



Scientific Advisory Committee on Nutrition

Horizon Scanning Meeting

11th October 2007, Novotel St Pancras, 100-110 Euston Road, London NW1 2AJ

Final Minutes

Chairman	Professor Alan Jackson
Members	Professor Peter Aggett Professor Annie Anderson Dr Paul Haggarty Professor Tim Key Professor Ian Macdonald Dr David Mela Dr Ann Prentice Mrs Stella Walsh Dr Anthony Williams Professor Peter Kopelman Mrs Christine Gratus Dr Anita Thomas
Government Observers and other attendees	Dr Fiona Bisset (Scottish Observer) Dr Naresh Chada (Northern Ireland) Rosemary Hignett (FSA) Anna White (FSA)
Secretariat	Dr Elaine Stone (FSA) Ms Lynda Harrop (FSA) Dr Sheela Reddy (DH) Ms Rachel Coomber (DH) Mrs Vicki Pyne (FSA)

Chair's welcome and introduction

1. The Chair welcomed members to the 3rd Horizon Scanning meeting of the Scientific Advisory Committee on Nutrition (SACN).
2. Apologies were received from Professor Sheila Bingham and Mrs Maureen Howell (Welsh Assembly).

3. The Chair informed Members that there had been no formal record of previous Horizon Scanning meetings and noted that as the meetings are an important Committee process, which anticipate arising nutrition issues, minutes of meetings would now be published. The Chair highlighted that the Committee have a responsibility to both the Departments of Health (DH) and the Food Standards Agency (FSA), but also a wider responsibility to the country as a whole.
4. The Chair recognised the context of the work of the Committee, noting three reports and highlighting how the relative emphasis of these matched the need to meet the health of the population:
 - o An independent review by Derek Wanless, '*Securing Our Future Health: Taking A Long-Term View*', an evidence-based assessment of the long-term resource requirements for the NHS.
 - o '*A Review of UK Health Research Funding*' by Sir David Cooksey, which recommends that the Government should seek to achieve better coordination of health research and more coherent funding arrangements.
 - o The Policy Commission on Future of Farming and Food, '*Farming and Food: a sustainable future*' chaired by Sir Donald Curry, which advises the Government on creating a sustainable, competitive and diverse farming and food sector.
5. It was noted that the Office for Strategic Coordination of Health Research (OSCHR), chaired by John Bell, brings together the health research budgets of the Medical Research Council (MRC) and the Department of Health (DH), whilst retaining two separate organisations. Members also noted that MRC had launched a strategic review of nutrition and it was requested that details of this were circulated to Members.

Action: Secretariat

6. Members raised concern about weaknesses in the nature of the specialist nutrition workforce, and also a similar concern with the skills and competencies of other health professionals, including GPs, that the public rely on for advice and guidance. These weaknesses operate as a factor in limiting the opportunity for the

population to achieve better health. Members were informed that the Intercollegiate Group on Nutrition (ICGN) had made progress in the formal training of doctors, although GPs remain a challenge. The ICG is now formally a part of the Academy of Medical Royal Colleges.

7. Members recognised that for nutrition, progress has been made in the systematic approaches to biomedical risk assessments, but there are opportunities for improvement in the assessment of risk related to broader social considerations. Alternative approaches may be required to overcome these challenges. Biological considerations and broader sociological considerations should be brought together so that they both weigh transparently when informing the policy agenda.
8. Members agreed the need for explicit and quantifiable measures of 'health'. The term 'health' is used non-specifically and is frequently used in a negative context. There would be benefit in having a clear, agreed identification of what is being sought actively in terms of health.

Agenda Item 1 – Population nutritional status (SACN/07/HS/01)

9. Dr Anthony Williams introduced the paper "*Problems and opportunities associated with measuring the economic gains of improved population nutritional status*", highlighting to members that at present, SACN does not include any consideration of cost effectiveness in their risk assessments, but that it was important to prioritise public funding.
10. It was noted that the National Institute of Clinical Excellence's (NICE) methodology for risk assessment is somewhat different to that of the Committee. It was recognised that there is a need to work more closely with health economists as they judge risk differently and this will ensure the right data is included in risk assessments.
11. Members were asked to consider how cost effectiveness should be taken into account in risk assessments and economic modelling. Comments were as follows:

- There is a need for a close relationship between advisory committees and other government bodies with regard to public health.
- It is important to take on board different perspectives in particular that in the Government context there may be other useful tools when assessing interventions. For example, the Magenta and Green Books imply that if one is aware of certain processes, they should be taken on board from the start of a process.
- There is a need to engage with health economists right from the outset but care should be taken with regards to ensure that the experience and skills of the health economist were relevant to the topic under consideration.
- Concern was raised about the need to clarify the appropriate boundary between any implementation of such processes and responsibilities for risk management.
- More interaction between risk assessors and stakeholders may result in better guidance around where priorities lie
- It was suggested that it might be helpful to have more direct discussion in determining the terms of reference at the start of the process of risk assessment between the Committee and those officials engaged in risk management and ongoing iteration when necessary.
- Discussions of the appropriate time to incorporate cost effectiveness assessments into the risk assessment process should be taken back to the Food Standards Agency for discussion on as a general issue of importance.

Action: Secretariat

12. It was agreed that the Committee's role is to calculate the benefit to the public in achieving change and consideration over the extent to which the Committee are able to manage all factors required in a risk assessment is required. It was suggested that the Committee might simply indicate areas to be considered by health economists.

13. There is a delay in the time taken for the Committee to issue advice. Commentaries produced by health economists, following the publication of the Committee's reports, tend to contribute to this time delay.

14. The Chair suggested incorporating analysis of cost effectiveness into the Carbohydrate working group's risk assessment. However, concerns were raised that this might compromise the integrity of the process. In addition it was noted that currently there are insufficient tools to evaluate effectiveness and impact of interventions and that more information on cost effectiveness would be useful. The Chair suggested that inviting an observer with economic skills to attend the meetings and comment on any potential opportunities might be helpful.

Action: Secretariat

12. Members questioned the implications of these considerations for the iron report as this potentially has a big economic impact. It was suggested that this Subgroup should consider revisiting the report with regard to public health and economic analysis.

Action: Secretariat

13. Despite agreement that economic considerations are important, there were concerns raised that this might add delays to the process. It was suggested that it might be appropriate to publish an economic assessment alongside a scientific report rather than incorporating it into the report itself. It was agreed that the Agency and DH should offer advice and guidance to the Committee on what is achievable and how engagement with health economists should work. Members requested this to be brought back to the Committee, once there is a clearer sense of the opportunities available.

Action: Secretariat

Agenda item 2 – Nutrient Interactions (SACN/07/HS/02)

14. Dr Paul Haggarty introduced the paper and asked members to consider whether complex diseases, which are now the main concern of the Committee, are efficiently addressed using the 'single nutrient-deficiency symptom' model or whether more consideration should be given to general nutrient status and interaction. However, Dr Haggarty acknowledged that this would have

implications for the way the Committee works. In addition, the nutritional problems posed by inequalities need consideration, as this is a lifelong issue that is not addressed by looking at individual nutrients.

15. It was noted that although widely varied patterns in diet and diet consumptions exist, complexities of nutrient interactions are difficult to relate to individual health outcomes because there are so many co-morbidities. It was suggested that it was worth exploring other ways of interrogating data and patterns within the National Diet and Nutrition Survey (NDNS).
16. Members questioned whether the DRVs necessarily reflect the needs of those participating in the Low Income Diet and Nutrition Survey (LIDNS). DRVs are designed to maintain health in otherwise healthy people, for whom the intake of all other nutrients is adequate. It was suggested that the Committee need to look beyond the intake of individual nutrients, and explore key behaviours (e.g. smoking) that also affect the nutritional status and requirements of these populations at special risk.
17. It was agreed that there is a wealth of data already available to the Committee (e.g. NDNS/LDNS), however there may be difficulties and statistical limitations in using this information in practice – consideration of procedures that could potentially be applied to existing data is required.
18. The Chair noted a general sympathy for taking a broader approach to consider more complex diseases but that at present, the methodology for this was not clear. It was suggested that the Committee could begin by using the LIDNS dataset to explore existing data in new ways although it was agreed that although potentially useful, the limitations of this exercise need to be recognised.
19. Members noted the length of time required to achieve a quantitative effect of nutrients on chronic disease and that potentially important observations that were not amenable to standard intervention trials should not be overlooked. Members recognised that there are more complex interactions that need to be taken on board but that we still need to focus on the simple hypotheses.

Agenda item 3 – Inter-individual variation in response to diet (SACN/07/HS/03)

20. Dr Paul Haggarty introduced the paper, highlighting some of the difficulties with measuring intake and the usefulness of measuring status. He also noted the growing body of evidence relating status and genotype. Members were invited to discuss and comment on the questions raised in the paper.
21. Members noted that there are also limitations with status data, and often a disease outcome is due to the genetic make-up of an individual and not the specific nutrient itself.
22. The Committee were of the view that although genetics is an important consideration, genotyping everyone and targeting advice to particular individuals is not appropriate or feasible in the current state of knowledge. It was suggested that the Committee should contact and seek advice from the Human Genetics Commission, who have considered areas of commercial testing. It was suggested that the Human Genetics Commission could be invited to give a presentation to SACN.

Action: Secretariat

23. Members were of the opinion that characterisation of genotype should not be considered to simply represent an alternative to the study of nutrition. Genotypic differences were but one factor that contributes to the variability within a population and dietary studies cannot be replaced with genetic studies. However, the importance of genotype to inter-individual variation was recognised. It was suggested there might be a case for introducing a genetic component into national dietary surveys such as the National Diet and Nutrition Survey (NDNS), although not to replace dietary studies.
24. It was also noted that the SACN's remit covers the health of the *population* and the Committee need to be clear where its remit ends with regards to genetics and

inter-individual variation. Members commented on the complexity of overall assessments in understanding and implementing policy.

25. The Chair noted that revision of the DRVs had been raised several times but was not considered to have the highest priority at this time. The process for revision would need to be considered carefully and it was noted that a number of resources are available and could be exploited in the DRV revision process.
26. The Chair noted that EFSA are in the process of reviewing some of the Population Reference Intakes (PRI). Ideally, revision of recommended intakes for nutrients should be considered internationally first and individual countries could then consider how these apply nationally. However, as this process is unlikely, it was suggested that once the Energy Subgroup had completed their work on energy requirements, the Committee could begin picking up principles of specific nutrients or clusters of nutrients. It was agreed that at this time careful thought had to be given to the best way forward.

Agenda item 4 – Food and Mental Health (SACN/07/HS/04)

27. The Chair introduced the paper, informing members that Sustain had submitted a paper inviting SACN to consider the evidence around food and mental health. The Chair highlighted that nutrition and mental health is a large public health area for which there is a National Service Framework. The Chair commented that SACN have not yet looked at this area but that perhaps it was timely as it is likely to become a bigger issue in the future and many organisations are lobbying in this area. There is concern about the nature and quality of the evidence which is used to support statements in the public domain in this area. Members were invited to comment.
28. Members commented that a comprehensive review might be needed to deal effectively with this complex issue and could involve co-opting experts to undertake a review with the Committee.

29. There was discussion around what the term 'mental health' encapsulates. Members agreed there was a need to clarify what is meant by this term before undertaking a review and whether major disorders would be considered or just the general population mental health (covering areas such as depression).
30. Members commented that the paper submitted by Sustain, suggests several initiatives that are already covered by policy. Members also expressed concern that the paper raised a wide range of considerations and it was unlikely that a single systematic could address all the points raised. It was agreed that the Committee would need to consider which aspects were best suited to systematic risk assessment and create a suitable framework for a review process.
31. Members suggested the Committee could begin by focusing on one particular mental health disorder. It was agreed there is a need to identify key areas of importance and to highlight areas that needed broader consideration.
32. The Chair noted a general sympathy for the proposed consideration of diet and mental health and proposed that this could be a future major activity of the Committee, once the iron and energy reports are complete.

Agenda item 5 – Risk Assessment Process (SACN/07/HS/05)

33. The Chair introduced the paper relating to risk assessment which was divided into 3 sections and asked David Mela to present the first section.

General Risk Assessment Process (Annex 1)

34. David Mela briefly outlined the first section *Risk Assessment Processes*, raising the issue around industry responses to recommendations and implications within risk assessment. It was noted that these issues are usually considered under risk management and the proposed discussion is whether this should also form a part of risk assessment. Members were invited to discuss and comment.

35. Members asked for clarification of FSA's process for dealing with the issue of unintended consequences and questioned whether this task was for the Committee. The Agency confirmed that there were formal structures in place for example, a consultation always preceded any intervention. Members commented that although they felt that consultations were the appropriate way for stakeholders to feed into the process and perhaps it was necessary to make it more explicit that this process would pick up any unintended consequences.
36. Members suggested it should be the responsibility of this Committee to address these issues, rather than devolving responsibility to stakeholders. Stakeholders are not necessarily nutrition experts and although may recognise technical aspects resulting from recommendations, if they are not aware of the importance of these then they are unlikely to highlight them in the consultation process.
37. It was suggested that anticipating the effects of an outcome should be considered during the risk assessment process, thus pointing those undertaking risk management of new recommendations, in the right direction. It was suggested that the Committee could invite someone to advise at an early stage. The Agency confirmed that they have been seeking external advice on food science to support the reformulation programme and that they could not see any reason why someone with an industrial background should not observe the working groups.
38. Members agreed that it was the Committee's responsibility to anticipate any identifiable unintended consequences, their importance and any action that might avoid them. One option might be to commission position papers to focus on consequences but that this would need careful consideration in terms of available resources.
39. Members noted that responses on unintended consequences might come from industry, or from consumers or other groups.
40. Members commented that there are decisions made in the risk management process that are open to revisiting and that a generic openness of risk management decisions could come back to the Committee. It was agreed that the Committee

could take advice at appropriate stages of risk assessment, acknowledging potential issues, and that risk managers could bring issues back to the Committee requesting a full risk assessment of particular issues where necessary.

SACN Risk Assessment Guidance (Annex 2)

41. The Chair introduced current guidance for the Committee's risk assessment process, *SACN Risk Assessment Guidance* and informed members that general questions had been raised about how the Committee conducts itself and how data are reviewed. Members were asked to consider whether the framework remains sufficient for appropriate guidance. There was concern that adding additional complexity to the risk assessment process might add to the time taken to produce reports. It was noted that the time taken to produce reports was not simply due to resources but also to do with the nature of collecting evidence.
42. Several comments were made about the suggestion of commissioning position papers or reports externally, in order to reduce the amount of time taken to produce them:
- Previous experience of commissioning papers has shown that this does not necessarily shorten the process and although this will contribute significantly to the review process, this still leaves lots of work for the Secretariat.
 - Those commissioned to write a report for the Committee may not be as willing as members of the Secretariat, to reflect the views of the Committee
 - A Cochrane style systematic review tends to focus on a particular type of evidence whereas SACN considers a broader range in their risk assessment.
43. The Chair recognised that drafting papers is a substantial task for the Secretariat and noted that the limiting factor is often time devoted to drafting reports and that there may be certain occasions when it was appropriate to commission a report or position paper.

44. It was agreed that responsibility for assisting the Secretariat with report drafting has involved delegated members within the Committee. It may be useful to set up a formally defined drafting group in the future to assist with reports.
45. Members were concerned that due to the dissemination process, SACN's work is not always recognised in the community and the level of work the Committee undergo is not always captured adequately. It was also noted that minutes of meetings are brief at present and that in future these should be strengthened to better reflect the Committee's discussions.
46. Members also suggested it may be useful for the public to have the opportunity to comment at points throughout meetings, rather than at the end, and the Chair agreed this could be considered.

Evaluation

47. The Chair informed members that at the last SMCN meeting in September, there had been discussion around what constitutes an "evaluation" and a wider meaning of the term in connection with nutrition policy had been questioned. This had arisen from a discussion about the proposed Healthy Start evaluation and the Subgroup had suggested that a discussion around broader evaluation expectations should be brought to the Committee.
48. It was agreed that the Committee needed to be clear about intended components of an evaluation and that resource implications should become an integral part of the project planning. It was also agreed that evaluation planning should routinely be considered before implementing any policy and that it was important to have baseline data in order to properly evaluate. Assurances were requested that initiatives are within a framework which will be evaluated in due course.
49. Members were informed that DH had commissioned a scope for the evaluation, and that the Committee would have the opportunity to comment on this.

Action: Secretariat

50. Dr Reddy confirmed that important DH policy initiatives currently sit within a structured framework. Dr Reddy also noted again that DH has absolute recognition with regards to the lack of evaluation for Healthy Start and regrets the lost opportunity.

51. It was queried as to whether the process for evaluation was similar at the FSA as in DH and it was confirmed that individual evaluation is carried out for each initiative although the nature of the evaluation may vary according to the work. For example, the advice on folic acid included a recommendation about monitoring as part of the package. It was acknowledged that although research requirements may have policy drivers, it is not always clear how recommendations are fed back into the system and how they are made known and implemented. The Secretariat agreed to give this issue further consideration.

Action: Secretariat

Agenda item 6 – Actions arising from appraisals (SACN/07/HS/06)

52. The Chair introduced the paper, which provides a list of actions arising from the last appraisals carried out in 2006. The Chair invited members to go through each action and comment on whether further action was required.

Actions for Secretariat

53. Comments were as follows:

- It was noted that over the last 18 months, the Secretariat had been particularly busy with the folic acid work, which has resulted in exceptional delays with other SACN reports but that this issue has been covered under the earlier agenda item of risk assessment.
- It was recognised that the Secretariat have made an asserted effort to provide members with the paperwork in good time prior to the meeting.

- It was noted that Member's email comments are taken into account and captured in a summary table. It was also suggested that it would be helpful if members copied fellow members into their responses.

Action: Members

- It was noted that it would be useful to have statements of evaluations of outcomes and it was suggested that the Government updates could be restructured so there is more detail in terms of timing and aim of initiatives.

Action: Secretariat

- It was noted that when arranging dates for meetings, Secretariat should try to ensure that these dates fit in with all members fixed timetables.

Other issues raised and points to note

54. Comments were as follows:

- Concerns had been raised when subgroups have difficulties seeing their contributions transformed into the report. It was agreed that this issue had been addressed by capturing Member's comments in a table.
- Lay Members of the Committee confirmed that there was suitable technical support available for them from other Members and from the Secretariat. The Chair acknowledged contributions to SACN's work from lay members. It was suggested that it might be useful to have a list of members' expertise so that other people know whom to approach for help – members were informed that a list was already available on the SACN website, but that a summary table could be prepared.

Action: Secretariat

- It was agreed that holding meetings 2 to 3 times a year should be sufficient for sub and working groups and that if, for some reason, there is a longer gap between meetings, the group should begin the meeting by reviewing discussions from the previous meeting.

- It was agreed that members should not be placed in a position where they take on too much work or participate in too many sub or working groups. In addition, Members should be honest about their work load and what they are able to take on.
- The limited support for DH secretariat was recognised and the impact this had had on the work for SMCN over the last six months was acknowledged.

Training needs

55. Comments were as follows:

- The principle of making mentors available to lay members was accepted in principle. Secretariat agreed to consider the best way forward for this.

Action: Secretariat

- It was noted that media training had been originally offered to Members when they first joined but subsequent Members had not received this. It was requested that the Secretariat explore whether there is a standard approach across government for induction. In addition Members were asked to inform the Secretariat if they considered that advice on dealing with the media would be valuable.

Action: Secretariat and Members

- There was discussion around opportunities for meetings with consumer groups and members. It was noted that some advisory committees have open meetings with the public to exchange views and Members were asked for their thoughts on this. Members stated that as they were a scientific advisory committee and not the policy makers this sort of engagement may not be appropriate and may be perceived as an opportunity to lobby by some. Members were informed that there is already a formal mechanism for consumers to input into Agency policy in the form of the consumer stakeholder forum. The Secretariat was asked to consider how feedback from these groups could be relayed to the Committee. One suggestion was for the consumer representative to report back. The Secretariat agreed to give this consideration.

Action: Secretariat

56. The Chair thanked Members for their attendance and thanked those who had put together topics for discussion.

Close