



**4th MEETING**

**Carbohydrates Working Group**

**23<sup>rd</sup> March 2009, Room 2, Aviation House  
125 Kingsway, London, WC2B 6NH**

**DRAFT MINUTES**

- Chairman:** Professor Ian Macdonald
- SACN Members:** Professor Annie Anderson  
Professor Tim Key  
Dr David Mela  
Mrs Christine Gratus
- Other attendees:** Professor Ian Johnson (agenda items 1-3 only)  
Dr Peter Sanderson (agenda items 1-3 only)  
Ms Alison Eastwood (agenda item 4 only)  
Dr Siân Thomas (FSA) (agenda item 4 only)  
Mr Joshua Atkinson (FSA) (agenda item 4 only)
- Secretariat:** Dr Elaine Stone (FSA)  
Mrs Vicki Pyne (FSA)  
Ms Lynda Harrop (FSA)  
Miss Rachel Coomber (DH)

**Agenda item 1 – Chair’s introduction and welcome**

1. The Chair welcomed Members to the fourth meeting of the SACN Carbohydrates Working Group.
2. Apologies were received from Professor Alan Jackson and Dr Sheela Reddy.
3. The Chair asked the group whether there were any changes to their declaration of interest. None were given.

**Agenda item 2 – Minutes of 3<sup>rd</sup> meeting September 2008 (SACN/CHO/08/min/02)**

4. Members were invited to comment on the minutes of the second Carbohydrate Working Group meeting and several editorial comments were noted. Subject to these changes, the minutes were agreed as an accurate record of the meeting.

**Action: Secretariat**

**Agenda item 2 – Matters arising (SACN/Carbohydrates/09/01)**

5. The Chair introduced matters arising.

*SACN/CHO/08/04 – Carbohydrates definitions*

6. The list of definitions was now described as a glossary and would be discussed later under this agenda item.

*SACN/CHO/08/05 – HNR synthesis of health effects of potential dietary components*

7. The SACN statement on dietary fibre and accompanying evidence tables from the HNR report were now published on the SACN website.

*SACN/CHO/08/06 – Carbohydrates and cardiometabolic health section commissioning the review*

8. This would be discussed under agenda item 4.

*SACN/CHO/08/06 – Systematic review expert to review applications for cardiometabolic health review*

9. Dr Alison Eastwood has been invited to undertake the peer review and will attend the appraisal panel meeting.

*SACN/CHO/08/07 – Exposures/endpoint list*

10. This list has now been included as part of the cardiometabolic health specification.

*Agenda item 6 – Future work programme*

11. Professor Ian Johnson has now been co-opted onto the Working Group as a colonic health expert.

*AOB – SACN/CHO/08/09- List of recommended experts*

12. A dental expert to be co-opted onto the Working Group has yet to be identified. It was agreed that once the ongoing general recruitment for SACN members was complete, it could be determined whether there would be any dental experts on the Committee that could be invited to join the Working Group.

13. A member suggested that a nutritionist with an interest in dental health could be sought as well as a dentist.

14. The Chair agreed that this was an acceptable course of action and recommended that perhaps two experts should be identified to join the Working Group in order to provide a balance of opinion.

**Agenda item 2 – Carbohydrates glossary (SACN/CHO/09/02)**

15. The Chair informed the Working Group that this glossary, which had been

extracted from the WHO/FAO paper, was a working document and would be a standing item on the agenda, to be modified over time. Drafting notes concerning the definition of polydextrose, prebiotics and glycaemic/non glycaemic carbohydrates were added to the document, which are to be re-considered at a future point.

**Action: Secretariat**

**Agenda item 3 – Carbohydrates and Colorectal health – proposed work plan (SACN/CHO/09/03)**

16. Dr Peter Sanderson introduced the paper, which outlines the proposed work plan for the term of reference relating to carbohydrates in colo-rectal health in adults and in infancy and childhood.

17. It was noted that a systematic approach has been proposed for this work. There was a general discussion about the process for the systematic review and whether existing meta-analyses should be considered in the first instance or whether all the relevant literature should be identified. . It was noted that systematic reviews and meta-analyses do not necessarily use the same criteria and search strategies. Therefore, before making a decision, it would be prudent to take a sequential approach and to assess the existing meta-analyses first and judge whether they meet the Working Groups requirements. Particular attention should be paid to the search strategies and terms used in existing reviews.

**Action: Peter Sanderson**

18. The Chair invited comments on each section of the paper.

*Search strategy and study quality assessment*

19. No comments were received on these sections.

*Inclusion/exclusion criteria*

20. Clarification was sought as to whether only intervention trials investigating constipation and IBS should be included. The Working Group agreed that this was

appropriate and that clinical trials of a more pharmaceutical nature should be excluded.

21. It was questioned whether case-control studies should be included. There was agreement that a degree of flexibility should be retained and that case-control studies could be included where there was a lack of adequate randomised controlled trials and prospective studies available. This is likely to differ from endpoint to endpoint.
22. The issue of whether there should be a minimum intervention duration for each of the endpoints was discussed. It was agreed that although longer rather than shorter studies were preferred due to sustained effects that could be observed, it was not appropriate to have a definite cut-off period at this stage. It was suggested that a decision on this should be taken once all the relevant literature had been identified. Peter Sanderson to make a recommendation to the group after scoping the literature.

**Action: Peter Sanderson**

*Data handling*

23. The issue of publications reporting results from the pooling of individual participant data from several studies was discussed. For some exposures and endpoints, it may be necessary to decide whether to use the results from the pooled analysis or whether to use the results from separate reports from the individual studies. It was agreed that decisions on the best approach to take would be made on a case-by-case basis.
24. It was suggested that it would be helpful to have some paragraphs on the statistical approaches (specifically the fixed and random effect models for metaanalysis) to be taken.

**Action: Peter Sanderson**

25. *Paragraph 9* – it was suggested that gender differences should not be the only characteristic which is assessed as there were many individual characteristics including age and ethnicity which may confound or modify the findings.

**Action: Peter Sanderson**

*Dietary exposure – carbohydrate components and search terms*

26. It was noted that the SACN definition for fibre should be included in this section

**Action: Peter Sanderson**

27. Include the term glucomannan.

28. There was uncertainty about the value of including a search for glycaemic index and load, as these terms were often used to describe specific dietary compositions or manipulations (e.g. with regard to levels of fibre, energy density, etc). It was agreed that it would be assessed as to whether studies on glycaemic index and load were captured under the other search terms and if they were it might not be necessary to include a separate search specifically on this.

**Action Peter Sanderson**

*Endpoint measures and search terms*

29. The panel agreed that diarrhoea should be included as a search term as it is an important endpoint for infants and children.

30. There are other endpoint effects which have not been noted in this section such as bloating and stomach pain (but which are reported in the literature). This may be because these are not commonly used and agreed medical terms associated with these conditions. It was however, considered important that such effects be included. It was agreed that inflammatory bowel diseases (IBD) should not be included in the review.

**Action Peter Sanderson**

31. It was agreed that limits on the duration of the trials included did not need to be decided at this stage.

32. A member pointed out that colorectal cancer incidence should be used instead of

mortality.

*Proposed framework for the colonic health section*

33. This section was agreed as a straightforward starting point for the review although it was noted that it would be useful to include a statistical component.

34. It was agreed that information on BMI, physical activity, alcohol and other potential confounders should be extracted.

35. A member highlighted that the measurement of fibre before 1965 was not very exact and this should be borne in mind.

*Timeframe*

36. The Chair requested that a more detailed timeline be prepared once the scoping of the existing reviews was complete.

**Action Peter Sanderson**

**DR PETER SANDERSON AND PROFESSOR IAN JOHNSON LEFT THE MEETING**

**Agenda item 4 – Appraisal panel for Carbohydrate and Cardio-Metabolic Health section.**

37. The Chair welcomed external appraiser Dr Alison Eastwood, from CRD in York, and FSA appraisers Dr Siân Thomas and Mr Joshua Atkinson, and outlined the process for the appraisal panel section of the meeting. Each proposal would be discussed in turn with comments taken from each of the appraisers. A short list of proposals would be determined with further discussion on these. Comments would be fed back to the applicants following the outcome of discussions.

38. Four proposals had been received from four different institutions: The Robert Gordon University, Durham University, Leeds University and the University of

East Anglia.

39. The panel's consensus was that, on balance, the Leeds proposal should be taken forward for funding, subject to agreement of the changes and points of clarification noted at the meeting. Comments would be fed back to the unsuccessful applicants.

**Action: Secretariat**

#### **Agenda item 5 – Future work programme**

40. Peter Sanderson would report back to the Working Group before the SACN meeting in June regarding the scoping of published reviews and meta-analyses on carbohydrate and colorectal health.

41. For the cardio-metabolic health review, the Agency would need to feedback comments noted at the meeting and to agree a timeline with the successful applicant, subject to their agreement of the revisions proposed.

**Action: Secretariat**

42. It was agreed that once these points had been established, a realistic timeline for the Working Group could be set.

#### **Agenda item 6 – AOB**

43. A paper was tabled to inform that Committee of the finalised Codex and EU definitions for fibre. Members queried what components would be included under the three categories specified in both definitions and it was agreed to report back to the Working Group with details about this.

**Action: Secretariat**

#### **Date of next meeting**

44. The date of the next meeting has yet to be confirmed, but it was agreed that it should take place around September 2009 once the colorectal and the cardio-metabolic health work was underway.

45. The Chair closed the meeting and thanked members for their attendance.

**Meeting close**