



**Folate Subgroup
Meeting held on Monday 1st November 2004
at the FSA, Aviation House, Conference Room 3.**

Attendees

Chair: Professor Sheila Bingham

Members: Professor Alan Jackson
Dr Anthony Williams
Mrs Christine Gratus
Dr Anita Thomas

Secretariat: Dr Alison Tedstone (FSA)
Dr Peter Sanderson (FSA)
Ms Emma Peacock (FSA)
Dr Sheela Reedy (DH) (apologies)

Chairs' introduction and welcome

1. The Chair welcomed members to the second meeting of the SACN Subgroup on Folate.
2. **Minutes from the last meeting**
3. The Subgroup was invited to comment on the minutes of the previous meeting. The following changes were requested:
4. Para 4: The last part of the last sentence should be removed to read 'The anaemia may be resolved by giving folic acid but the neuropathy is not.'
5. Para 5: The first sentence '...observed at doses of folic acid of 1mg/d or more.' should read '...doses of folic acid less than 1mg/d are safe.' Members requested that a sentence should be included from the EVM report. Members noted that this level should be revisited in reference to the paragraph from the EVM report and paragraph 823 from the COMA report.
6. Para 6: Needs to be reworded to reflect paragraph 25 of the update paper. The Subgroup raised the point that care should be taken in the use of the term "status" throughout the paper.

7. Para 8: Should be changed to match paragraph 36 of the update paper.
8. Para 9: The second sentence "no effect" should be changed to "no evidence".
9. Para 19: The first sentence should be removed. "In cancer" should be added to the end of the sentence after the word "conducted". The third sentence "...only 10% of polyps go on to become cancer." should read "... only a small proportion of polyps become malignant."
10. Para 21: The last sentence needs to be reworded to improve the clarity.
11. Para 22: The first sentence should be removed. A further sentence should be added stating that it would have been useful to have more detailed evidence in the elderly.
12. Para 23: The second sentence "While there were theoretical benefits for risk of CVD, cancer and cognitive decline these were unproven." Should read "While there may be theoretical benefits for risk of CVD, cancer and cognitive decline there are insufficient data." In the third sentence "...1% of people over 50 years..." this should read "...0.6% of people over 50 years..." as stated in the COMA report page 72. The last sentence does not fit in with the paragraph and should be made into a separate bullet point and discussed in further detail.
13. Para 24: Should be removed.
14. Para 25: In the second sentence "...as the authors acknowledge..." should be removed and the sentence should be reworded for clarity. The third sentence "... in the elderly may be larger than previously considered." Should read '...in the elderly may be more prevalent than previously considered.' The last sentence of the paragraph should be removed.
15. It was agreed the minutes would be amended and passed to the Chair for final agreement.

Action Secretariat

Accompanying paper

Fortification of flour with folic acid – cost effectiveness analysis (preliminary draft)

16. The Subgroup were presented with a paper from the Department of Health, which outlined a preliminary cost effectiveness analysis of the fortification of flour with folic acid, as determined by effects on the incidence of NTD-affected births and the masking of vitamin B12-deficiency.
17. The members welcomed the risk-benefit analysis in the paper, but agreed with the view that it was sensitive to the information put into the modeling device.

18. The Subgroup noted that including the screening of the elderly population for vitamin B12-deficiency in the risk-benefit analysis could affect the conclusions drawn. There are limitations in sensitivity and specificity of using serum vitamin B12 concentrations as an indicator of vitamin B12-deficiency. The utility, specificity and sensitivity of plasma methylmalonic acid concentrations as an indicator of B12 deficiency were discussed.
19. The absence of prevalence data on neuropathy associated with vitamin B12-deficiency were discussed. It was noted that the Royal College of Physicians were undertaking a survey of physicians' experience of the incidence and characteristics of vitamin B12-deficiency in clinical practice. The members requested more information on the Royal College of Physicians' survey.

Action: Secretariat

Discussion paper: folate and disease prevention - an update (SACN/Folate/04/02).

20. The Subgroup were made aware of the paragraphs in the tabled update paper that had been added or amended since the previous Subgroup meeting.
21. As requested by the Subgroup at the last meeting, a paragraph on the overage of folic acid in fortified foods had been included in the paper. It was noted that this was an important topic and the Subgroup requested copies of the relevant journal articles.

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22. The Subgroup requested that the folate intakes and status information from the National Diet and Nutrition Survey (NDNS) of people aged 65 years and over should be added to the update paper after paragraphs 4-6.

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23. The Subgroup requested information on the US Dietary Reference Intakes for folate for pregnant women to be included in the update paper.

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24. The Subgroup requested that paragraph 28 in the update paper be split into two and paragraph 29 should be changed to "however, the anemia was not assessed in this study and the population was vitamin B12 sufficient"; also, the last two sentences should be deleted.
25. The Subgroup requested that the EVM report should be cited in relation to paragraph 31.

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26. The Subgroup discussed studies investigating the differential associations of natural folates and folic acid with the risk of cancer. The Subgroup concluded that the articles presented conflicting evidence.
27. The Subgroup were made aware that the World Cancer Research Fund (WCRF) is undertaking a risk assessment of the evidence investigating the role of diet on risk of cancer; folate and cancer risk will be assessed as part of this. The report is expected in 2006.
28. The Subgroup requested the Secretariat to contact WCRF for information on its review of the evidence on the relationship between dietary folates and cancer risk.
29. It was noted that the Low Income Diet and Nutrition Survey would be reporting around 2006-7 and that further relevant information concerning older people would be available .

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30. The Subgroup requested that information should be included in the update paper on the reasons for early termination of two trials investigating the effect of homocysteine lowering therapy on cardiovascular disease risk.

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31. The Subgroup were made aware that a comprehensive literature search had been conducted in the preparation of the update paper.
32. It was agreed that the subgroup would look at the data in more detail, and that the Secretariat should provide a draft summary and conclusions.

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33. The Subgroup commented that evidence for an effect of folate intake on cognitive function or risk of cancer and cardiovascular disease was not, as yet, clear. It was noted that the results from further trials investigating the effect of folic acid supplementation on cardiovascular risk were required to confirm that relationship.
34. The Subgroup requested the International Classification of Disease data on the UK morbidity rates of the clinical manifestations of vitamin B12-deficiency.

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35. It was noted that the prevalence of biochemical vitamin B12-deficiency was higher in the older population than previously thought, and that it was important to establish

the relationship between biochemically-evident vitamin B12-deficiency and clinically-evident vitamin B12-deficiency. The Secretariat were requested to determine whether evidence of clinically-evident vitamin B12-deficiency had been collected in elderly cohorts in whom biochemical vitamin B12 status had been estimated.

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36. Conclusions in relation to the terms of reference of the subgroup were discussed. It was agreed that the requested amendments and additions to the paper would be drafted and circulated to the Subgroup prior to the next meeting, to be arranged in March 2005.