

IDACE Position on Nutritional and Functional Claims

IDACE welcomes the Commission's wish to prepare a proposal for measures on nutritional and functional claims on the basis of comments made by interested parties. IDACE also would like to underline that the dietetic food industry fully supports comments made by CIAA, and that the present document exposes specific comments regarding foods for particular nutritional uses (PARNUTS).

1. Food categories

- While settings measures for regulating nutritional and functional claims for normal foodstuff, it should be kept in mind that this type of claims already exist for PARNUTS and are covered by a specific legislation¹. **Provisions allowing claims for PARNUTS should not be impeded by the legislation in preparation for normal food.**

- Nutritional and functional claims are possible for all sorts of foods consumed as part of the diet. IDACE wishes to clarify the relationship between PARNUTS foods and other foods making such claims.

PARNUTS foods are defined by the Council Directive 89/398/EEC (Article 1), as:
*"foodstuffs which, owing to their special composition or manufacturing process, are clearly distinguishable from foodstuffs for normal consumption, which are suitable for their claimed nutritional purposes and which are **marketed in such a way as to indicate such suitability.**"*

A particular nutritional use must fulfil the particular nutritional requirements:

- (i) *of certain categories of persons whose digestive processes or metabolism are disturbed; or*

¹ Dietetic foods or foodstuffs intended for particular nutritional uses (PARNUTS) as defined by Council Directive of 3 May 1989 on the approximation for laws of the Member States relating to foodstuffs intended for particular nutritional uses (89/398/EEC).

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ASSOCIATION DES INDUSTRIES DES ALIMENTS DIÉTÉTIQUES DE L'UNION EUROPÉENNE
ASSOCIATION OF THE FOOD INDUSTRIES FOR PARTICULAR NUTRITIONAL USES OF THE EUROPEAN UNION

- (ii) *of certain categories of persons who are in a special physiological condition and who are therefore able to obtain special benefit from controlled consumption of certain substances in foodstuffs; or*
- (iii) *of infants or young children in good health."*

Article 2 of Directive 89/398/EEC also provides that **only PARNUTS foods may be characterised as "dietetic" or "dietary" foods.**

According to this definition, foods carrying a claim justified only for a specific population group are dietetic/PARNUTs foods, and the consumer must be informed of this. Moreover, normal food should not mislead the consumer and should not be marketed in a way likely to give the impression that they are PARNUTS foods.

2. Low sodium and very low sodium claims

- In paragraph 26 of the discussion paper, it is reminded that in Community legislation, claims on levels of sodium are to be regulated under Directive 89/398, while Codex Alimentarius guidelines do not reserve such claim for dietetic foods. IDACE wishes to emphasise that rules/conditions warranting such claims should be the same for PARNUTs (e.g. foods rendered low in sodium) as for normal food (e.g. food naturally low in sodium).
- IDACE would like to draw the attention on the fact that discussions on claims on gluten level in foods should go along with discussions on sodium level.

3. Health claims

- IDACE is aware that the Commission will initiate a consultation on health claims at a later stage. Still, IDACE wishes that a Council Directive be set, where **definitions** of the different types of claims (nutritional, functional and health claims) as well as **general principle** would be described.
- Finally, it is reminded that medicinal claims are explicitly prohibited for all foods (Article 2.1.(b) of Directive 2001/13/EEC²). This is also the case for PARNUTs foods (Article 6.1 of Directive 89/398/EEC), however, Article 6.2 of Directive 89/398/EEC states that this prohibition shall not prevent the dissemination of any useful information or recommendation exclusively intended for persons having qualifications in medicine, nutrition or pharmacy. A clear distinction must therefore be made between making claims directly to the consumer and claims and information provided to the healthcare professional.

² Directive of the European Parliament and the Council of 20 March 2000 on approximation of laws of the Member States relating to the labelling, presentation and advertising of foodstuff (2000/13/EEC)