

CCNFSDU 2012

Agenda Item 8 CX/NFSDU 12/34/11 (CX/NFSDU 12/34/8)

Proposal to Review the Codex Standard for Follow-up Formula (CODEX STAN 156-1987)

Prepared by New Zealand

Background: At CCNFSDU in 2010, the Delegation of New Zealand proposed to prepare a discussion document for the Committee to consider the revision of part or all of the Standard for Follow-up Formula (Codex Stan 156-1987), and the Committee agreed with this proposal. At CCNFSDU in 2011, the Delegation of New Zealand introduced their proposal (CX/NFSDU 11/33/10), and it was noted that there appeared to be support for the review of the standard, but the Committee should discuss whether it should be a partial or a full review at the next session, and to discuss the proposal further. In addition, in 2011, the Representative of WHO informed the Committee of the work underway in WHO concerning follow-up formula including the preparation of an updated information statement on follow-up formula in the context of the WHO Code of Marketing of Breast-milk Substitutes (1991). The discussion document from New Zealand for CCNFSDU 2011 has been carried forward for discussion in December 2012.

Comments from Canada, November 28, 2012

Proposals or Section in Background Paper	Comments from Canada
Proposal to Review all or part of the Standard for Follow-up Formula (CODEX STAN 156-1987)	Canada would support a review of the Standard for Follow-up Formula to ensure that it is in line with and up to date with dietary recommendations for the age group (6 mth to 36 mth) for whom it is intended.
3.1.1 Age Range - Taking into consideration the growth in production and consumption of both follow-up formula and growing-up milk products and the differences in the age ranges that they are targeted at, it is proposed that the age range of follow-up formula is reviewed by the Codex Committee. There has been some interest from industry and public health groups to restrict the age range for follow-up formula to 6 to 12 months, and to explicitly include growing-up milk within the current Standard, or to develop a new standard for growing-up milk products for young children aged 12 to 36 months.	Canada believes that the age range for follow-up formulas should be 6 to 12 months, and would welcome discussions on this topic. In view of the rising rates of childhood obesity in North America, it is important that there is no promotion of unnecessary energy for older infants and young children and that as much as possible, the consumption of diets based on traditional table foods be recommended for older infants and young children rather than the use of follow-up formulas. Canada is planning to publish, in the near future, recommendations on the government website (Health Canada site) for the use of infant formula or follow-on formula, as appropriate, by healthy term infants, only until 12 months

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<p>3.1.1. "...separate national regulations for growing up milks for young children have been or are being developed (Australia and New Zealand, Malaysia)</p>	<p>of age.</p> <p>Canada supports the development of a new standard for growing up milks for young children from 1 to 3 years. However, like follow-up formula (see below), Canada considers that growing up milks are not necessary for the young child from age 1 to 3 years eating a varied diet.</p> <p>A growing up milk has recently been made available in Canada, which is promoted to replace whole cow's milk for children between the ages of 12 and 24 months. Due to its composition, the product contains significantly less vitamin D than fluid milk. In Canada cow milk is fortified with vitamin D, and the use of a growing up milk with less vitamin D could result in vitamin D deficiency. Because these products are being made available, standards should be developed to ensure the appropriate nutritional composition for the intended uses of the product.</p>
<p>3.2.2 Analysis of Protein Content: There appears to be consensus amongst expert groups that the determination of protein levels in infant and follow-up formula should be based on total nitrogen content multiplied by a conversion factor of 6.25 (Koletzko et al 2005, Koletzko 2006, Scientific Committee on Food 2003). This was updated in the Codex Standard for Infant Formula and Formulas for Special Medical Purposes Intended for Infants (CODEX STAN 72-1981(Rev.2007)). Additionally, there have been recent advances in the methodology for measuring protein quality. The follow-up formula Standard states that protein quality should be determined using the protein efficiency ratio (PER) based on the rat bioassay, however the WHO now recommend the Protein Digestibility Corrected Amino-acid score (PDCAAS) method in place of PER (WHO/FAO/UNU 2002).</p>	<p>Canada understands that the FAO/WHO Expert Consultation on Protein Quality Assessment of Foods, held in March 2011, concluded that the Protein Digestibility Corrected Amino Acid Score (PDCAAS) should be replaced by the use of DIAAS (Digestible Indispensable Amino Acid Score) as the official method for assessing the protein quality of foods. Canada suggests that the method of assessing protein quality of foods be incorporated into in this standard when the FAO/WHO Expert Consultation on Protein Quality Assessment of Foods publishes its recommendations.</p>
	<p>Canada would be particularly interested in</p>

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3.3 Labelling	the appropriate labelling and representation of these formulas.
<p>3.3.2 The International Code of Marketing of Breast-milk Substitutes: The promotion of follow-up formula is a controversial issue due to differences in opinion as to whether follow-up formula falls within the scope of the WHO Code. There is concern amongst many in the international community that the promotion of follow-up formula is not sufficiently regulated, whereas others believe that follow-up formula is not a breast-milk substitute and does not need to be regulated as such.</p> <p>The revision of the WHO briefing note on follow-up formula in the context of the WHO Code will aid Codex in determining whether labelling provisions should be aligned with the WHO Code.</p>	<p>The revised WHO briefing note is not yet available. In WHO’s original briefing note “Follow-up formula in the context of the International Code of Marketing of Breast-Milk Substitutes”, WHO recommends ‘that infants be breastfed exclusively for the first 6 months of life and that, once complementary feeding has begun, breastfeeding should continue up to the age of 2 years or beyond. Canada believes that consideration should be given to scenarios where infants might not have access to breastmilk. Even at 6 months, infants may be dependent on follow-up formula as a sole or major source of nutrition.</p> <p>Canada believes that this should be considered when discussing whether follow-up formula would fall within the scope of the Code. Canada would consider that the products under discussion should fall under the scope of the Code, including labeling provisions.</p> <p>For the purpose of clarity, Canada recommends that the scope, terminology to be used and age groups for each product type to be considered under the revised or new standards should be reviewed prior to discussing whether the product falls under the WHO Code.</p>
3.4 Other Issues – The WHO and a number of international public health organisations take the position that follow-up formula is not a necessary part of older infant or young child diets (WHA 39.28 1986)	Canada is of the opinion that there is no convincing data that there is a need for “follow-up formula”, i.e., standard infant formula is intended to meet the nutritional requirements of infants to 12 months of age, with the introduction of complementary foods when appropriate. Canada does not have a separate standard for follow-up formula. Canada would welcome a discussion of the appropriate age range for these products.

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<p>4.2 Option B (ii): Full Review: In addition to reviewing the description, essential composition and quality factors of follow-up formula as per option B(i) above, a full review would include a review of the labelling provisions of the Standard. This would involve consideration of labelling of follow-up formula and the relationship to the WHO Code. A full review may also consider the need for the expansion of the Standard to cover growing-up milk products (also known as ‘toddler milks’) or the development of a new standard for these products.</p>	<p>Canada supports Option B, i.e. full review, of the Codex Standard for Follow-up Formula (CODEX STAN 156-1987). As described in this background paper drafted by New Zealand, The Codex Standard for Follow-up Formula was issued in 1987 and requires updating. The category of food covered by the Standard has been subject to significant development over the 24 years since its development.</p>
<p>Issue not specifically mentioned in the document:</p>	<p>While not specifically mentioned in the document prepared by New Zealand, Canada would like the opportunity to discuss ‘nutritional supplements’, and how they could be addressed and included in the proposed new document. In Canada, nutritional supplements are foods for special dietary use in the Food and Drug Regulations (Division 24), and have standards for their nutritional composition and labelling. Nutritional supplements represented for use by young children from age 1 year are available in Canada. These nutritional supplements contain a wide range of vitamins and minerals, along with protein, fat and carbohydrate sources and in some cases ‘optional’ ingredients. ‘Nutritional supplement’ is defined in the Food and Drug Regulations (FDR) as ‘a food sold or represented as a supplement to a diet that may be inadequate in energy and essential nutrients’ (Part B, Section B.01.001). Canada is of the opinion that in Canada, when a child’s diet may be inadequate in energy or essential nutrients, the child should be referred to a clinician, for instance when the child is a picky eater (Canadian Paediatric Society , CPS, 2012) or for a toddler who is falling off the growth chart (CPS, 2012). It is recognized that this may not always be possible in other countries. The Paediatric Expert Advisory Committee (PEAC) to the Department of Health in</p>

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	<p>Canada (Health Canada) has expressed concern about the promotion of nutritional supplements for young children. Although there may be a legitimate use for nutritional supplements for toddlers, such products should not be represented as essential for all children since they may provide additional unnecessary energy and impact on the promotion of appropriate dietary patterns based on traditional foods. Should a separate Codex standard be developed for these foods? Or would they come under the 'growing up milk' category? If it is decided to include follow-up formula, growing up milks and nutritional supplements in the same standard, consideration should be given to renaming the document, such as to the "Codex Standard for Follow-on Liquid Complementary Foods for Older Infants and Young children", or if combined with other non-liquid foods, such as cereal-based complementary foods, simply the "Codex Standard for Complementary Foods for Older Infants and Young Children".</p>

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