

**Summary of responses to the consultation on  
amending Council Directive 90/496/EEC on nutrition  
labelling for foodstuffs - 2008**

Please note that this is a summary document - Where possible we have assigned comments verbatim, however similar comments may be attributed to more than one respondent.

**Definition for fibre:**

**Consultation Question – *Is the definition for fibre appropriate?***

View	Comment	Respondent	FSA Response
<p><b>Agree with the proposed definition</b></p>	<p>This is in line with Codex and EFSA.</p> <p>We support the new definition of fibre – we believe it reflects the growing body of science.</p> <p>The definition of fibre appears to be reasonable and concise. Consistency with other countries and standards in the long term is preferable as varying definitions can result in large differences in quantification of fibre. As fibre is generally regarded as a beneficial constituent of food, it would be appropriate for the definition to include all fibre considered to be of benefit nutritionally. In the short-term, it would be helpful for consumers and consumer groups if the different definition and measurement systems in use were explained.</p>	<p>Nestle T&amp;L Danisco GSK FDF ATC FAIA CRN</p> <p>Cereal Partners UK</p> <p>VEGA</p>	
<p><b>Disagree with the proposed definition</b></p>	<p>It is nutritionally nonsense and scientifically indefensible to determine the relevance of a substance as a “dietary fibre” to be based on whether it had been added to a food or was naturally present (6<sup>th</sup> recital).</p> <p>Requires no scientific evidence of benefit for fibres which naturally occur in the food itself.</p> <p>Support the proposal from the IDF (International Dairy Federation) for the</p>	<p>PG</p> <p>PTF</p>	

View	Comment	Respondent	FSA Response
	<p>following reasons:</p> <ul style="list-style-type: none"> <li>• The current proposed Codex definition excludes indigestible disaccharides that can be regarded as dietary fibres based on resistance to digestion/absorption in the human small intestine.</li> <li>• Current scientific definitions from authoritative bodies do not make any reference to the degree of polymerisation.</li> <li>• Definitions from these bodies are based on the indigestibility of dietary fibre in the human small intestine.</li> <li>• Digestible mono- and disaccharides are excluded from the definition, so reference to the degree of polymerisation is unnecessary. This therefore already excludes glucose, fructose, sucrose, lactose and oligo/polysaccharides such as maltodextrins.</li> </ul> <p><b>There are three further issues that need resolving with the definition of fibre before it can become a useful guide for the consumer towards a healthy diet, and be a measurable target for the analyst.</b></p> <p>1. “..carbohydrate polymers <i>with three or more monomeric units, ..</i>” . This part (in my italics) of the definition is too broad. The definition should include only polymers, usually with 10 or more monomeric units, found in the plant cell wall.</p> <p>The fibre concept is that of plant cell wall material, present in whole foods, fruit and vegetables, the consumption of which is associated with a healthy diet. The proposed definition will allow carbohydrates that do not have the proven health benefits.</p> <p>Short chain carbohydrates (prebiotics) should be defined, measured and labelled separately from fibre.</p> <p>2. “..<i>neither digested nor absorbed in the small intestine</i>”. This should be excluded from the definition. Food components should always be defined by their chemistry and not by a physiological property.</p> <p>It cannot be measured by any practical method, nor is their agreement as to what this means.</p> <p>3. “ .. <i>a beneficial physiological effect should be demonstrated...</i>”. This is not</p>	<p>Prof. Cummings</p>	

View	Comment	Respondent	FSA Response
	<p>acceptable as part of the definition of a food component. It should be omitted.</p> <p>The obligation of food labelling is firstly to inform the consumer about the content of the food, using accurate methods. The health benefits, or otherwise, of a food component should be the subject of the “Nutrition and Health Claims” legislation.</p> <p>In considering natural dietary fibres, the area open to interpretation is dietary fibres extracted from plants or plant materials that are not a normal component of the diet. This may allow labelling of high-fibre foods, of which the high-fibre component may have little physiological benefit to the consumer.</p> <p>There is a growing body of evidence that some monosaccharides and disaccharides have fibre-like properties when we consider their physiological effects. Under the current definition of dietary fibre these carbohydrates would be excluded but clearly they elicit some of the physiological effects ascribed to dietary fibre. It is not clear how the legislation will deal with these carbohydrates, if they were to become incorporated into foods, as clearly they are not defined as fibre and cannot be defined as sugars either because they are not absorbed in the small intestine.</p> <p>By using the FAO/WHO definition, consumers would be guided to make choices that not only increase fibre intake but also provide additional health benefits through the consumption of a plant rich diet which is important for heart health and for which there is epidemiological evidence of health benefit.</p> <p>Before alternative definitions are used we believe that more research is needed into both the health benefits of alternative sources of fibre and also the use of fibre supplements within the diet.</p> <p>It is also essential that there is a clear distinction made between the definition of fibre and health claims associated with them.</p> <p>It is inappropriate because it has the potential to both mislead consumers and would add further confusion rather than clarification to the legal requirements for industry and enforcement authorities.</p>	<p>SUREC</p> <p>SUERC</p> <p>BHF</p> <p>Englyst</p>	

**Definition for fibre:**

**Consultation Question – *If the definition of fibre is not appropriate, how should it be defined?***

View	Comment	Respondent	FSA Response
	<p>“fibre” means carbohydrate polymers naturally occurring in the plant cell wall.”</p> <p>There is a need to move towards a physiological definition of dietary fibre, for example, amending the current CODEX definition to re-define fibre as fermentable fibre and non fermentable fibre because of the different physiological effects they may elicit.</p> <p>A labelling regulation that subdivided total dietary fibre (as defined by article 1 90/496/EEC) into the three subcategories coupled with a continuing programme of research into consumption patterns and associated nutritional health is preferable.</p> <p>There should be a distinction between authentic natural fibres from the food ingredients, and other - potentially lower cost - ingredients which have been introduced by manufacturers for economic as well as public-health reasons.</p> <p>IDF definition: Dietary fibre means edible carbohydrates, which are neither digested nor absorbed in the human small intestine. Dietary fibre consists of one or more of:</p> <ul style="list-style-type: none"> <li>• Edible carbohydrates naturally occurring in the food as consumed,</li> <li>• Carbohydrates which have been obtained from food raw material by physical, enzymatic or chemical means,</li> <li>• Synthetic carbohydrates.</li> </ul> <p>IDFA supports the proposal from CIAA i.e. the inclusion of a footnote that states “Non-Digestible carbohydrates like Galacto-oligosaccharides (GOS) although partly consisting of disaccharides, (allo-lactose and galactobiose) fulfil the properties of dietary fibre and therefore fall within the scope of this definition.” This is also the position that ISDI communicated to CCNFSDU.</p> <p>We suggest a more appropriate definition would be ‘intrinsic plant cell wall</p>	<p>Prof. Cummings</p> <p>SUERC</p> <p>SUERC</p> <p>PTF</p> <p>IDFA</p> <p>Englyst</p>	

View	Comment	Respondent	FSA Response
	polysaccharides' as endorsed by FAO/WHO. This definition would include scope for the separate labelling and claims for other types of carbohydrate with specific functional properties, without jeopardizing the existing public health messages that have established dietary fibre as integral with a plant rich diet.		

**Definition for fibre:**

**Consultation Question – *Do you consider there would be any cost associated with the adoption of the fibre definition you support?***

View	Comment	Respondent	FSA Response
<b>No</b>	Should not result in any increased analytical costs, as we understand that the existing AOAC analytical method is applicable.	Nestle	
<b>Yes</b>	The inclusion of oligosaccharides as dietary fibre will incur some additional costs.  If AOAC method has to be used, it will cost LA's and public analyst laboratories an extra third.	Englyst  TS-SE	

**Definition for fibre:**

**Other comments on fibre –**

View	Comment	Respondent	FSA Response
<b>Welcome the move towards a definition of fibre</b>	There is a need for an EU agreed definition for Fibre.  Welcome the move towards defining fibre as a carbohydrate with specific chemical criteria in terms of molecular size.  We welcome and agree with the introduction of a definition of fibre – this will enable	HFA  Prof Cummings  HFMA	

View	Comment	Respondent	FSA Response
	<p>food and food supplement labels to carry information about important fibre components such as FOS (fructo-oligosaccharides, a prebiotic).</p> <p>Welcome the intention to provide an EC-wide definition of 'fibre'.</p>	LACORS	
<b>Codex</b>	It would seem premature for the Commission to proceed with their definition of fibre before Codex definition is agreed.	Prof. Cummings	
<b>Analysis methods</b>	<p>There should be an agreed method.</p> <p>Which method of analysis (Englyst or AOAC) will be used to quantify and declare 'fibre' content of foods?</p> <p>GSK believes that the main outstanding issue with the proposed definition of fibre is the agreement of a method of analysis. We would support recognition in the Nutrition Labelling Directive of the AOAC method, which is widely used.</p>	<p>Prof. Cummings HFMA CRN Eurofins</p> <p>LACORS</p> <p>GSK BSDA</p>	
<b>Recital 6</b>	<p>We note the addition to recital (6) and wonder how this sits alongside Article 1. (j). Clarification on this would be useful.</p> <p>In the Commission's latest Working Document (published 3 April), we note the additional sentence under paragraph 6 of the recitals '<i>However, when extracted and added to a food they should not be defined as dietary fibre</i>'. We understand that the substances referred to here are non carbohydrate components, (rather than the carbohydrate polymers of plant origin, which are previously mentioned in the same paragraph), but believe that this sentence could be misinterpreted, and that the Commission needs to make it clear that the sentence refers only to the non-carbohydrate components.</p> <p>(6) indicates that various non-carbohydrate components when closely associated with carbohydrate polymers of plant origin can be considered as fibre, but this is not reflected in the first part of the fibre definition in Article 1.1</p> <p>We note that the fibre definition given in the Codex documents adds a footnote to the</p>	<p>Cereal partners UK</p> <p>FDF ATC</p> <p>HFMA</p>	The Agency has asked the Commission to clarify this point

View	Comment	Respondent	FSA Response
	<p>definition to clarify this point. It may be applicable to consider such an addition to the EC document (Ref: CL2007/3 – NFSDU).</p> <p>It is unclear whether it is carbohydrate or non-carbohydrate components that are being referred to. We are uncertain why extraction and subsequent addition to a food would disqualify the components referred to, from the definition of dietary fibre for labelling. We seek clarification on how these components should be defined on a label, if they are excluded from the fibre definition.</p>	ATC	
<p><b>Consumer expectations for dietary fibre to be of natural origin</b></p>	<p>I didn't notice discussion in the accompanying paper on whether consumers would expect dietary fibre declared in foods to be (i) of natural origin, and (ii) derived from the food ingredient in question.</p> <p>The directive seeks to include two categories of non-digestible carbohydrate in the labelled definition of dietary fibre that would not fit this perception. Processed carbohydrate derived from other (potentially non-food) natural ingredients, or synthetic carbohydrates seem to me to be potentially different entities.</p>	SUERC	Noted
<p><b>Impact on children</b></p>	<p>Excessive consumption by children of fat and carbohydrate replacers, and of natural and synthetic fibre enrichment may compromise their calorie intake, and also reduce the density of essential nutrients in their diet. Their gastrointestinal tract is unable to handle a large amount of fermentable substrate such as fibre, irrespective of its molecular chain length. Consequently they develop abdominal bloating, wind, pain, and frequent loose stools.</p> <p>There is clearly here an issue in considering a risk assessment of such components, as potential hazards, for children, and extending this to a consideration of a possible need for risk management and communication, for example possibly as a component of the labelling.</p>	Prof. Aggett	Noted
<p><b>Other</b></p>	<p>CRN supports the application of the scientific research on dietary fibres in product innovation and in the promotion and communication of health benefits.</p> <p>The very narrow definition proposed by the FAO/WHO does not take current scientific and nutritional developments into account and would deprive consumers of the demonstrable benefits of indigestible carbohydrates. Companies will not consider inclusion of such ingredients if they are to be declared as sugars and the</p>	<p>CRN</p> <p>PTF</p>	

View	Comment	Respondent	FSA Response
	products perceived as 'less healthy' as a consequence.		

**Energy conversion factors (ECFs):**

**Consultation Question – *Do you agree with the defined ECF's?***

View	Comment	Respondent	FSA Response
Yes	<p><b>General</b> - Are beneficial to the consumer for making the right choice whilst selecting products for consumption</p> <p><b>Fibre</b> - Agree with the proposal that the average energy contribution from dietary fibre should be standardised at 8kJ/g for purposes of calculation</p> <p><b>Fibre</b> - Generally supportive of the proposed conversion factor for fibre of 2kcal/g. We note that this is proposed to be an average energy value for fibre and is based on an FAO report. However we would welcome further explanation as to the rationale behind how this figure was chosen - it appears to be the highest energy value for all fibres rather than a true average.</p> <p><b>Erythritol</b> - FDF supports the Commission's proposed energy conversion factor of 0KJ/g (0kcal/g) for erythritol, based upon the 2003 opinion of the Scientific Committee on Foods.</p>	<p>HFA</p> <p>Nestle</p> <p>Cereal Partners UK</p> <p>FDF</p>	<p>Working papers from the FAO technical workshop, providing more detail, were scheduled to be published in a special issue of the <i>Journal of Food Composition and Analysis</i>, 2004.</p>

**Energy conversion factors (ECFs):**

**Consultation Question – *If you do not agree with the defined ECFs, what values do you think are appropriate?***

View	Comment	Respondent	FSA Response
No	<p>The calorific value of erythritol is not zero (I believe the current evidence suggests around 0.2 kcal/g) and this maybe important from a labelling perspective if the consumption of erythritol in the national diet were to increase significantly.</p> <p>The recital refers to evidence that erythritol has an energy value less than 0.9kJ and 0.2kcal per gram, yet these values are not reflected in article 5(1).</p>	<p>SUERC</p> <p>PG</p>	<p>Noted</p>





	<p>energy value for fibre of 2 kcal/g, this would under-estimate the true reduction in energy intake by 20 – 30 kcal/day.</p> <p>There is evidence that the impact of low caloric density foods such as those made possible by the use polydextrose on glycaemic response and thereby on satiety, facilitates a reduction in energy intake by consumers over and above that due directly to the reduced caloric content of the foods concerned.</p>		
<b>D-tagatose</b>	Based on an opinion of the UK ACNFP, the UK FSA issued in 2005 a favourable opinion on D-tagatose as a novel food (sugar). Under item 20 of the ACNFP's opinion, the Committee took note of our view that it has an energy value of 1.5kcal/g(6kJ/g) and acknowledged that this figure is significantly lower than the value of 4kcal/g which currently applies for all sugars.	Nutrilab	Noted
<b>Yes - general</b>	We consider the establishment of a specific ECF for erythritol is a sound precedent for considering individual ECF for other specific carbohydrate types.	Englyst	

**Energy conversion factors (ECFs):**

**Consultation Question – *Given fibre analysis already occurs it is assumed there is no cost associated with defining a single ECF. Do you agree with this statement?***

<b>View</b>	<b>Comment</b>	<b>Respondent</b>	<b>FSA Response</b>
<b>Disagree</b>	Although we agree in part with this statement, it should be noted that traditional dietary fibre methods do not include oligosaccharides, and that there would be additional costs of analysis when these are present. Furthermore, the fact that any oligosaccharide component would be quantified specifically lends itself well to separate ECF being applied, especially as this group tends to be completely fermented.	Englyst	Noted

**Energy conversion factors (ECFs):**

**Consultation Question – *Do you consider there will be any additional costs associated with the ECF for erythritol?***

<b>View</b>	<b>Comment</b>	<b>Respondent</b>	<b>FSA Response</b>
<b>Nil response</b>			

## Recommended daily allowances (RDAs) for vitamins and minerals:

### Consultation Question – *Do you agree with the RDA values?*

View	Comment	Respondent	FSA Response
<b>Yes</b>	<p>We support the alignment of the RDAs with the 2003 Scientific Committee on Food reference values<sup>3</sup>.</p> <p>The increased number of vitamins and minerals with RDAs helps companies to give more honest information about the nature of their products.</p> <p>Whilst we understand that the ideal situation would be for the European Food Safety Authority (EFSA) to review scientific developments in dietary requirements in order to set population reference intakes, we believe that labelling reference values are required before the estimated completion of this task. We would therefore support a pragmatic approach in using the values proposed by the SCF in 2003.</p>	<p>FDF ATC</p> <p>IP2</p> <p>GSK BSDA</p>	
<b>No</b>	<p>The decreases in levels for B1, B2 and Niacin are quite minor, so why change them, bearing in mind that all label changes incur expense to industry?</p> <p>We feel strongly that a more thorough review of the proposed RDA's is needed.</p> <p>BSDA would suggest that it is not helpful to revise existing values for vitamins and minerals, giving rise to inconsistencies with CODEX, in the absence of a scientific review.</p>	<p>FAIA</p> <p>HFMA</p> <p>BSDA GSK</p>	<p>It is necessary to revise the RDAs in this document to bring them in line with Nutrition and Health claims and supplements legislation. Values are based on current European scientific advise.</p>
<b>Other</b>	<p>The following changes appear to be quite striking:</p> <ul style="list-style-type: none"> <li>• B6 decreased from 2mg to 1.4mg</li> <li>• Biotin decreased from 150mcg to 50mcg</li> <li>• Zinc decreased from 15mg to 10mg</li> </ul> <p>Could the rationale for these reductions be explained?</p>	<p>FAIA</p>	<p>These values are recommended in the SCF Opinion (2003) on the revision of reference values for nutrition labelling.</p>

<sup>3</sup> SCF (2003). Opinion of the Scientific Committee on Food on the revision of reference values for nutrition labelling. See [http://ec.europa.eu/food/fs/sc/scf/out171\\_en.pdf](http://ec.europa.eu/food/fs/sc/scf/out171_en.pdf)

View	Comment	Respondent	FSA Response
<b>Folate</b>	The annex refers to folate rather than folic acid. In view of the reference to bioavailability of food folates in the SCF report, we would argue that the RDA should be raised to 400µg.	HFMA	The Agency has requested this be changed to folic acid
<b>Selenium</b>	We would support the position, and the science behind it, of Professor Margaret Rayman of the University of Surrey, that 55µg is sub-optimal as an RDA.	HFMA	Noted
<b>Vitamin D</b>	<p>We would question and welcome feedback on why the Commission/SCF have not taken this opportunity to increase the 5µg RDA for Vitamin D, in light of a wealth of published scientific evidence and calls from scientific experts and Committees to increase the level.</p> <p>Given the increasing research on vitamin D and its apparent lower levels in the population we need to evaluate whether the RDA for vitamin D is high enough, particularly given the RNI for over 65s at 10mcg and the increasing age of the population.</p> <p>We currently have the RNI for over 65s and during pregnancy at 10mcg and 7 mcg for 1-3 year olds and given the increasing concerns over rickets and the lower level of vitamin D manufactured through sunlight on the skin through increased use of sunscreens, a rise in the ethnic minority populations and less time spent outside we feel that the RDA probably should be increased to help offset this. 10mcg would seem reasonable.</p>	<p>HFMA</p> <p>Boots</p> <p>CRN</p>	Values are based on current European scientific advice.
<b>Zinc</b>	The new proposed RDA level for zinc has been reduced significantly, by one third from 15 mg to 10 mg per day. The current 15 mg zinc RDA was set taking into account the severity of symptoms of zinc deficiency states occurring in susceptible population groups. An up-to-date review of the latest available evidence, including any new clinical evidence in relation to copper balance, should be undertaken and is requested before such a significant reduction is made.	HFMA	Noted

**Recommended daily allowances (RDAs) for vitamins and minerals:**

**Consultation Question – *Are there any additional vitamins and minerals for which RDAs need to be defined? Please provide evidence to support your view.***

View	Comment	Respondent	FSA Response
Children	IDFA believes the Directive should be updated to include RDAs for children.	IDFA	Noted

**Recommended daily allowances (RDAs) for vitamins and minerals:**

**Consultation Question – *Other views on RDAs for vitamins and minerals***

View	Comment	Respondent	FSA Response
Significant amount	It is beyond the scope of this amendment to revisit the definition of a “significant amount”. However, it is hoped that a revision to the definition, in line with Codex, can be addressed by the Food Information proposal.  FDF would like to see a revision to the Nutrition Labelling Directive (Directive 90/496/EEC), as well as the Regulation on Addition of Vitamins, Minerals and Certain Other Substances to Foods (Regulation 1924/2006), which allows a significant amount of 7.5% of the RDA for liquids and foods with a low content of dried matter (i.e. fruits and vegetables, soups and milk). This is consistent with Codex principles <sup>4</sup> , and accounts for the fact that liquids are often consumed in larger portion sizes than solid foods.	GSK  FDF ATC	Noted
‘As a rule’ terminology needs to be amended	It is interpreted differently across Europe. It would surely be sensible to spell out that the 15% should apply also to portion irrespective of whether a package contains a single portion. This would remove the subsequent anomaly on claims depending on size of package, e.g., a single serve pack being able to make a content claim yet a multi serve pack not.	PG	Noted

<sup>4</sup> Codex (2004). Codex Guidelines for the Use of Nutrition and Health Claims. See [http://www.codexalimentarius.net/download/standards/351/CXG\\_023e.pdf](http://www.codexalimentarius.net/download/standards/351/CXG_023e.pdf)

<b>Chemical symbols/names for use in nutrition labelling</b>	IDFA believes that the list of chemical symbols and names for use in nutritional labelling should be as complete as possible and in line with the current industry practices at national level.	IDFA	
<b>Other</b>	<p>Supports the need to update the annex of the Nutrition Labelling Directive, to set values for those vitamins and minerals listed in legislation for foods for particular nutritional uses (PARNUTS), the food supplements Directive and the Regulation on the addition of vitamins and minerals and certain other substances to foods.</p> <p>IDFA is of the opinion that in reviewing the Directive, the EC should clarify how the different forms of vitamins should be calculated as the different forms supply different levels of vitamins.</p>	<p>GSK BSDA</p> <p>IFDA</p>	Noted

### **Business sectors affected**

**Consultation Question – *Are the sectors and groups affected by the amending directive reasonably represented in the impact assessment?***

<b>View</b>	<b>Comment</b>	<b>Respondent</b>	<b>FSA Response</b>
Nil response			

### **Benefits**

**Consultation Question – *What are your views on the benefits analysis and are there any omissions/further information that you can identify?***

<b>View</b>	<b>Comment</b>	<b>Respondent</b>	<b>FSA Response</b>
Nil response			

## Costs

Consultation Question – *What are your views on the transition periods to allow for sale through of current packaging?  
Can you provide evidence?*

View	Comment	Respondent	FSA Response
<b>Appropriate transition period</b>	<p>A transition period of 4-5 years to allow for costly and time consuming reformulation and re-labelling is appropriate.</p> <p>IDFA supports the CIAA request for the Commission to consider a short transition period of 6 months for Member. Such a measure would help the companies selling their products in several countries avoid legal uncertainties and disruptions.</p> <p>It would be appreciated, particularly by small companies, if a number of labelling changes could be dealt with at the same time to minimise costs.</p>	<p>GSK BSDA CRN</p> <p>IFDA</p> <p>IP2</p>	The Agency recognises that a short transition period could be an unnecessary burden for many small businesses

## Costs

Consultation Question – *Are the cost assumptions correct?*

View	Comment	Respondent	FSA Response
<b>No</b>	<p>The assumption on Costs has only taken into consideration the cost of re-labelling and has not considered the costs of reformulating in order to meet a particular nutrition claim.</p> <p>Time allocated to each local authority to read the Regulations fails to take into account the time taken to cascade it to other food officers. Time only accounts for reading and does not include dealing with enquiries from businesses and to also to update guidance materials.</p>	<p>GSK CRN</p> <p>TS-SE</p>	Noted

## Enforcement and sanctions

### Consultation Question – *What are the potential effects on enforcement activities?*

<b>View</b>	<b>Comment</b>	<b>Respondent</b>	<b>FSA Response</b>
<b>Agree with impact assessment</b>	We generally agree with the FSA assessment of the potential effects on enforcement activities	LACORS	Noted
<b>Not enforceable</b>	The proposed dietary fibre definition presents local authorities with an impossible task of enforcement in terms of identifying material that conforms with the proposed definition.	Englyst	Noted

### Other comments made by stakeholders during the consultation

<b>View</b>	<b>Comment</b>	<b>Respondent</b>	<b>FSA Response</b>
<b>Kcal should be phased out</b>	Kilojoule (kJ) is the legal unit and kilocalorie should be phased out as soon as possible as it is confusing for the public to see calories and kilo calories as the same value.	SIMM	Under current legislative requirements both kJ and kcal must be provided.
<b>UK should generate legislation that goes further</b>	Clearly the UK must implement the directive, but in doing so I believe that there is an opportunity to generate legislation that could offer UK consumers more than the bare structure that the directive requires.	SUERC	The Directive will be replaced by the proposed Food Information Regulation, which is currently under negotiation.
<b>Greenhouse gas impact</b>	Is not the zero estimate of greenhouse gas impact for implementation a tad optimistic? Not only will the legislation use paper (and energy), but what about the projected impact on dietary fibre consumption by the populace? Will this not influence anthropogenic methane generation?	SUERC	Noted
<b>Guidance on tolerances</b>	BSDA supports the FSA's suggestion that general guidance rather than rigid standards be introduced in order to allow a degree of flexibility on a case by case basis.	BSDA	Noted

**Number of Respondents: 31**

<b>Type</b>	<b>Organisation</b>	<b>Code</b>
Manufacturer and Trade Associations / Organisations	International Dairy Federation ATC Tate & Lyle Danisco British Soft Drinks Association Cereal Partners UK Council for Responsible Nutrition Food Additives and Ingredients Association Food and Drink Federation GlaxoSmithKline Health Food Manufacturers' Association International Special Dietary Food Industries Infant and Dietetic Foods Association Ltd Nestle Uk Nutrilab NV Proctor and Gamble Provision Trade Federation	IDF ATC T&L Danisco BSDA Cereal Partners Uk CRN FAIA FDF GSK HFMA ISDFI IDFA Nestle Nutrilab PG PTF
Food Interest Groups	Halal Food Authority Vegetarian Economy and Green Agriculture	HFA VEGA
Retailers	Boots	Boots
Health Promotion Bodies	British Heart Foundation	BHF
Academic	Professor John Cummings Professor Peter Aggett Scottish Universities Environmental research Centre	Prof. Cummings Prof. Aggett SUERC
Local Authorities / Enforcement / Analysis / Laboratories / Standards	Englyst Carbohydrate Eurofins Laboratory Ltd. Local Authorities Coordinators of Regulatory Services Trading Standards SE BSI British Standards Si Metric Matters	Englyst Eurofins LACORS TS-SE BSI SIMM
Interested Parties	Paul Duckett Margaret Anderson Associates	IP1 IP2