REVIEW OF THE STANDARD FOR FOLLOW-UP FORMULA

(CODEX STAN 156-1987)

(Chaired by New Zealand and co-chaired by Indonesia and France)

Second Consultation Paper

Submitters Response Form

International Baby Food Action Network (IBFAN)

June 2015

Please respond by 10th July 2015

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Please provide your responses to the first consultation paper in the response form below. Note, to fill in a check box please right click on the box and select “Properties”, under the “Default Action” sub-heading, select “Checked”.

# DESCRIPTION OF FOLLOW-UP FORMULA (SECTION 2)

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| STRUCTURE | |
| Two approaches were proposed by eWG members for the structure of section 2. Description, please indicate your preferred approach: | |
| Should the structure of section 2. Description be; | |
| **X** Aligned with the Codex IF std  2. DESCRIPTION  2.1 Product Definition  2.1.1 Follow-up Formula means a food intended…  2.1.2 Follow-up Formula is a food processed by physical means…  2.2 Other Definition  2.2.1 The term *infant* means…DELETE  2.2.2 The term *young child* means…  Move current FUF definitions to other sections:  *2.2 moved to 3.1 Essential composition*  2.2 Follow-up formula is a food prepared from the milk…  *2.4 mover to 9.5.1 Information for Use*  2.4 Follow-up formula when in liquid form, is suitable for use…. | ☐ Modified  2. DESCRIPTION  2.1 Product Definition  2.1.1 Follow-up Formula means a food intended…  2.1.2 The term *infant* means…  2.1.3 The term *young child* means…  2.2 Product Description  2.2.1 Follow-up formula is a food prepared from the milk…  2.2.2 Follow-up Formula is a food processed by physical means…  2.2.3 Follow-up formula when in liquid form, is suitable for use…. |
| Please provide comment and justification for your answers if you support a different approach.  The composition of milks marketed as infant formulas are suitable for infants from 0 to 12 month and therefore there is no need to set additional requirements for ages 6 to 12 months. For guidance to member states, the least confusing is to have an IF standard for 0 to 12 months hence to align with the IF standard would negate the necessity for a separate standard for older infants. | |

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| DEFINITION 2.1.1  *Current Codex Standard for Follow-up Formula text:*  ***Follow-up formula*** means a food intended for use as a liquid part of the weaning diet for the infant from the 6th month on and for young children. |
| Please comment on whether you support a broad definition for follow-up formula, or one definition which incorporates separate product categories. See the following examples; a) Follow-up formula means a food intended for use as ……………. OR b) Follow-up formula means a food used by:  - [older] infants from 6 months (followed by role and purpose in the diet)……. and,  - young children (followed by role and purpose in the diet). |
| IBFAN proposes the definition to read:  Follow-up formula is a breastmilk substitute, intended for the use of the liquid part of the complementary feeding diet, it is not necessary for the growth and development of young children. Infant formula is suitable for infants from 0 to 12 months and beyond. |
| The Chairs propose that *’from the 6th month’* be replaced with *‘from 6 months’* within the definition for follow-up formula. If you do not support this approach, please provide comment and justification for your answers. |
| IBFAN does not support either approach. Fufs, like IF can be used as a breastmilk substitute after 12 months and therefore this approach is moot. |
| The Chairs propose that the term ‘weaning diet’ is not used in the definition of follow-up formula. If required, it should be replaced with ‘complementary feeding’. If you do not support this approach, please provide comment and justification for your answers |
| IBFAN agrees that the term “weaning” not be used. |
| The Chairs propose inclusion of the terminology ***progressively diversified diet*** in the definition for follow-up formula. If you do not support this approach, please provide comment and justification for your answers |
| IBFAN proposes that the definition includes ‘’it is not necessary for the growth and development of young children. |

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| DEFINITION 2.1.2 & 2.1.3  2.1.2 The term ***infant*** means a person of not more than 12 months of age  2.1.3 The term ***young child*** means persons from the age of more than 12 months up to the age of three years (36 months) |
| Based on eWG responses and to retain consistency with other relevant Codex texts, the Chairs propose retaining the current definition 2.1.2 and 2.1.3 in their current drafting. Please provide comment and justification for your answers if you do not support this approach. |
| IBFAN agrees to these definitions. |

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| OLDER INFANT |
| The Chairs propose *either* including a definition for ‘older infant’ (as defined in the Guidelines for Formulated Complementary Foods for Older Infants and Young Children (CAC/GL 8-1991, Rev. 2013) in the Follow-up Formula Standard, OR including a reference to/qualifier of ‘older infant’ within the definition 2.1.1 of follow-up formula. Please select your preferred approach. |
| It is the position of IBFAN that IF can be used for infants 0 to 12 months and beyond hence this definition to qualify older infant is not necessary. |

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| DEFINITION 2.1.4  *Current Codex Standard for Follow-up Formula text:*  *The term calorie means a kilocalorie (kcal). 1 kilojoule (kJ) is equivalent to 0.239 calories (kcal)* |
| Based on eWG responses, the Chairs propose deleting definition 2.1.4 related to the term calorie. Please provide comment and justification if you do not support this approach |
| IBFAN agrees. |

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| DEFINITION 2.2  *Current Codex Standard for Follow-up Formula text:*  ***Follow-up formula*** is a food prepared from the milk of cows or other animals and/or other constituents of animal and/or plant origin, which have been proved to be suitable for infants from the 6th month on and for young children. |
| Based on eWG responses to align terminology, the Chairs propose the following draft text as a starting point. The Chairs propose including a comma after the wording ‘other animals’ so that it is clear that it is the other ingredients that need to have been to be suitable (not the milk base).  ***Follow-up formula*** *is a ~~food prepared from the milk of cows or other animals and/or other constituents of animal and/or plant origin,~~ [product based on milk of cows or other animals or a mixture thereof[,] and/or other ingredients] which have been proved to be suitable [and nutritionally adequate] for [the intended age range]. ~~infants from the 6th month on and for young children.~~*  Please provide comment on the above suggested wording as well as; should any additional wording from the equivalent statement from the Infant Formula Standard be incorporated into the definition for follow-up formula, should the concept of ‘safety’ be captured in the definition, should all ingredients/additives in follow-up formula be gluten free, and should the statement include wording around ‘supporting growth and development’? |
| IBFAN proposes the following wording:  Follow-up formula is a breastmilk substitute manufactured from ingredients which have been independently proven to be suitable for use as the liquid part of the complementary feeding diet of young children. |

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| DEFINITION 2.3  *Current Codex Standard for Follow-up Formula text:*  ***Follow-up formula*** is a food processed by physical means only so as to prevent spoilage and contamination under all normal conditions of handling, storage and distribution. |
| Based on eWG responses to align terminology, the Chairs propose amending this definition to align with the equivalent statement within point 2.1.1 of the Infant Formula Standard.  ***[Follow-up formula*** *is so processed by physical means only and so packaged as to prevent spoilage and contamination under all normal conditions of handling, storage and distribution in the country where the product is sold]*  Please provide comment on the above suggested wording. |
| IBFAN agrees. |

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| DEFINITION 2.4  *Current Codex Standard for Follow-up Formula text:*  ***Follow-up formula,*** when in liquid form, is suitable for use either directly or diluted with water before feeding, as appropriate. In powdered form it requires water for preparation. The product shall be nutritionally adequate to contribute to normal growth and development when used in accordance with its directions for use |
| The Chairs propose that the information contained within definition 2.4 of the Follow-up Formula Standard be moved to Section 9.5 with consideration of the appropriate wording to be given at the time that that section 9.5 is reviewed. If you do not support this approach, please provide comment and justification for your answers. |
| IBFAN agrees with this approach and notes that powdered fufs will need to comply with the Codex Code of Hygienic Practice for Powdered Formulae for Infants and Young Children and the Guidelines for the safe preparation, storage and handling of powdered infant formula. |

# ESSENTIAL COMPOSITION

In your responses to the following section please provide scientific justification for your response and where possible, references for the scientific rationale.

Our positions are highlighted in yellow

## Macronutrients

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| Protein | | | | | |
| No consensus was reached on the establishment of protein requirements. Please provide scientific rationale to support your preferred value: | | | | | |
| Protein  Unit  g/100 kcal  g/100 kJ | Minimum  [1.8] [1.7] [1.65]  [0.45][0.41][0.39] | | Maximum  [3.0] [2.5] [3.5]  [0.7] [0.6] [0.8] | | GUL  -  - |
| Minimum | | | | | |
| ☐ Codex IF std  1.8 g/ 100 kcal  0.45 g/ 100 kJ | | ☐  1.7 g/100 kcal  0.41 g/100 kJ | | ☐  1.65 g/100 kcal  0.39 g/100 kJ | |
| If supporting a value other than the Codex IF std please provide supporting scientific evidence  We also support the inclusion of different minimum values for soy protein in line with those provided by EFSA (2014) | | | | | |
| If supporting a value other than the Codex IF std please provide comment on how the energy, total fat, and carbohydrate content requirements should be amended to accommodate this. | | | | | |
| Maximum | | | | | |
| ☐ Codex IF std  3.0 g/ 100 kcal  0.7 g/ 100 kJ | | ☐ EFSA/IEG  2.5 g/100 kcal  0.6 g/100 kJ | | ☐  3.5 g/100 kcal  0.8 g/100 kJ | |
| Please provide rationale:  We also support the inclusion of different maximum values for soy protein and protine hydrolysates in line with those provided by EFSA (2014) | | | | | |
| If supporting a value other than the Codex IF std please provide comment on how the energy, total fat, and carbohydrate content requirements should be amended to accommodate this. | | | | | |

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| Protein Footnote 2 | |
| 2For the purpose of this standard the calculation of the protein content of the final product ready for consumption should be based on N x 6.25, unless a scientific justification is provided for the use of a different conversion factor for a particular product. The protein levels set in this standard are based on a nitrogen conversion factor of 6.25. The value of 6.38 is generally established as a specific factor appropriate for conversion of nitrogen to protein in other milk products, and the value of 5.71 as a specific factor for conversion of nitrogen to protein in other soy products.  Or  2For the purpose of this standard the calculation of the protein content of the final product ready for consumption should be based on N x 6.25 [or as specified in a relevant Codex commodity Standard or the Codex Recommended Methods of Analysis and Sampling] The protein levels set in this standard are based on a nitrogen conversion factor of 6.25. | |
| ☐ Retain as footnote 2 in the Codex IF std | ☐ Amend to reflect the use of other Codex texts |
| *Please provide rationale:* | |

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| Footnote 3 | |
| Taking into account comments from the eWG, do you support the removal of the sentence related to ratios of amino acids?  3 For an equal energy value the formula must contain an available quantity of each essential and semi-essential amino acid at least equal to that contained in the reference protein (breast-milk as defined in Annex I); nevertheless for calculation purposes, the concentrations of tyrosine and phenylalanine may be added together. [~~The concentrations of methionine and cysteine may be added together if the ratio is less than 2:1; in the case that the ratio is between 2:1 and 3:1 the suitability of the formula has to be demonstrated by clinical testing.]~~ | |
| ☐ Yes | ☐ No |
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| Do you support the inclusion of Annex I as the reference protein for the compositional requirements for follow-up formula for older infants? | |
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| Footnote 4 |
| 4 Isolated amino acids may be added to ~~Infant F~~ formula only to improve its nutritional value for infants. Essential and semi-essential amino acids may be added to improve protein quality, only in amounts necessary for that purpose. Only L-forms of amino acids shall be used. |
| Do you support the inclusion of footnote 4 as amended slightly by the Chairs? |
| Change “infants” to “young children” |

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| Footnote 5 |
| The following wording is proposed to improve the clarity of the footnote:  5 The minimum value applies to cows’ [and/or other animals’] milk protein. ~~For infant formula based on non-cows’ milk protein other minimum values may need to be applied~~. For infant formula based on soy protein isolate, a minimum value of [2.25 g/100 kcal (0.5 g/100 kJ)] applies.  Do you support the modified footnote? Noting that the minimum value may change dependent on the outcome of the minimum protein content of formulas based on cows’ milk protein. |
| IBFAN supports this – wording needs to say follow up formula not infant formula.  Can there be an additional sentence that says ‘minimum values for follow up formula made from other protein hydrolysates should be established based on independent clinical evaluation. |

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| Footnote 6 |
| 6 ~~Infant~~ [Formula based on non-hydrolysed milk protein containing less than [2 g protein/100 kcal] and] ~~infant~~ [formula based on hydrolysed protein containing less than [2.25 g protein/100 kcal] should be clinically evaluated].  Do you support the inclusion of the amended footnote 6? If no, please provide rationale for the modifications proposed. |
| IBFAN suggests:  Follow up formula based on non-hydrolysed milk protein containing less than 1.8g protein/100 kcal, follow up formula based on hydrolysed protein containing less than 2.25 g protein/100 kcal and any follow up formula based on other protein hydrolysates should be independently clinically evaluated for safety and suitability. |

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| Total Fat | | | | | | | | |
| The majority of the eWG members support the option to align the total fat requirements of the Codex Infant and Follow-up Formula standards. Do you support the the Total fat minimum and maximum values? | | | | | | | | |
| Total fat7,8  Unit  g/100 kcal  g/100 kJ | | | | Minimum  4.4  1.05 | | | Maximum  6.0  1.4 | GUL  -  - |
|  | | | | | | | | |
| ☐ | | Yes | | | ☐ | No, if no please provide scientific justification | | |
| The majority of the eWG members support the option to align the total fat requirements of the Codex Infant and Follow-up Formula standards. Do you support alignment of the Total fat footnotes regarding lauric and myristic acid, and erucic acid?   * Lauric acid and myristic acids are constituents of fats, but combined shall not exceed 20% of total fatty acids. * The erucic acid content shall not exceed 1% of total fatty acids. | | | | | | | | |
| ☐ | | Yes | | | ☐ | No, if no please provide scientific justification | | |
| The majority of the eWG members support the option to align the total fat requirements of the Codex Infant and Follow-up Formula standards. Do you support alignment of the Total fat footnotes regarding use of commercially hydrogenated fats, and trans fat?   * Commercially hydrogenated oils and fats shall not be used in ~~infant~~ follow-up formula * The content of trans fatty acids shall not exceed 3% of total fatty acids. Trans fatty acids are endogenous components of milk fat. The acceptance of up to 3% of trans fatty acids is intended to allow for the use of milk fat in ~~infant~~ follow-up formulae. | | | | | | | | |
| ☐ | Yes | | | | ☐ | No, if no please provide scientific justification | | |
| The majority of the eWG members support the option to align the total fat requirements of the Codex Infant and Follow-up Formula standards. Do you support alignment of the Total fat footnotes regarding phospholipids?   * The total content of phospholipids should not exceed 300 mg/100 kcal (72 mg/100 kJ). | | | | | | | | |
| ☐ | | | Yes | | ☐ | No, if no please provide scientific justification | | |

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| Linoleic and α-linolenic acid | | | |
| No eWG consensus was reached on the minimum and GUL requirements for LA. Please provide scientific rationale to support your preferred value:  Linoleic acid | | | |
| Unit | Minimum | Maximum | GUL |
| mg/100 kcal | [300] [500] | - | [1400] [1200] |
| mg/100 kJ | [70] [120] | - | [330] [300] |
| ☐ Codex IF std  300 mg/100 kcal  70 mg/100 kJ | | ☐ EFSA  500 mg/100 kcal  120 mg/100 kJ | |
| *Please provide your rationale:* | | | |
| No eWG consensus was reached on the establishment of a ratio of LA:ALA in line with the Codex Standard for Infant Formula, or the establishment of a maximum requirement for ALA.  Please provide scientific rationale to support your preferred approach: | | | |
| ☐ Codex IF std  Ratio linoleic/α-linolenic acid  Min 5:1  Max 15:1 | | ☐ EFSA  ALA max:  100 mg/100 kcal  24 mg/100 kJ | |
| *Please provide your rationale:* | | | |
| Docosahexanoic acid & Arachidonic acid | | | |
| Several eWG members considered that DHA and ARA compositional requirements should be included in the Standard. Do you consider that these fatty acids should be considered optional ingredients, as per the Codex Infant Formula Standard, or mandated? Please provide scientific rationale to support your preferred approach. | | | |
| ☐ Codex IF std  Optional addition | | ☐ Mandated | |
| *Please provide your rationale:*  These should remain optional as there is no evidence for their efficacy in improving the health and well-being of children.  The presence should be indicated in the nutrition panel and the standard should forbid any claim.  Given the lack of post-market surveillance on formulas containing DHA, the weakness and inconsistency of the available evidence,  and the evidence from the USA that some babies cannot tolerate DHA  - and a warning to this effect should be prominently displayed on the label.  NOTE: Reports obtained after a Freedom of Information request to the US FDA: *Replacing mother - Imitating Breast Milk in the Laboratory.* [www.cornucopia.org](http://www.cornucopia.org/) FDA Q&A: [www.fda.gov/Food/FoodSafety/Product-](http://www.fda.gov/Food/FoodSafety/Product-) FDA letter regarding the lack of post-market surveillance. | | | |
| If you support inclusion of DHA compositional requirements to the Codex Standard for follow-up formula for older infants (either as an optional or essential addition), do you support the inclusion of provisions for ARA and EPA? Please provide scientific rationale to support your preferred approach. | | | |
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| Total Carbohydrates | | | |
| The majority of the eWG members support the option to align the total carbohydrate requirements of the Codex Infant and Follow-up Formula standards. However this may need to be amended if the protein requirements between the two standards differ. | | | |
| Total Carbohydrates9)  Unit  g/100 kcal  g/100 kJ | Minimum  9.0  2.2 | Maximum  14.0  3.3 | GUL  -  - |
| If consensus is reached to amend the Energy, Protein and Total Fat minimum and maximum levels to those established in the Codex Standard for Infant Formula, do you support alignment of the two standards regarding the minimum and maximum carbohydrate content? | | | |
| ☐ Yes | | ☐ No | |
| *Please provide your rationale:* | | | |
| If the Codex Standard for Infant Formula minimum and maximum values for Energy, Protein, or Total Fat are not adopted, do you support reviewing the minimum and maximum carbohydrates based on the residual energy content? | | | |
| ☐ Yes | | ☐ No | |
| *Please provide your rationale:* | | | |

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| Carbohydrate Footnote | | |
| In addition to stating that lactose should be a preferred carbohydrate, should a minimum lactose content of 4.5g/100 kcal be specified, unless a product is “lactose free” or more than 50% of the protein is from soy protein isolate? | | |
| ☐ Yes, support minimum lactose level | ☐ No do not support minimum lactose level | |
| Lactose should be the preferred carbohydrate in follow up formula, as this is a breastmilk substitute and lactose is the predominant carbohydrate in breastmilk. | | |
| Should glucose polymers be specified as the preferred carbohydrates in formula based on cows’ milk protein and hydrolysed protein? Or should the addition of glucose be limited only to formula made from protein hydrolysates? | | |
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| ☐ Glucose polymers considered preferred carbohydrate in formula based on cows’ milk protein and hydrolysed protein | | ☐ Addition of glucose limited to formula made from protein hydrolysates |
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| The eWG support that the addition of precooked and/or gelatinized starches that are gluten-free nature may be added to follow-up formula.  Do you support that a limit to the percentage of total carbohydrates should be established? | | |
| ☐ addition up to 30% total carbohydrates | ☐ unrestricted addition within maximum total carbohydrate limits | |
| IBFAN agrees with the assessment by EFSA. We would like to see this extended to:  Starches should not be added in concentrations higher than 2 g/100 ml (2.9-3.3 g/100 kcal (0.7-0.8 g/100 kJ)) and that they should not constitute more than 30 % of total carbohydrates. | | |
| Some eWG members recommended that a maximum limit should be established for the addition of sucrose and fructose.  Do you support the inclusion of a maximum limit for the addition of sucrose and fructose, and if so that the sum of sucrose and fructose should not exceed 20% of total carbohydrates? | | |
| ☐ Yes | ☐ No | |
| IBFAN supports the EFSA conclusion that  The maximum concentration should be ≤ 20 % of total carbohydrates for sucrose and ≤ 2 g/100 kcal (≤ 0.5 g/100 kJ) for glucose. | | |
| If your response to the above question was yes, do you think that the sum of sucrose and fructose should also include sugar from honey if treated to destroy spores of *C. botulinum*? | | |
| ☐ Yes | ☐ No | |
| Since it is problematic to include honey as an ingredient in any food for infants under 12 months of age as this is likely to be out of line with any national guidance, and therefore confusing to caregivers, especially if the use of these products spill over to a younger age. The inclusion of honey treated to destroy spores of *C. Botulinum* should only be used and be restricted to products marketed for infants over 12 months of age and no claims should be allowed for the use of this as an alternative carbohydrate source. | | |

## Fat-soluble Vitamins

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| Vitamin A | | | | | | | |
| No consensus was reached on the establishment of a minimum or maximum vitamin A value. Please provide scientific rationale to support your preferred value: | | | | | | | |
| Vitamin A10)  Unit  µg RE/100 kcal  µg RE/100 kJ | | Minimum  [75] [70] [60]  [18] [16.7] [14] | | Maximum  [225] [180] [140] [114]  [54] [43] [33.4] [27.2] | | | GUL  -  - |
| 10) expressed as retinol equivalents (RE).  1 µg RE = 3.33 IU Vitamin A= 1 µg all trans-retinol. Retinol contents shall be provided by preformed retinol, while any contents of carotenoids should not be included in the calculation and declaration of vitamin A activity. | | | | | | | |
| Minimum | | | | | | | |
| ☐ Codex FUF std  75 µg RE/100 kcal  18 µg RE/100 kJ | | | ☐ EFSA  70 µg RE/100 kcal  16.7 µg RE /100 kJ | | ☐ Codex IF std  60 µg RE/100 kcal  14 µg RE/100 kJ | | |
| *Please provide your rationale:*  In general we would prefer there to be as much consistency between the Codex IF and FuF standard as possible as these products are both breastmilk substitutes. The EFSA review based their recommendation on equivalence with breastmilk in the first 6 months of life, but as FuF for those over 12 months of age and are given alongside an increasingly diversified diet then a slightly lower value as in Codex IF standard is acceptable. | | | | | | | |
| Maximum | | | | | | | |
| ☐ Codex FUF std  225 µg RE/100 kcal  54 µg RE/100 kJ | ☐ Codex IF std  180 µg RE/100 kcal  43 µg RE/100 kJ | | | ☐  140 µg RE/100 kcal  33.4 µg RE/100 kJ | | ☐  114 µg RE /100 kcal  27.2 µg RE/100 kJ | |
| *Please provide your rationale:* | | | | | | | |

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| Vitamin D | | | | | |
| No consensus was reached on the establishment of a minimum or maximum vitamin D value. Please provide scientific rationale to support your preferred value: | | | | | |
| Vitamin D3 11)  Unit  µg/100 kcal  µg/100 kJ | Minimum  [1] [2]  [0.25] [0.48] | | Maximum  [2.5] [3.0] [4.5]  [0.6] [0.75] [1.1] | | GUL  -  - |
| 11) Calciferol. 1 µg calciferol = 40 IU vitamin D | | | | | |
| Minimum | | | | | |
| ☐ Codex IF std  1 µg /100 kcal  0.25 µg /100 kJ | | | ☐ EFSA  2 µg /100 kcal  0.48 µg /100 kJ | | |
| *Please provide your rationale:* | | | | | |
| Maximum | | | | | |
| ☐ Codex IF std  2.5 µg /100 kcal  0.6 µg /100 kJ | | ☐ Codex FUF std  3.0 µg /100 kcal  0.75 µg /100 kJ | | ☐ IEG  4.5 µg /100 kcal  1.1 µg /100 kJ | |
| *Please provide your rationale:*  This is complicated since there may be a number of other initiatives in place to ensure adequacy of Vitamin D among young children in many countries and a rationale based on IF may not be the most appropriate. We think this needs further discussion, but would support in general the use of the Codex IF standard for consistency. | | | | | |

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| Vitamin E | | | |
| No consensus was reached on the establishment of a minimum vitamin E value. Please provide scientific rationale to support your preferred value: | | | |
| Vitamin E  Unit  mg α-TE /100 kcal  mg α-TE /100 kJ | Minimum  [0.5] [0.6]  [0.12] [0.14] | Maximum  -  - | GUL  5  1.2 |
|  | | | |
| *Minimum* | | | |
| ☐ Codex IF std  0.5 mg α-TE /100 kcal  0.12 mg α-TE /100 kJ | | ☐ EFSA  0.6 mg α-TE /100 kcal  0.14 mg α-TE /100 kJ | |
| *Please provide your rationale:* | | | |

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| Vitamin K | | | |
| No consensus was reached on the establishment of a minimum vitamin K value. Please provide scientific rationale to support your preferred value: | | | |
| Vitamin K  Unit  µg/100 kcal  µg/100 kJ | Minimum  [4] [1]  [1] [0.24] | Maximum  -  - | GUL  27  6.5 |
|  | | | |
| *Minimum* | | | |
| ☐ Codex IF std  4 µg /100 kcal  1 µg /100 kJ | | ☐ EFSA  1 µg /100 kcal  0.24 µg /100 kJ | |
| *Please provide your rationale:* | | | |

## Water Soluble Vitamins

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| Thiamin | | | | | | |
| No consensus was reached on the establishment of a minimum thiamin value. Please provide scientific rationale to support your preferred value: | | | | | | |
| Thiamin  Unit  µg/100 kcal  µg/100 kJ | | Minimum  [60] [40]  [14] [10] | | | Maximum  -  - | GUL  300  72 |
|  | | | | | | |
| *Minimum* | | | | | | |
| ☐ | Codex IF std  60 µg /100 kcal  14 µg /100 kJ | | ☐ | Codex FUF std/ EFSA  40 µg /100 kcal  10 µg /100 kJ | | |
| *Please provide your rationale:* | | | | | | |

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| Riboflavin | | | | | | |
| No eWG consensus was reached on the establishment of a minimum riboflavin value. Please provide scientific rationale to support your preferred value: | | | | | | |
| Riboflavin  Unit  µg/100 kcal  µg/100 kJ | | Minimum  [80] [60]  [19] [14] | | | Maximum  -  - | GUL  500  119 |
|  | | | | | | |
| *Minimum* | | | | | | |
| ☐ | Codex IF std  80 µg /100 kcal  19 µg /100 kJ | | ☐ | EFSA  60 µg /100 kcal  14 µg /100 kJ | | |
| *Please provide your rationale:* | | | | | | |

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| Niacin | | | | | | |
| No eWG consensus was reached on the establishment of a minimum niacin value. Please provide scientific rationale to support your preferred value in square brackets: | | | | | | |
| Niacin\*  Unit  µg/100 kcal  µg/100 kJ | | Minimum  [300] [400]  [70] [100] | | | Maximum  -  - | GUL  1500  360 |
| \*Niacin refers to preformed niacin | | | | | | |
| *Minimum* | | | | | | |
| ☐ | Codex IF std  300 µg /100 kcal  70 µg /100 kJ | | ☐ | Codex FUF std/ EFSA  400 µg /100 kcal  100 µg /100 kJ | | |
| *Please provide your rationale*: | | | | | | |

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| Vitamin B6 | | | | | | |
| No eWG consensus was reached on the establishment of a minimum Vitamin B6 value. Please provide scientific rationale to support your preferred value in square brackets: | | | | | | |
| Vitamin B6\*  Unit  µg/100 kcal  µg/100 kJ | | Minimum  [35] [20]  [8.5] [4.8] | | | Maximum  -  - | GUL  175  45 |
| ***[\*****Formulas should contain a minimum of 15**µg Vitamin B6 per gramme of protein.]* | | | | | | |
| *Minimum* | | | | | | |
| ☐ | Codex IF std  35 µg /100 kcal  8.5 µg /100 kJ | | ☐ | Codex FUF std/ EFSA  20 µg /100 kcal  4.8 µg /100 kJ | | |
| *Please provide your rationale*: | | | | | | |
| Inclusion of the footnote:  *Formulas should contain a minimum of 15**µg Vitamin B6 per gramme of protein* | | | | | | |
| ☐ Yes | | | | | ☐ No | |
| *Please provide your rationale*: | | | | | | |

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| Folic acid | | | |
| No eWG consensus was reached on the establishment of a minimum folic acid/folate value. Please provide scientific rationale to support your preferred value in square brackets: | | | |
| Folic acid  Unit  µg/100 kcal  µg/100 kJ | Minimum  [10]  [2.5] | Maximum  -  - | GUL  [50]  [12] |
| ***OR*** | | | |
| Folate\*  Unit  µg/100 kcal  µg/100 kJ | Minimum  [15]  [3.6] | Maximum  -  - | GUL  [85]  [20] |
| [\*expressed as dietary folate equivalents (DFE)  1 µg DFE = 1 µg food folate = 0.6 µg folic acid] | | | |
| Should composition be based on folate or folic acid? | | | |
| ☐ Folic acid | | ☐ Folate, expressed as dietary folate equivalents | |
| *Please provide your rationale*:  The absorption efficiency of folates varies depending on their chemical form and for clarity dietary folate equivalents should be given. | | | |
| If you support establishing compositional requirements for folate, do you support the inclusion of a footnote defining dietary folate equivalents as presented in square brackets above? | | | |
| *Please provide your rationale*: | | | |

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| Vitamin C | | | |
| No eWG consensus was reached on the establishment of a minimum vitamin C value. Based on the eWG responses, please provide scientific rationale to support your preferred value in square brackets: | | | |
| Vitamin C15)  Unit  mg/100 kcal  mg/100 kJ | Minimum  [10] [4]  [2.5] [0.96] | Maximum  -  - | GUL  7016)  1716) |
| 15) expressed as ascorbic acid  [16) This GUL has been set to account for possible high losses over shelf-life in liquid formulas; for powdered products lower upper levels should be aimed for] | | | |
| Minimum levels | | | |
| ☐ Codex IF Standard  10 mg/100 kcal  2.5 mg/100 kJ | | ☐ EFSA  4 mg/100 kcal  0.96 mg/100 kJ | |
| *Please provide your rationale*: | | | |
| Do you support the inclusion of footnote 16:  *This GUL has been set to account for possible high losses over shelf-life in liquid formulas; for powdered products lower upper levels should be aimed for* | | | |
| ☐ Yes | | ☐ No | |
| *Please provide your rationale*:  The GUL of 70mg/100 kcal applies to ready to feed liquid products only, which may experience high losses over shelf-life; powdered products should not exceed the upper level of 17mg/100kcal. | | | |

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| Biotin | | | |
| No eWG consensus was reached on the establishment of a minimum biotin value. Based on the eWG responses, please provide scientific rationale to support your preferred value in square brackets: | | | |
| Biotin  Unit  µg/100 kcal  µg/100 kJ | Minimum  [1.5] [1]  [2.5] [0.24] | Maximum  -  - | GUL  10  2.4 |
| Minimum levels | | | |
| ☐ Codex IF Standard  1.5 µg/100 kcal  2.5 µg/100 kJ | | ☐ EFSA  1 µg/100 kcal  0.24 µg/100 kJ | |
| *Please provide your rationale*: | | | |

## Minerals & Trace Elements

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| Iron | | | | | | | | |
| No consensus was reached on the compositional requirements for iron for Follow-up Formula composition. Based on the eWG responses, please provide scientific rationale to support your preferred value in square brackets | | | | | | | | |
| Iron  Unit  mg/100 kcal  mg/100 kJ | | Minimum  [0.45] [0.6] [1.0] [1.1]  [0.1] [0.14][0.25] [0.26] | | | | Maximum  [2.0] [1.9] [1.5] [2.5]  [0.3] [0.45] [0.36] 0.6] | | GUL  -  - |
|  | | | | | | | | |
| Minimum | | | | | | | | |
| ☐ Codex IF  0.45 mg/100 kcal  0.1 mg/100 kJ | | ☐ EFSA  0.6 mg/100 kcal  0.14 mg/100 kJ | | | | ☐ Codex FUF  1 mg/100 kcal  0.25 mg/100 kJ | ☐ IEG   * 1. mg/100 kcal   0.26 mg/100 kJ | |
| *Please provide your rationale:*  We would like to see consistency between the IF and FuF standards wherever possible. We have concerns about the potential impact of high doses of iron on children and as FuF is a breastmilk substitute given alongside a progressively fortified diet, composition should reflect that of breastmilk. | | | | | | | | |
| Should maximum levels be established? | | | | | | | | |
| ☐ | Yes | | ☐ | No, a footnote should be added stating:  “levels may be determined by National Authorities” | | | | |
| *Please provide your rationale:*  IBFAN supports the new proposed EU regulations that suggest a maximum value of 1.3mg/100kcal for IF. | | | | | | | | |
| If you support establishing a maximum level please provide scientific rationale to support your preferred value in square brackets | | | | | | | | |
| ☐ Codex FUF  2.0 mg/100 kcal  0.5 mg/100 kJ | | ☐ IEG  1.9 mg/100 kcal  0.45 mg/100 kJ | | | ☐  1.5 mg/100 kcal  0.36 mg/100 kJ | | ☐  2.5mg/100 kcal  0.6 mg/100 kJ | |
| *Please provide your rationale:* | | | | | | | | |
| Should separate minimum and maximum/GUL levels be established for soy protein isolate formulas? | | | | | | | | |
| ☐ | Yes | | ☐ | No | | | | |
| *Please provide your rationale:* | | | | | | | | |

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| Calcium & phosphorous | | | | |
| No consensus was reached on the requirements for calcium for Follow-up Formula composition. | | | | |
| Calcium  Unit  mg/100 kcal  mg/100 kJ | | Minimum  [50] [90]  [12] [22] | Maximum  -  - | GUL  [140] [180]  [35] [43] |
| Minimum | | | | |
| ☐ Codex IF std  50 mg/100 kcal  12 mg/100 kJ | | | ☐ Codex FUF std  90 mg/100 kcal  22 mg/100 kJ | |
| *Please provide your rationale:* | | | | |
| Guiding upper level | | | | |
| ☐ Codex IF std  140 mg/100 kcal  35 mg/100 kJ | | | ☐ Codex FUF std  180 mg/100 kcal  43 mg/100 kJ | |
| *Please provide your rationale:* | | | | |
| No consensus was reached on the requirements for phosphorous for Follow-up Formula composition. | | | | |
| Phosphorous  Unit  mg/100 kcal  mg/100 kJ | Minimum  [25] [60]  [6] [14] | | Maximum  -  - | GUL  [100] [120] [N.S.]  [24] [29] [N.S.] |
| Minimum | | | | |
| ☐ Codex IF std  25 mg/100 kcal  6 mg/100 kJ | | | ☐ Codex FUF  60 mg/100 kcal  14 mg/100 kJ | |
| *Please provide your rationale:* | | | | |
| *Guiding upper level*  *Do you consider that calcium and phosphorous ratios are taken into account when establishing a GUL? For example if the maximum calcium content is increased, should the phosphorous content also be extended?* | | | | |
| ☐ Yes | | | ☐ No | |
| *Please provide your rationale:* | | | | |
| Should the ratio for calcium-to-phosphorous included in the Codex Standard for Infant Formula be included?  Ratio calcium/phosphorous | | | | |
| Min | Max | |  |  |
| 1:1 | 2:1 | |
| ☐ Yes | | | ☐ No | |
| *Please provide your rationale:* | | | | |
| Should a footnote be attached to the GUL for phosphorous indicating its applicability to formula containing soy protein isolate? 18) This GUL should accommodate higher needs with soy formula | | | | |
| ☐ Yes | | | ☐ No | |
| *Please provide your rationale:* | | | | |

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| Sodium, chloride & potassium | | | | | | |
| No consensus was reached on the minimum or maximum requirements for sodium for Follow-up Formula composition. | | | | | | |
| Sodium  Unit  mg/100 kcal  mg/100 kJ | | Minimum  [20] [25]  [5] [6] | | Maximum  [60] [85]  [14] [21] | | GUL  -  - |
| Minimum | | | | | | |
| ☐ Codex IF std  20 mg/100 kcal  5 mg/100 kJ | | | | ☐ EFSA  25 mg/100 kcal  6 mg/100 kJ | | |
| *Please provide your rationale:* | | | | | | |
| Maximum | | | | | | |
| ☐ Codex IF std  60 mg/100 kcal  14 mg/100 kJ | | | ☐ Codex FUF std  85 mg/100 kcal  21 mg/100 kJ | | ☐ Calculated based on max protein compositional requirement | |
| *Please provide your rationale:* | | | | | | |
| No consensus was reached on the minimum requirements for chloride for Follow-up Formula composition. | | | | | | |
| Chloride  Unit  mg/100 kcal  mg/100 kJ | Minimum  [50] [60]  [12] [14.3] | | | Maximum  [160]  [38] | | GUL  -  - |
| ☐ Codex IF std  50 mg/100 kcal  12 mg/100 kJ | | | | ☐ EFSA  60 mg/100 kcal  14.3 mg/100 kJ | | |
| *Please provide your rationale:* | | | | | | |
| No consensus was reached on the minimum requirements for chloride for Follow-up Formula composition. | | | | | | |
| Potassium  Unit  mg/100 kcal  mg/100 kJ | Minimum  [60] [80]  [14] [19.1] | | | Maximum  [180]  [43] | | GUL  -  - |
| ☐ Codex IF std  60 mg/100 kcal  14 mg/100 kJ | | | | ☐ EFSA  80 mg/100 kcal  19.1 mg/100 kJ | | |
| *Please provide your rationale:* | | | | | | |
| If you propose to adapt the maximum sodium, chloride and potassium composition on the maximum protein composition, please specify how this would achieved. | | | | | | |
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| Manganese | | | | | | |
| No consensus was reached on the minimum requirements for manganese for Follow-up Formula composition. | | | | | | |
| Manganese  Unit  µg/100 kcal  µg/100 kJ | | Minimum  [1] [N.S.]  [0.25] [N.S.] | | | Maximum  -  - | GUL  [100]  [24] |
| Do you support the establishment of a minimum requirement for manganese? | | | | | | |
| ☐ | 1 µg /100 kcal  0.25 µg /100 kJ | | ☐ | N.S. | | |
| Please provide your rationale: | | | | | | |
| Do you support the establishment of a GUL for manganese of 100 µg/100 kcal | | | | | | |
| ☐ Yes | | | | | ☐ No | |
| Please provide your rationale:  A range of 1-100ug is excessive and out of line with most other ranges of minimum to maximum levels set. There is some evidence of risk associated with manganese in infant formula albeit this remains limited, but taking a precautionary principle approach, a value of 50ug/100kcal max could be suggested (http://jn.nutrition.org/content/119/12\_Suppl/1861.full.pdf). | | | | | | |

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| Iodine | | | | | | | |
| No consensus was reached on the iodine requirements for Follow-up Formula composition. Please provide scientific rationale to support your preferred value: | | | | | | | |
| Iodine  Unit  µg/100 kcal  µg/100 kJ | | Minimum  [10] [15]  [2.5] [3.6] | | | Maximum  [29] [50] [60]  [7] [12] [14] | | GUL  [29] [50] [60]  [7] [12] [14] |
|  | | | | | | | |
| *Minimum* | | | | | | | |
| ☐ | Codex IF std  10 µg /100 kcal  2.5 µg /100 kJ | | ☐ | EFSA  15 µg /100 kcal  3.6 µg /100 kJ | | | |
| Please provide your rationale: | | | | | | | |
| *Upper limit*  Should a Maximum or Guiding Upper Level be established?  At what level should this be set? | | | | | | | |
| ☐ Maximum | | | ☐ GUL | | | | |
| ☐ 60 µg /100 kcal  14 µg /100 kJ | | | ☐ 50 µg /100 kcal  12 µg /100 kJ | | | ☐ 29 µg /100 kcal  7 µg /100 kJ | |
| *Please provide your rationale:* | | | | | | | |
| Selenium | | | | | | | |
| No consensus was reached on the selenium minimum requirements for Follow-up Formula composition. Please provide scientific rationale to support your preferred value: | | | | | | | |
| Selenium  Unit  µg/100 kcal  µg/100 kJ | | Minimum  [1] [3]  [0.24] [0.72] | | | Maximum  -  - | | GUL  9  2.2 |
|  | | | | | | | |
| *Minimum* | | | | | | | |
| ☐ | Codex IF std  1 µg /100 kcal  0.24 µg /100 kJ | | ☐ | EFSA  3 µg /100 kcal  0.72 µg /100 kJ | | | |
| Please provide your rationale: | | | | | | | |

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| Copper | | | | | | | | |
| No consensus was reached on the copper requirements for Follow-up Formula composition.  Taking into account the scientific rationale of the establishment Please provide your | | | | | | | | |
| Copper  Unit  µg/100 kcal  µg/100 kJ | | | Minimum  [35] [60]  [8.5] [14.3] | | | Maximum  -  - | | GUL  [120] [250]  [29] [60] |
|  | | | | | | | | |
| *Minimum* | | | | | | | | |
| ☐ | 35 µg /100 kcal  8.5 µg /100 kJ | | | ☐ | 60 µg /100 kcal  14.3 µg /100 kJ | | | |
| *Please provide your rationale*:  As per EFSA | | | | | | | | |
| *Upper limit* | | | | | | | | |
| ☐ GUL  120 µg /100 kcal  29 µg /100 kJ | | | | ☐ GUL  250 µg /100 kcal  60 µg /100 kJ | | | | |
| Please provide your rationale:  IBFAN prefers the maximum value to be 100ug/100kcal as per current EU regulations for IF. | | | | | | | | |
| Inclusion of the footnote:  *Adjustment may be needed in these levels for ~~infant~~ formula made in regions with a high content of copper in the water supply* | | | | | | | | |
| ☐ | | Yes | | | | ☐ | No | |
| Wording should say follow up formula. This needs further discussion with examples of what maximum levels in some regions might be. | | | | | | | | |

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| Zinc | | | | | | |
| The eWG consistently supports establishing a minimum zinc content of 0.5 mg/100 kcal.  In establishing an upper limit for zinc, | | | | | | |
| Zinc  Unit  mg/100 kcal  mg/100 kJ | | Minimum  0.5  0.12 | | | Maximum  [1.25] [1.5]  [0.3] [0.36] | GUL  [1.25] [1.5]  [0.3] [0.36] |
|  | | | | | | |
| Should a maximum or GUL be established? | | | | | | |
| ☐ | Max | | ☐ | GUL | | |
| Should the upper limit be set at 1.5 mg/100 kcal or 1.25 mg/100 kcal? | | | | | | |
| ☐ | 1.5 mg/100 kcal  0.36 mg/100 kJ | | ☐ | 1.25 mg/100 kcal  0.3 mg/100 kJ | | |
| Please provide your rationale:  IBFAN supports a maximum of 1mg/100kcal as per current EU regulations for IF. | | | | | | |
| Should separate minimum and maximum/GUL levels be established for soy protein isolate formulas? | | | | | | |
| ☐ | Yes | | ☐ | No | | |
| Please provide your rationale:  Fufs containing soy protein should have a minimum content of 0.75 mg/100 kcal (0.18 mg/100 kJ) and maximum of 1.25mg/100kcal as proposed by EFSA and in EU regulations for IF. | | | | | | |

## Other substances

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| Choline, myo-inositol, L-carnitine | | | | | | |
| No consensus was reached on the addition of choline to Follow-up Formula. | | | | | | |
| Choline  Unit  mg/100 kcal  mg/100 kJ | | Minimum  [7] [-]  [1.7] [-] | | Maximum  -  - | | GUL  [50] [150]  [12] [36] |
| Should the addition be: | | | | | | |
| ☐ Mandatory.  Min: 7 mg/100 kcal  1.7 mg/100 kJ | | | ☐ Not specified in the std | | ☐ Optional with GULs  Min: -  - | |
| *Please provide your rationale:*  Although there is no rationale to add choline to FuF, but to retain as much consistency between IF and FuF as possible as they are all breastmilk substitutes then it should be mandatory. | | | | | | |
| If you support either mandatory addition or the optional addition with a specified GUL, what GUL do you support? | | | | | | |
| ☐ Codex IF std  GUL: 50 mg/100 kcal  12 mg/100 kJ | | | | ☐ IEG 2013  GUL: 150 mg/100 kcal  36 mg/100 kJ | | |
| *Please provide your rationale:* | | | | | | |
| No consensus was reached on the addition of myo-inositol to Follow-up Formula. | | | | | | |
| Myo-inositol  Unit  mg/100 kcal  mg/100 kJ | Minimum  [4] [-]  [1] [-] | | | Maximum  -  - | | GUL  [40] [-]  [9.5] [-] |
| ☐ Mandatory  Min: 4 mg/100 kcal  1 mg/100 kJ  GUL: 40 mg/100 kJ  9.5 mg/kJ | | | ☐ Not Specified in the std | | ☐ Optional with GULs  Min: -  -  GUL: 40 mg/100 kJ  9.5 mg/kJ | |
| *Please provide your rationale:*  There is no rationale to add inositol to FuF, but as above in order to be as consistent as possible for all breastmilk substitutes IBFAN supports mandatory | | | | | | |
| No consensus was reached on the addition of L-carnitine to Follow-up Formula. | | | | | | |
| L-Carnitine  Unit  mg/100 kcal  mg/100 kJ | Minimum  [1.2] [-]  [0.3] [-] | | | Maximum  -  - | | GUL  -  - |
| ☐ Mandatory  Min: 1.2 mg/100 kcal  0.3 mg/100 kJ | | | ☐ Not Specified in the std | | ☐ Specified in section 3.2 Optional ingredients | |
| *Please provide your rationale:* | | | | | | |

## Optional ingredients

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| Do you support incorporating the provisions within 3.2.3 & 3.2.4 of the Infant Formula Standard into the Follow-up Formula Standard for product for young children? |
| IBFAN prefers to see consistency between the standard for IF and the FuF for young children |
| If yes, should the same minimum, maximum and GULs be aligned with the Infant Formula Standard for product for older infants, or should these be reviewed? |
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| Based on eWG responses the Chairs propose the following for your consideration. Please comment on the following for the addition of optional ingredients to follow-up formula for young children and provide justification and rationale for your responses: |
| Taking into account eWG responses to include the reference not only to vitamins and minerals, but other ingredients; and to take into consideration wording drafted in Section 2 Description.  3.3.2.1 In addition to the [compositional requirements] ~~vitamins and minerals~~ listed under 3.2.4 to 3.2.6, other ~~nutrients~~ [ingredients] may be added when required to ensure that the product is suitable to form part of [a mixed feeding scheme] OR [progressively diversified diet] OR [complementary diet] intended for use from ~~the~~ 6th months on.  Please comment on all wording in square brackets |
| What other ingredients might fall into this category? We are concerned that this would allow the addition of substances such as vegetable or fruit extracts that manufacturers will then use to claim products are able to provide and young children with ‘all their food groups’ (as is currently the case) or that this will allow a range of additional claims relating to dietary adequacy. Since these are breastmilk substitutes other types of ingredients should not be permitted as these could potentially impact negatively on the quality of the complementary feeding diet of young children. |
| Taking into account eWG responses to align with the principles contained within the Codex Infant Formula standard 3.2.2, and that concept that the ingredient does not necessarily need to be present in breast milk, the following wording is proposed in square brackets:  3.2.2.2 [The suitability for the particular nutritional uses of [older] infants and the safety of these substances shall be scientifically demonstrated. The formula shall contain sufficient amounts of these substances to achieve the intended effect~~, taking into account levels in human milk~~.]  Please comment on all wording in square brackets |
| We are concerned about this sentence. We would prefer it to say:  ***The suitability and safety of any additional ingredient added to fufs for young children shall be INDEPENDENTLY EVALUATED and  scientifically demonstrated and evidence presented to an appropriate national or regional regulatory authority.***  **The voluntary addition of ingredients  poses  major RISKs for infants and**opens the door to promotional claims.    The suitability of any ingredient in formulas should always be thoroughly scrutinised by an independent scientific Committee – not linked to food business operators - and pre-authorised. Any ingredients used should be supported by *appropriate studies****, independently funded and reviewed****, performed following generally accepted expert guidance on the design and conduct of such studies.*  IBFAN supports the UK Government’s Scientific Advisory Committee on Nutrition (SACN) that states that the notion of optional/voluntary ingredients is unethical:*"... If an ingredient is unequivocally beneficial as demonstrated by independent review of scientific data it would be unethical to withhold it for commercial reasons. Rather it should be made a required ingredient of infant formula in order to reduce existing risks associated with artificial feeding. To do otherwise is not in the best interests of children, and fails to recognise the crucial distinction between these products and other foods.”* |

# PROCESS TO REVIEW THE ESSENTIAL COMPOSITION OF FOLLOW-UP FORMULA FOR YOUNG CHILDREN (12-36 MONTHS)

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| Flexibility | |
| Several eWG members stated that flexibility in the composition of products for young children was important due to the increased contribution of complementary foods to the diversified diet of young children.  Do you support an approach where not all nutrients or substances that have compositional requirements established for older infants are mandated for addition to follow-up formula for young children? | |
| ☐ Yes | ☐ No |
| *Please provide justification for your answer:*  Fufs are breastmilk substitutes. | |
| Do you support an approach that can encompass the views of the majority of the eWG in that the compositional requirements established for older infants can be used as a basis for the composition of product for young children, in addition to ensuring that milk based drinks can be considered within the compositional requirements for this age group? Please provide your comments. | |
| ☐ Yes | ☐ No |
| *Please provide justification for your answer:*  Infant formulas are suitable for infants to the age of 12 months and beyond. Fufs are suitable but not necessary for those over 12 months.  Milk based drinks and not necessary and are products that tend to be high in sugars, flavourings and other optional ingredients. Their use can increase the risk of early childhood obesity, dental decay and malocclusions as well as reduce the intake of healthy family foods such as fruits and vegetables. | |
| Are there other elements of flexibility that should be considered in the development of compositional requirements for follow-up formula for young children? | |
| *Please provide justification for your answer:*  Fufs should not be the sole source for these nutrients as a young child increasingly consumes a varied diet of family foods. Excessive consumption of milk products can have a negative impact on growth and development. | |

|  |
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| Key nutrients |
| Several eWG members referred to the findings of the 2014 eWG report on key nutrients for which there is evidence of inadequate intakes/status in the target population. Globally, iron and the quality of dietary fat were consistently found to be inadequate in sub-groups of the target population.  Do you consider that minimum compositional requirements for iron and fat quality will be required for product targeted to young children? |
| *Please provide justification for your answer:*  These are covered by compositional standards under discussion. |
| Several eWG members referred to the findings of the 2014 eWG report and stated that the requirements should be flexible enough to provide a source of the nutrients identified to be lacking in several countries internationally: α-linolenic acid (ALA), docosahexanoic acid (DHA), vitamin A and D, calcium, zinc and iodine.  Do you consider that minimum compositional requirements for these nutrients should be required to ensure the nutritional integrity of product targeted to young children? |
| *Please provide justification for your answer:*  These are covered by compositional standards under discussion.  Optional ingredients should be kept to an absolute minimum and only those pre-authorised following rigorous independent scrutiny permitted, |
| Do you consider that maximum compositional requirements for these nutrients should be required to ensure the nutritional integrity of product targeted to young children? |
| *Please provide justification for your answer:* |

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| Nutritional integrity |
| At a global level, what compositional parameters are considered important to mandate to ensure the nutritional integrity of product for the young child age group? (Consideration could be given to macronutrient and/or micronutrient requirements) |
| *Please provide justification for your answer:* |
| Do you consider that nutritional equivalence to products that follow-up formula may replace is required? If so, please specify, what nutrients should be equivalent, and comment whether their addition should be mandatory or voluntary? |
| *Please provide justification for your answer:*  FuF are breastmilk substitutes and therefore where appropriate equivalence to the IF standards, which are mandatory, should be a priority.  Optional ingredients should be kept to an absolute minimum and only those pre-authorised following rigorous independent scrutiny permitted, |
| The eWG highlighted that consideration of the safety and suitability of nutrients and other substances, added to follow-up formula for young children is necessary and several proposed that the essential composition of follow-up formula for older infants should be used as a starting point.  If a nutrient or other substance is added to follow-up formula (whether mandatory or voluntary), what are your views on the minimum and maximum levels of addition being consistent with the levels in follow-up formula for older infants? |
| *Please provide justification for your answer:*  What are these “other substances” – flavouring agents? Substances to enhance the marketing of fufs? Impossible to answer this without details on what the “other substances” are.  Optional ingredients should be kept to an absolute minimum and only those pre-authorised following rigorous independent scrutiny permitted,  To repeat IBFAN supports the UK Government’s Scientific Advisory Committee on Nutrition (SACN) that states that the notion of optional/voluntary ingredients is unethical:*"... If an ingredient is unequivocally beneficial as demonstrated by independent review of scientific data it would be unethical to withhold it for commercial reasons. Rather it should be made a required ingredient of infant formula in order to reduce existing risks associated with artificial feeding. To do otherwise is not in the best interests of children, and fails to recognise the crucial distinction between these products and other foods."* |