 The minimum level of each vitamin and/or mineral contained in a vitamin and mineral supplement per daily portion of consumption as suggested by the manufacturer should be [15% to 33%] of the recommended daily intake as determined by FAO/WHO.

3.2.2 [The maximum level of each vitamin and/or mineral contained in a vitamin and mineral supplement per daily portion of consumption as suggested by the manufacturer should not exceed [100%] of the recommended daily intake as determined by FAO/WHO]

<u>or</u>

- 3.2.2 [Maximum amounts of vitamins and minerals in vitamin and mineral supplements per daily portion of consumption as recommended by the manufacturer shall be set, taking the following criteria into account:
 - upper safe levels of vitamins and minerals established by scientific risk assessment based on generally accepted scientific data, taking into consideration, as appropriate, the varying degrees of sensitivity of different consumer groups;
- b) the caily intake of vitamins and minerals from other dietary sources.

 When the maximum levels are set, due

account should be taken to the reference intake values of vitamins and minerals for the population.]

3.2.3 For vitamins and minerals with a narrow safety margin between the recommended daily intake and the adverse effect level, different maximum limits for the taily dose may be established at the national evel.

In principle, we consider that a minimum level of 10% of the RDI should be established for the inclusion of the vitamin or mineral on the statement of nutritional content to prevent misrepresentation however, the practical implications of the bulk effect of certain nutrients, such as Ca Mg, K and Na should be considered carefully before setting minimum levels.

RDIs were established to indicate required levels in order to avoid deficiency diseases. They do not reflect significant scientific research supporting the health benefits of intakes much higher than the RDI. To ensure the availability of supplements that reflect the scientific availability validated benefits of higher than RDI intakes, the maximum limit cannot be linked to RDIs, but must only be established by nutrient appropriate scientific risk assessment as specified in Codex General Principles. Strongly urge that the text after "exceed" be revised as: "the Upper Safe Levels determined by nutrient-appropriate scientific risk assessments of the FAO/WHO".

If the above 3.2.2. version is unacceptable, then we strongly urge sub-point a) be simplified to read "apper safe levels of vitamins and minerals established bnutrient-appropriate scientific assessment." and delete the balance of sub-point as inappropriate the composition, and better addressed in Section 5. Labelling. Also delete subpoint b) in its entirety, as irrelevant and beyond the control of manufacturers or governments, who set dietary guidelines but do not monitor, and therefore should not consider, individual daily nutrient intakes. Likewise, delete the final 3.2.2. sentence As an inapplicable criteria to set Upper Safe Levels, as it is based on policy, not science.

Add 'only if the national authority can scientifically validate a lower level than that established by Codex' at the end of paragraph 3.2.3. to preclude national authorities placing unscientific technical barriers to trade based on policy. Unedited, this point may be used to contravene any Upper Safe Levels established by Codex or FAO/WHO.

4. Packaging	4.1 The product shall be packed in containers which will safeguard the hygienic and other qualities of the food.	No Comment
	4.2 The containers, including packaging material, shall be made only of substances which are safe and suitable for their intended use. Where the Codex Alimentarius Commission has established a standard for any such substance used as packaging material, that standard shall apply.	No comment
	4.3 Vitamin and mineral supplements should be distributed in child-resistant packagings, if necessary.	Correct "packagings" to packages"
5. Labelling	5.1. Vitamin and mineral supplements are labelled according to the Codex Standard for the Labelling of Pre-packaged Foods (Codex-Stan 1-1985, Rev. 1-1991) as well as according to the General Guidelines on Claims (CAC/GL 1-1979).	No comment
	ritamin and mineral supplement or 'dietary mineral/vitamin preparation to supplement the diet with', with an indication of the nutrients contained therein.	We urge revision and simplification as: "The product shall be declared as a 'vitamin & mineral supplement' or 'food supplement' or 'dietary Supplement' on the principal display panel, with allowable declarations of nutrients contained therein.
	[5.3 The amount of the vitamins and minerals present in the product shall be declared in the labelling in numerical form. The units to be used shall be units of weight.]	We recommend replacing 'weight' by 'amount' to allow for liquids, and specifying "metric" units.
	E5.4 The amounts of the vitamins and minerals declared shall be those per portion of the product as recommended for daily consumption on the labelling and per unit dose form, as appropriate.3	We recommend deleting the brackets around 5.4 and replacing 'and' by 'or' to ensure clear consumer choice on multiple-unit daily dosages.
	[5.5 Information on vitamins and minerals shall also be expressed as a Percentage of the reference values mentioned, as the case may be, in the Codex Guidelines on Nutrition Labelling.]	We recommend deleting the brackets around 5.5. and changing "Information" to "Declarations" as 'information' is insufficiently specific. to clarify which information should be expressed as a & of the reference values.
	5.6 The label must indicate the recommendations on how to take the product (quantity, frequency, special conditions).	referred to as 'suggestion of use' or
	5.7 The label must contain a warning statement [if the product contains a significant amount of a nutrient with respect to the toxicity level]	We strongly urge replacement of 'if the product contains a significant amount of a nutrient with respect to the toxicity level' by 'where appropriate, based on the recommended portion for daily

[5.8 The label must contain a statement: supplements cannot be used for the replacement of meals on long term basis

we recommend these Codex supplements as such do not state to are a substitution and state to are a substitution are a substitut

[5.9 All labels shall bear a statement that the supplement should be taken on an advice of a nutritionist, a dietician or a medical doctor.]

We agree that supplements should not be used as a substitute for a diversified diet. However, crowded labels can possibly confuse the consumer, and there is no evidence that health-conscious the consumers that **purchase** supplements confuse supplements with meals. We therefore request deleting 5.8, and failig that, strongly recommend replacing 5.8 with 'The labelling of vitamin and mineral supplements may not state or imply that these products are a substitute for a diversified diet.' as more useful to prohibit the use of any statement which implies that sup lements may be a substitute for a diversi ed diet, than the currently drafted 5.8.

We recommend deletion of 5.9. Under these Codex guidelines vitamin and mineral supplements will be regulated as foods, and as such do not require advice, professional or otherwise, beyond labeling information.