



Scientific Advisory Committee on Nutrition

## 22<sup>nd</sup> MEETING

10<sup>th</sup> October 2007, Novotel, 100-110 Euston Road, London NW1 2AJ

### Final Minutes

<b>Chairman</b>	Professor Alan Jackson
<b>Members</b>	Professor Peter Aggett Professor Annie Anderson Dr Paul Haggarty Professor Tim Key Professor Ian Macdonald Dr David Mela Dr Ann Prentice Dr Sheila Bingham Mrs Stella Walsh Mrs Christine Gratus Dr Anita Thomas Dr Anthony Williams Prof Peter Kopelman
<b>Government Observers and other attendees</b>	Mr Fiona Bissett (Scottish Executive) Mrs Maureen Howell (Welsh Assembly) Dr Naresh Chada (Northern Ireland) Ms Rachel Stratton (FSA) Ms Gillian Swan (FSA) Dr Alison Tedstone (FSA) Dr Louis Levy (FSA) Elizabeth Warham (Government Office for Science) Helen Lucas (Government Office for Science)
<b>Secretariat</b>	Ms Lynda Harrop (FSA) Dr Elaine Stone (FSA) Dr Sheela Reddy (DH) Ms Rachel Coomber (DH) Mrs Vicki Pyne (FSA) Ms Nichola Formanuik (FSA)

**Agenda item 1 – Chair’s welcome**

1. The Chair welcomed members to the twenty second meeting of the Scientific Advisory Committee on Nutrition (SACN).
2. The Chair stated that observers would have an opportunity to ask questions at the end of the meeting, if time permitted.
3. Attendees were informed that Professors John Cummings and Christine Williams have resigned from the committee. Thanks were conveyed to Professor Cummings for his work in nutrition in general and his advice to government as part of COMA and SACN over many years, particularly for his guidance on how scientific evidence is considered. Professor Williams has been appointed Dean at the University of Reading University, and therefore this increased responsibility means that she would be unable to continue with her commitment to SACN. The Chair gave recognition to her contribution to the SACN working groups. The Committee will be looking to appoint new members over the coming year.
4. The Chair welcomed Dr Elaine Stone as the new head of the SACN Secretariat, replacing Dr Alison Tedstone who has taken over from Mrs Rosemary Hignett as the FSA’s observer on the Committee.
5. No apologies were received and the Chair welcomed representatives from the devolved offices and Helen Lucas from the Government Office.
6. Members were invited to declare any changes of interest. None were declared.

**Agenda Item 1 – Minutes of previous Committee DN: check this title with past minutes meeting (6 June 2007) (SACN/07/min/02)**

7. Members were invited to comment on the minutes of the meeting on 6 June 2007 (SACN/07/min/02).
8. The following amendments were noted and agreed:

- At the time of the previous meeting the scientific reviews for the Foresight Obesity report had already been published but that the correct title was not included.
  - Christine Gratus should be listed as an attendee.
9. The remainder of the minutes were agreed as a correct record of the meeting on 6 June 2007.

#### **Matters Arising Action Check List (SACN/07/21)**

10. The Chair reported progress on matters arising from previous meetings. Members were invited to comment.

*SACN/05/05 – Agriculture and the link with Food and Health Workshop*

11. It was agreed that this item would be discussed under agenda item 7.

*SACN/06/22, SACN/07/07, SACN/07/19 - Scottish Executive update*

12. These outstanding items to be discussed under the Scottish Executive update.

*SACN/07/10 – Nutritional health claims legislation*

13. This issue to be discussed under agenda item 3. On matters arising it should read “breast milk substitute claims”.

*SACN/07/02 – Committee Openness*

14. This issue to be discussed under AOB.

*SACN/07/05 – Executive Summary of LIDNS*

15. This paper to be discussed under agenda item 2.

*AOB*

16. To be discussed at the horizon scanning meeting (11<sup>th</sup> October)

*SACN/07/12 – Carbohydrate Working Group*

17. To be discussed under agenda item 9.

*SACN/07/13, SACN/07/14, SACN/07/15 – NDNS papers*

18. These papers to be discussed under agenda item 5.

*SACN/07/16 – Selenium paper and dissemination*

19. To be discussed under agenda item 4 and 9, respectively

*SACN/07/17 – FSA update*

20. To be discussed under agenda item 10.

*Energy subgroup – Harmonisation between EFSA*

21. The Secretariat is currently having discussions regarding population reference intakes and will raise this issue with EFSA.

**Action: Secretariat**

*AOB*

22. A representative of DfID to be invited to the SACN meeting in February.

**Action: Secretariat**

23. Minute 40 from previous meeting, the report on the new growth standards from the Royal College of Paediatrics and Child Health has now been published and is on the SACN website.

24. Dr Alison Tedstone stated that the issue of duplication of activities on energy requirements has been raised with the Chief Scientist at the FSA and will be raised again.

**Action: Secretariat**

### **Agenda item 2 – Low income Diet and Nutrition Survey (LIDNS) (SACN/07/22)**

25. The Chair noted that the Committee had now seen and been asked to consider the LIDNS report.

26. Dr Alison Tedstone introduced the report and informed the Committee that they would receive a full copy, once it has been published. The main results were presented to the Committee and included the following key points:

- LIDNS is the first nationally representative survey of 3700 low income individuals, across all age ranges,
- Adults - carbohydrate intake is in line with current recommendations although starch and fibre are below the guidelines. NMES is above recommendations, total fat is in line with DRV's, whereas saturated fat is above.
- >6% adults are below the LRNI for riboflavin, calcium, magnesium, zinc, vitamin A, folate, vitamin C and iron.
- Children's macronutrient intake is qualitatively similar to adults, except for NMES, which is extremely high. For micronutrients the same proportion of older children are below the RNI, as adults.
- Overall conclusions: diet of the LIDNS population is similar to that estimated by the population "in receipt of benefits" within the NDNS and indicates several areas of concern (notably with respect to fruit and vegetable intake, iron status etc).

- Consequently, the Agency would continue to advise and promote a healthy balanced diet although further analysis might be useful to help direct policy action in this area

27. The Chair congratulated the Agency and contractors on this challenging piece of work and noted that the dietary patterns identified in LIDNS were broadly similar to those seen in the NDNS, with no new problem areas specific to the low income population identified. The Chair noted that all survey work faced difficulties in securing representative population samples and dietary intake data. The efforts made to maintain response data and minimise under-reporting reflected the importance of the data gained.

28. It was agreed that although the report was for the FSA, it was appropriate for SACN to provide comments and the key points raised are summarised as follows:

- There were concerns about over estimation of children's intake as adult portion sizes were used to estimate intake, thus giving a misleading picture about numbers who were below the RNI. The Agency confirmed that in order to address this they would be commissioning children's portion size work to use in the rolling NDNS programme.
- In adults, more than 50% demonstrate raised total cholesterol, LDL and lower HDL. Therefore, this population is at considerable risk of CVD and it was considered important to put more emphasis in the discussion paper about dietary influences, as well as other factors.
- Concerns were raised about the most deprived individuals not being captured in the survey, although it was mentioned by the Secretariat that a 55% response rate is considered to be good. It was noted that contractors did take into account bias, although those without addresses were excluded which would account for a certain proportion of the population.
- It was agreed that the outcomes of LIDNS challenged certain assumptions about interventions currently carried out by FSA and DH, such as assumptions relating to access to shops or cooking skills. It was queried whether the possible insecurity of these assumptions was being considered.

- It was recommended that the extent to which diet remains an important determinant risk factor for cardiovascular disease needed to be highlighted in the future.
- It was stated there are data on different ethnic groups within the survey, although the numbers are too few to enable firm conclusions to be drawn.
- It was noted that it might be useful to further sub-divide the LIDNS and NDNS surveys in order to compare them in ways that have not yet been done.
- It was confirmed that the ONS definition of maternal deprivation was used.
- Dr Alison Tedstone confirmed that a parent or guardian was present when data were being collected from children.
- It was suggested that a lay summary be included.

29. The Secretariat confirmed that they would welcome further comments from Members on the entire report in the form of a commentary based on agreed terms of reference. The Secretariat would consider best approach and inform Members.

**Action: Secretariat**

### **Agenda item 3: Nutrition and health claims update (SACN/07/23)**

30. Dr Alison Tedstone provided Members with an update on the FSA's work regarding health claims, as they had requested. It was stated that the Agency had now received approximately 1000 nutrition and health claims for assessment.

31. It was confirmed that infant formula (formula for 0-6 month old infants) is not under the scope of the legislation but the claims on follow on formula might be affected..

32. It was also confirmed that EFSA do have a definition for "low" criteria but that there was no definition for "high" criteria. In addition, EFSA has published more general advice to be used when assessing the evidence submitted to substantiate claims. EFSA and the Commission are also encouraging Member States to apply sifting criteria to minimise duplication.

33. It was explained that FSA and other member state national agencies had been explicitly requested to evaluate submitted dossiers for proposed claims and identify those submissions which did not fulfil certain basic substantiation criteria. FSA undertook to confirm what this process was and also to ensure that the Committee received regular updates on the status of this work.

**Action: Secretariat**

**Agenda item 4 – Selenium paper (SACN/07/24)**

34. Dr Elaine Stone introduced the Selenium and Health paper, which had been brought to the Committee for general comment and agreement. It was hoped that final agreement could be completed by correspondence.

35. Some general comments were given on the paper:

- A summary needs to be added at the end of each section.
- Background status of population under study needs to be acknowledged and commented upon even if evidence is not known at this stage.
- It was acknowledged that selenium content of foods such as flour and cereal is dependent on the level in the soil in which they are grown in. Information on how these constituents enter the food chain and the products that they are made into, needs to be included. A comment needs to be made about how the changes in diet and dietary patterns may affect selenium intake and status. For example, the decline in offal consumption.
- The report contains average levels of selenium, but no indication of the distribution within the population or whether any relationships observed were dependent on customary selenium intake. This needs to be described before the data can be interpreted.

36. More detailed comments were given on specific paragraphs of the paper and these were noted by the Secretariat to amend the report.

**Action: Secretariat**

37. It was agreed to convene a 'virtual' drafting team made up of Tim Key, Sheila Bingham and Peter Aggett who would advise the Secretariat by email. It was suggested that the necessary changes are made before February, so that the paper can be circulated and signed off at the February meeting.

**Action: Secretariat**

#### **Agenda item 5- National Diet and Nutrition Survey (SACN/07/25)**

38. Gillian Swan described the substantive changes made to the NDNS papers following the previous SACN meeting and invited general comments on the paper. These were noted by the secretariat who agreed to amend the paper as appropriate.

39. The Chair agreed that in principle the Committee accepts the NDNS document, with a view that the changes are adopted. The Committee does not need to see the report again.

40. Dr Alison Tedstone confirmed that the micronutrient data from the NDNS survey will be used to inform FSA policy. The communication strategy for this report also needs to be considered. It was highlighted that journalists and organisations such as the British Nutrition Foundation have already picked up on the survey. Also, all health professionals have been alerted to its existence. It was confirmed that the report would be published by June 2008.

#### **Agenda item 6 – Synthesis paper of infant feeding survey (SACN/07/26)**

41. The Chair gave some background to the infant feeding survey prior to an introduction from Tony Williams. The survey is carried out every 5 years and it has already been given initial consideration by SMCN. General comments were invited from the Committee and included the following points:

- There is a need to identify whose responsibility it is to address the issues raised. It was recommended to cross reference to NICE guidelines, which provide information on responsibility in this field.

- It is important to keep a record of the prevalence of breastfeeding, in case there is a disruption in the supply of formula (there is currently no formula milk manufactured in the UK).
- Concern was raised about how to alert interested parties to the existence of the survey.

42. The Chair welcomed the report. Changes were suggested to the balance of emphasis with the aim of having the report published around the same time as the report on the NDNS on the SACN website.

43. It was agreed that the report would be amended and sent to the Committee for comments shortly. Communication strategy to then be considered.

**Action: Secretariat**

#### **Agenda item 7- Agriculture Workshop (SACN07/27)**

44. The Committee were asked to consider the scope of any such workshop, the involvement of SACN and any suggestions for members and a Chair.

45. A point was raised that this issue needed to be considered in the context of the Curry report “The Future of Food and Farming”. This report recommended the need for a 30-year strategy for the development of sustainable agriculture for human health. The Secretariat agreed to obtain further information on the Curry report.

**Action: Secretariat**

46. There is concern that the focus so far has been about potentially deleterious considerations rather than enhancement of animal products. Suggestions for possible topics included:

- Vitamin A and liver
- Iodine and milk.
- Fish

- Opportunities for modifying the composition of foods in relation to production. However, there are associated implications with this relating to availability and access and the potential for intended and unintended consequences.

47. It was agreed that there was a need to be clear about the scope of this workshop and what the Committee were trying to achieve. It was highlighted that the topics for discussion needed to be manageable, as some of those suggested were not necessarily under remit of the FSA or DH. It was commented that Defra were responsible for the production of nutritious food and that it would be helpful to engage them. The Chair commented that SACN did have engagement with Defra, which needed to be reinforced.

48. It was therefore suggested that the Committee started by considering the problems encountered on a population level and then worked downwards. Therefore, a workshop to give the Committee a better sense of perspective on these areas is needed and it was agreed that this should be arranged for next year, and that an agricultural economist should be invited in order give a broader perspective. In addition, it was suggested that Professor Christine Williams could be invited to be involved in this work.

**Action: Secretariat**

#### **Agenda item 8 - Website/COMS strategy (SACN/07/28)**

49. It was highlighted that there are no formal mechanisms in place for SACN reports to be brought to the attention of professionals and other interested parties. This appears to be the case across Committees. It was also agreed that the Committee's work needs to be accessible to other interested parties who might not be actively following SACN's activities.

50. The Secretariat agreed to establish the following:

- The policy on when reports are issued an ISBN number.
- Whether there is a strategy within the FSA for press releases.

- The issue of publication in open access journals and Pubmed central.
- Whether papers automatically go to the FSA Board.

51. Dr Sheela Reddy confirmed that it is normal practice for reports to be published on the DH web page before they go to print and they are also sent to ministers, CMO's and other relevant officials. It is also standard practice to put out a press release alongside each report.

52. A member informed the committee that the aim is to move away from hard copies of reports, although this raises the issue of accessibility. Although due to resource and money issues, web based publishing maybe the best course of action.

53. The chair acknowledged the need for a process by which we can judge what happens to a report, so it is clear what needs to be done. It was agreed that a communication strategy should be devised with clear terms of reference for communication, so that transparency and accessibility can be maintained.

**Action: Secretariat**

## **Agenda item 9 - Working group and subgroup updates**

### **Child and maternal nutrition**

54. Dr Anthony Williams updated the committee on the key issues discussed at the previous SMCN meeting.

- The report on vitamin D has been published
- A letter has been written to the CMO regarding the report "Health is Global", but no reply has been received
- The working group highlighted deficiencies in the draft regulations for infant and follow on formula. A letter has been drafted and sent to the FSA to highlight this.
- DH has commissioned a scoping study to evaluate the Healthy Start scheme. In particular concern was raised about how supplement intake (particularly folic acid supplements for pregnancy) under Healthy Start compared with the previous schemes.

- The draft NICE antenatal guidelines have been released for consultation.

55. It was noted that nutritional recommendation for school meals varied across the UK (particularly with respect to Sodium). It was confirmed that the implications of these recommendations would fall into the remit of SACN.

56. Dr Sheela Reddy confirmed that DH is currently working with the Royal College of Paediatrics and Child Health regarding implementation of the WHO growth standards in the UK.

### **Energy**

57. The Chair gave an update from the recent energy subgroup meeting, highlighting the following key points:

- Further modelling of the relationship between total energy expenditure and other variable would be carried out.
- The draft paper is being presented to the subgroup at their meeting in December and will be presented to the Committee in 2008.

### **Iron**

58. Professor Peter Aggett informed the Committee that four chapters of the iron report have now been revised and updated. The other chapters are currently being updated with the aim of the whole report being brought to the Committee in February.

### **Carbohydrate**

59. Dr Elaine Stone informed the Committee that the terms of reference for this group were still being finalised and would be circulated to the Committee in due course, along with the final membership of the group. The first meeting has been scheduled for 14<sup>th</sup> January, where the process of the group will be decided upon.

**Action: Secretariat****ANANF**

60. Dr Elaine Stone informed the Committee that a guidance document integrating the process of nutritional assessment will be circulated to the subgroup and a meeting will be convened early next year. In addition it was mentioned that membership of the subgroup needed to be revisited.

**Action: Secretariat****Nutrition Professionals Confederation (NPC)**

61. The Chair informed the Committee that the last meeting had been cancelled as not all members were able to attend and this was of some importance as there is a need to clarify remit of the group to the main Committee. However, the meeting has been rescheduled for 13<sup>th</sup> December.

**Agenda item 10- Government update on nutrition related activities****FSA (SACN/07/29)**

62. Louis Levy gave an update on the key activities of the FSA:

- The salt reduction programme, which has now been developed with two different data collection spreadsheets.
- Guidance for institutions will be published on 16<sup>th</sup> October. It is hoped to align publication of old people's guidance with other report later this month. Further guidance for major institutions providing food to adults, not solely care homes, is due to be published shortly.
- European legislation for infant and follow on formula is currently being consulted on.

63. Queries were raised with regard to the methodology for the NDNS rolling programme, in particular why food diaries rather than multiple pass 24 hour recall was chosen. It was confirmed that the pilot study showed a similar response rate to both methods. FSA agreed to provide the rationale behind this decision and to make project board papers available to members.

**Action: FSA**

64. A member noted that there had been changes to the definitions of high, medium and low content of foods and stated that the rationale for this need to be made transparent. It was confirmed that in order to avoid confusion to the consumer, the definitions had been altered so that they were consistent with signposting and that the criterion for lower values reflect European indications.

65. A member raised the concern that data on the salt levels in products maybe out of date by the time they are received by the Agency. It was enquired as to how much value this adds above market basket analysis. The Secretariat agreed to come back to the Committee on this point.

**Action: FSA**

66. There was a request about whether the Committee would be able to see the further modelling that has been conducted, regarding the folic acid work.

**Action: FSA****DH (SACN/07/30)**

67. Dr Sheela Reddy gave an update on the activities of DH:

- The chancellor has announced a spending review for the next 3 years.
- There is also a commitment to improve the services for disabled children.
- The details of the PSA are to be circulated.

**Action: DH**

68. Clarification was sought as to whether the payment received by pregnant women was related to nutrition. It was confirmed that women would receive a one off payment of £120 after 29 weeks, on registration with antenatal services, to be put towards the cost of a healthy lifestyle, which should include diet. At this time women receive information on breastfeeding, but there is no standard way in which information is delivered. The scheme is linked to Healthy Start and is only operating in England. There was concern raised that there is no guarantee that the money would be spent on food or any activity related to nutrition.

69. Concern was raised about the fact that only four schools out of 250 were chosen for evaluation of the pedometer programme. It was agreed that this information would be fed back to DH.

**Action: DH**

### **Devolved Health Departments (SACN/07/31)**

#### **Northern Ireland**

70. Dr Naresh Chada gave an update on the activities in Northern Ireland:

- There is now a devolved administration in Northern Ireland and it is hoped that it will continue to focus on nutritional issues.
- The Focus is on childhood obesity, physical activity and healthy eating.
- Local steering committees are being developed to give these issues priority
- Working on Standards in schools for improving nutrition in disadvantaged areas and sporting activities.
- Nutrition initiatives include nutrition matters and health action zone.

#### **Wales**

71. Dr Naresh Chada updated the Committee on the main nutrition activity in Wales, in the absence of Maureen Howell.

- They have been involved in a 3-month food debate, which has engaged professionals and the public in discussing nutritional issues, health and sustainable agriculture.

#### **Scotland**

72. Fiona Bissett gave an update on the activities in Scotland:

- The Scottish Executive is now known as the Scottish Government and the Scottish Health Department has become the Directorate of Health and Wellbeing.
- The SNP has a stated commitment to maternal and child nutrition.

- There is collaborative work being done between SERAD and the health department, for example there is a need to determine any gaps in the supply chain and to develop expertise in this area.

73. Fiona Bissett enquired where the expertise would lie in terms of addressing the nutritional needs of some vulnerable groups in an emergency situation. The Chair stated that this area was not generally considered to be an area of expertise for SACN, but there maybe some expertise within the Royal Colleges or the Society for In Born Errors of Metabolism.

74. A member requested that the Scottish Diet Action Plan REVIEW (noting poor progress towards achieving dietary targets) be circulated among the Committee.

**Action: Directorate of Health and wellbeing**

#### **EFSA**

75. Written report only. No additional comments made.

#### **AOB**

76. Elizabeth Warham from the Government Office for Science gave a presentation on the activities of the science review team, outlining that the purpose of the exercise was to assess the quality of science at DH with the aim of informing the Chief Scientific Advisor in their role of briefing the PM and Cabinet Office.

77. The chair commented that because SACN reports to DH and FSA there is an issue about where certain responsibilities lie. DH deals with maternal child nutrition and obesity, FSA with remaining nutritional issues.

78. The value of whether DH and FSA should write to Committee Members and their Employers thanking them for their participation was discussed. It was agreed that this activity was important.

79. The Chair noted that it would be valuable for the Committee to be kept informed on a regular basis the extent to which its advice had been accepted and how it was being used across government.

### **Open meetings**

80. The Chair asked the Committee whether they agreed that SACN meetings should remain open and there was full support for this proposal.

81. There was also a suggestion that one meeting per year should rotate between devolved administrations offices and it was agreed that this should happen in 2008.

**Action: Secretariat**

### **ACNFP**

82. Paul Haggarty has volunteered to represent SACN on this group, since Dr Anthony Williams has stepped down.

### **Next meeting**

83. The next meeting is scheduled for 7<sup>th</sup> February 2008.

The chair thanked members for their attendance and closed the meeting.