

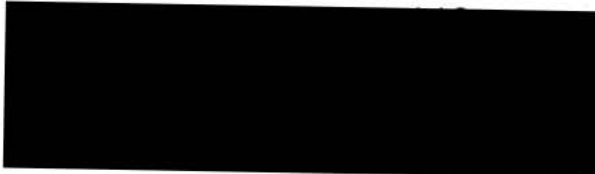
ENTERED IN
DATABASE

ACKNOWLEDGED

25 September 2001

**To: Project Manager – Proposal P236
ANZFA Submission for the development of joint
food regulation for sport foods**

From:



QUESTION

Are these policy principles appropriate to underpin the development of joint regulation? Why or why not?

The current policy principles would need further clarification.

The overall aims and objectives make sense and would work providing the claims are based on scientific evidence. There would need to be a regulatory body appointed and sufficiently heavy penalties imposed to deter industry from making unsubstantiated claims for adding inappropriate levels of other ingredients.

We feel it is important that the development of these regulations is based on the first objective of "the protection of public health and safety".

Sports foods need to be clearly labelled as such and the 'truth in labelling' should apply to pictorial references and illustrations. A further consideration for these foods is a requirement to place a comment as often seen in the dieting and weight loss industry referring to uncommon and unusually results, and warning claims should be considered. The statements made should be treated in the same or similar manner to health claims. Children and non active food consumers must be aware of the limitation of consuming such food specially in terms of toxicity and excess energy intake from consuming sports foods with out increased physical activity.

Would the level of sports foods that fail to comply with the current regulations decrease if greater efforts were made to manufacturers to comply or a limit of the number of warnings they received? That is, how many manufacturers actually know their products do not comply with the regulations, especially imported products.

QUESTIONS

Which is your preferred regulatory option for regulating sports foods and why?

OPTION 2

Full revised regulatory provisions within Volume 2; proceed with NZMOH proposal to exclude foods from the scope of NZDSR; and ultimately repeal relevant provisions of Volume 1 and NZFR.

Reasons for preferred option 2 includes:

- 1) Product consistency
- 2) Product safety
- 3) Good working relationship with industry
- 4) A formulation expectation from consumer
- 5) Identification of banned substances
- 6) Assistance with marketing

Recognises category of sports foods, therefore a definition of a sports food is important.
Allows for the establishment of safety limits that can allow for some industry self-regulation.

For each option, what are the potential costs and/or benefits to you as a stakeholder?

OPTION 1

Cost the Status Quo ensures continued discrepancy between Australia and New Zealand food regulations pertaining to sports foods and the confusion remains, as well as barriers to trade.

OPTION 3

Cost increased risk of continued discrepancies due to voluntary code of practice.
Could lead to a lack of credibility and trust in manufacturers.

OPTION 4

Cost prevents the legal manufacturing of sports products.

QUESTIONS

Is the purpose of a Sports Food standard appropriately encompassed by the opening paragraphs in Standard 2.9.4?

Rewritten to state:

'This standard defines and regulates the composition and labelling of foods specially formulated to assist sports people in achieving specific nutritional or physiological performance goals that has been scientifically proven. Such foods are intended as supplements to a diet rather than for use as the sole or principal source of nutrition.

Due to the particular physiological demands of sports people, this standard provides for the addition to formulated supplementary sports foods of certain micronutrients and other ingredients which are not permitted to be added to other foods and with defined safe upper limits. This means that such products are not suitable for consumption by children, or others with specialised medical nutrient needs (kidney disease, liver disease) while other groups may require nutritional advice (Diabetics, PKU, pregnant women, CHD etc).

Should foods be formulated for reasons beyond physiological demands?

NO but it is important to never ignore the placebo effect.

Should a sports food standard focus solely on the needs of sporting people or consider possible consumption by other groups?

It should have sporting people as the focus but have an awareness of other persons who may use these products and should be safe for all to consume. All added ingredients should be included on the label. (see above)

What other key features may need to be addressed?

- 1) Accessibility – where a product is sold (is it suitable to be sold in school canteens etc)? sold to children and what age group?**
- 2) When does a food become a drug? – the issue of functional food. Is there a need to label functional food for sports people? Eg addition of colostrum for gut function?**

Should a sports food standard control the representation of sports food that might inappropriately make them appeal to children?

NO – this is parental responsibility, however there should be a minimum size of print to ensure adequate attention is drawn to the label warning/ingredients/ medical conditions of concern or where specialised advice is required –pregnancy etc.

What is the most appropriate definition of a sports food?

A ‘food’ taken orally that is specially formulated to assist sports people in achieving specific nutritional or physiological performance goals that has been scientifically proven.

QUESTION

If the definition of ‘nutritive substance’ is applied to this standard, is it necessary for a definition of sport foods to exclude single- ingredient foods? If so why?

NO, all other ingredients would become ‘functional sports foods’. The only nutritional ergogenic aids with clear scientific support at the present time are (bicarbonate, caffeine and creatine). All others would not be permitted at present.

With reference to the definition ‘nutritive substance’ The Concise English Dictionary defines ‘nutritional purpose’ as:

Nutrition – ‘The function or process of promoting the growth of organic bodies’

Nutritional – ‘Affording nourishment, efficient as food’

Purpose – ‘To prove or advocate a view; relevantly’

Proposed definitions for 'dietary supplement' or 'sports supplement' (Burke & Read, 1993):

- 1) contains nutrients in amounts generally similar to the levels specified in the recommended dietary intakes or allowances (RDI/RDAs), and similar to the amounts found in food;
- 2) provides a convenient or practical means of ingesting these nutrients, particularly in the athletic setting;
- 3) allow or aid the achievement of known physiological or nutritional requirements of an athlete;
- 4) contains nutrient(s) in large amounts for use in treating a known deficiency;
- 5) has been shown to meet a specific physiological or nutritional need that improves sports performance; and
- 6) is generally acknowledged as a valuable product by sports medicine and science experts.

(see enclosed Table 17.2 'dietary supplements and their use by athletes', Chapter 17, page 461, *Clinical Sports Nutrition*, 2nd Ed, Burke & Deakin, 2000).

At present in the initial assessment report (page 3, 2nd paragraph, line 6) 'Electrolytes drinks have remained outside of this review as they continued to be encompassed under standard 2.6.2 Non-alcoholic beverages and brewed soft drinks, in Vol 2 of the code'.

In our opinion sports drinks, sports water etc should fall under sports foods and comply with those regulations. Under the heading 'Sports beverages' – primary role to supply fluid and electrolytes with or without carbohydrate (CHO).

It is our suggestion that the Table 17.2 be altered to:

Sports Beverages

- Sports drink
- Sports water

Sports Gel

- non-caffeine
- caffeine

High-CHO supplement (Aus regs = 10-25% CHO) (NZ regs = >15% CHO)

High-Protein supplement (suggested that 'if more than 30% of the energy yield of the supplement is derived from protein, the label must include a statement to the effect that the product is a high protein food and should be used for special protein needs eg. growth, vegetarian, novice athlete etc. And include health warning re: renal etc).

Liquid Meal supplement/ Energy supplement

Sports Bar

- High-CHO bar
- High-Protein bar
- High-Fat bar

QUESTIONS:

Should the definition of nutritive substances be clarified to extend beyond a potentially narrow definition of nutritional purpose for the purposes of permitting added substances to sports food?

NO (it would be like including drugs in food without scientific proof of safety).

Should more nutritive (and other) substances be permitted additions to sports foods?

NO (scientific theory should not be touted or accepted as evidence or practice until verified by actual research – ideas that make it to supplemental trial should be based on sound logic)

Questions to ask include:

- 1) Will oral ingestion of the compound increase concentrations at the sites that are critical?
- 2) Does the present level of compound fall below the critical level for optimal metabolism?
- 3) Is this reaction the rate limiting step in metabolism or are other reactions setting the pace?

Is there a need to reappraise ANZFA's previous approach to risk assessment, particularly in the absence of evidence?

Yes, there are no long-term studies into the short-term, or long-term effects either harmful or beneficial of taking supplements.

Are there particular botanicals used in sports foods which are not prohibited or restricted under standard 1.4.4, but which should be specifically regulated under standard 2.9.4?

Spirulina, Gurana, Kola-nut, St. Johns wort, Echinacea, Gingko and others.

It is our opinion that these botanicals MUST show proven nutritional ergogenic effect NOT for health benefit.

Are there particular botanicals or other ingredients, which are currently added to sports foods, but are prohibited under volume 2 of the FSC (standard 1.4.4) that should be re-addressed?

Ma Huang – Ephedra based compound, Tribulus, etc. The re-addressing should be done in compliance with NZ Drug Agency and IOC.

Is caffeine an appropriate ingredient for sports foods?

Yes – caffeine is a proven nutritional ergogenic aid that enhances sport performance in endurance events. Caution is required for sensitive individuals, people on medication etc and the product should be labelled as IOC restricted and what sources the caffeine comes from.

QUESTIONS:

Is the labelling of products with general advisory statements that warn against consumption by vulnerable groups an appropriate risk management strategy for sports foods?

YES but should state that those who are under 15 years of age, pregnant or breastfeeding, or with a medical condition should consult a sports dietitian or sports physician, (or SSNZ level 3 exercise physiologist) (before consuming these products.

Are the current advisory statements that warn against the consumption by children less than 15 years and pregnant and lactating women, and which apply to all other sports foods, appropriate for managing risk?

NO – need to add other medical conditions (diabetes, CHD, Renal, liver, medication interactions, etc).

Should such statements, if continued, be more tailored to particular compositional criteria?

NO – general statement should be included on all products.

Are there other substances, specific to sports foods, for which advisory or warning statement may be required?

Creatine – young children (the concern of damage to long bones)

Caffeine – sensitive individuals, those on medication etc.

Sports drinks – tooth decay (does not cause *per se* but continued contact with teeth is a problem)

Glucose – hypoglycaemia

Protein and Creatine – kidney disease

What labelling statements are considered important for consumers to enable informed choice?

- 'to be used in conjunction with exercise'
- 'designed for use with appropriate exercise'

Should sports foods be exempt from standard 1.2.7 that proposes to regulate performance-enhancing claims, and therefore require prior submission of scientific substantiation before being used? If so, why?

They should not be exempt from standard 1.2.7. Prior scientific evidence is required to protect public health and safety. There are currently limited studies into the long-term effects for a number of the nutritive substances and other things that are added to sports food. We currently do not know the safety of these products and we should be cautious in advising athletes and other members of the public from taking them long-term.

In addition to this there is currently 1 nutrition claim allowed on food packaging – folate and neural tube defects. This is allowed due to the large amount of scientific literature showing the advantage of taking folate during the first trimester of pregnancy. Surely sports foods should come under the same strict criteria.

Should be treated in the same manner as a health claim and be accountable for the same establishment (i. e. proof) procedures.

Should sports foods be exempt from the nutrition information requirements of standard 1.2.8? If so, why?

We feel sports foods should come under the same labelling criteria as everyone else. Consistence in labelling for all foods where possible.

Is there a need for permitted labelling statements to be underpinned by compositional criteria for particular types of sports foods such as high-protein, high-CHO, and energy supplements?

Yes the labelling statements should have to meet certain criteria to call themselves particular types of sports foods.

Are there any other general labelling issues that need to be considered for sports foods?

Absence of evidence

Pictures should include movement (not just body part shots)

Claims should be dependent on classification

Full contact details of manufacturer must be included.

Sports related use –before, during, after activity could be considered.

Key issues for use of sports foods include:

Safety for all

Do they work/benefit

Reliability of product

Backed by scientific research/study

Should be tested similar to drugs (clinical trials to support claims if none exist)

Harmonise with Australia.