

Thank you for the opportunity to comment on this proposal. I am responding on behalf of the Dietitians at the Children's hospital at Westmead who routinely use the per serve labelling to educate patients and their families in the day to day management of restricted diets

Question for Submitters

Q1

How do you or your organisation use per serving information in the nutrition information panel on food labels?

We, as Dietitians, teach consumers to use the NIP to manage restrictive diets. These include obesity management, diabetes and pre –diabetes management, diets for hyperlipidaemia, diets for inherited metabolic diseases (particularly those requiring extremely restricted protein diets) and ketogenic diets for epilepsy management.

Since the introduction of the NIP in Australia we have taught families to use the panels in making day to day food choices, greatly increasing variety and ability to comply with diets. The background paper states that per serving labelling is used "to provide information for health professionals when guiding clients with special dietary requirements e.g salt intake (noting that such information could be calculated using the values in the per 100g/100 mL column)" which understates what happens in practice ie that consumers then use this information to manage day to day.

We acknowledge that 100g/100ml labelling is useful for comparison of products and indeed teach our families to use it for this for this purpose. However the per serve information allows on the run assessment of intake and it is likely that compliance to dietary prescription would be reduced if the serve size values were included due to the need to do more complicated maths when consuming a serving of the food. Failure to do in appropriately managing the diet in disorders such as diabetes and inborn errors of metabolism can result in severe morbidity and in the case of metabolic disorders, neurological and developmental consequences. The calculations involved based on 100g/100ml are likely to be challenging for those with less numerical skills (as per the panel in statement below) and for those in a hurry, and indeed for teenagers who we attempt to empower to manage their own diet.

For children and families of children with obesity and type 1 diabetes (and type 2 diabetes) the **Per Serving** column allows us to show them how much carbohydrate and energy (and other micronutrients) are in foods they eat. The dietitians managing diabetes and obesity state that "**It is the SINGLE MOST practical piece of information on the whole food label for us dietitians, our diabetes educators, families' food choices and children and adolescents learning about carbohydrate/ energy counting**". More detail is provided below:

- The **Per Serving** column is used directly in Carbohydrate Counting for children and people with type 1 diabetes both on injections and on insulin pumps.
 - o Without the **Per Serving** column, it will increase the difficulty for families to understand how much carbohydrate in food is sufficient to prevent hypoglycaemic events
 - o Carbohydrate counting is already quite a difficult skill to learn
- For NESB or ESL patients and families, the presence of the **Per serving** sizes and carbohydrate amounts makes it easier to understand and visualise food portions and the associated carbohydrate amount

- It helps our nutritional assessment and matching the type insulin would match a child's eating habits – Otherwise, it would reduce the flexibility of food choice and destine all children to eat the same way, according to their insulin and ultimately living their lives FOR their diabetes.
- For Insulin Pump Therapy and Insulin-to-Carbohydrate ratios, it increases the accuracy of carbohydrate counting for certain foods and allows better glycaemic control
- It allows other team members (educators, nurses, doctors and support staff) maintain the same information that the dietitian prescribes
- It allows diabetes team members assess reasons for hypoglycaemia or high blood glucose levels
- It allows School Teachers/support staff of diabetic children on insulin pumps ensure a child has eaten enough food to prevent hypoglycaemia
- For older people with type 1 or type 2 diabetes the **Per Serving** sometimes is the only information they use to plan their carbohydrate intake per day

From the text :

"The panel considered that a simpler approach would be to declare amounts of nutrients per 100 g/100mL in the nutrition information panel (NIP) (while retaining a statement of serving size) although they acknowledged such an approach would require greater numeracy skills"
We have experience with the inadequacies of the USA labelling system for our patients in imported foods, when a small serve size is inappropriate and per 100g/100ml is not provided, and have considered the current FSANZ system to be much superior.

Q2

Are there any particular food categories or types of food packages (e.g. single serve packages) for which per serving information is particularly useful?

If so, what are they?

Explain why the information is useful

We would prefer it to be retained on all NIP. It would seem rather discriminatory that whereas it is felt to be important information for those foods containing caffeine or making daily intake claims, it is not seen to be so for those consumers who for the sake of health or normal healthy development of their children or themselves, are required to accurately assess or calculate the intake of the foods they consume at each meal and snack.

The review of research indeed acknowledges that:

"People who reported having nutrient restrictions for health and/or religious reasons viewed the NIP as very important (NFO Donovan Research 2001)"

and "The research concluded that although participants were divided in their preferences for

information to be presented per 100g (%) or per serving, the overall preference tended to be for 100g as this was viewed as easier to work with. Nonetheless, having both was viewed as an acceptable format and of value in different circumstances (p.34). In particular, the per serving column was viewed as providing information on the nutrient amounts that the person would actually consume."

Q3

The Labelling Review recommendation suggests that per serving information be voluntary unless a daily intake claim is made. Do you support this approach? That is, do you think declaration of per serving information in the nutrition information panel should be mandatory if a daily intake claim is made (e.g. %DI or %RDI)? Give reasons for your answer.

This is a secondary usage, not the main usage of the NIP for our patients

Q4

As noted above, there is currently variation in the format of NIPs on food labels because of voluntary permissions for the use of %DI labelling and the option to include a third column for foods intended to be prepared or consumed with at least one other food. If per serving information in the NIP was voluntary this would result in more variability in the format of NIPs across the food supply. Do you think this would be a problem? Why/why not?

The less variability in format the better in terms of our patients understanding of the NIP.

Q5

If per serving information in the nutrition information panel was voluntary, do you think the inclusion of per serving information in the nutrition information panel should be mandatory when a nutrition content claim about vitamins, minerals, protein, omega-3-fatty acids or dietary fibre is made? Give reasons for your answer.

For our patients this information is secondary to what they need to be looking at as discussed above

Q6

If per serving information in the nutrition information panel was voluntary, do you think the inclusion of per serving information in the NIP should be mandatory in any other specific regulatory situations? Explain your answer

See answer to Q2

Q7

What additional studies examine consumer use and understanding of per serving information in the nutrition information panel on food labels? Please provide a copy of studies where possible.

Q8

From your perspective, what are the advantages and disadvantages of per serving information in the nutrition information panel being voluntary? Please provide evidence where possible.

See answer to Question 1

Q9

**Do you think the declaration of the amount of energy and nutrients per serving in the NIP should be voluntary? YES/NO/UNCERTAIN
Please give reasons and evidence to support your view.
If you are UNCERTAIN, please indicate what information you would need in order to form a view.**

NO, for reasons stated in answer to Q1