



The Commission Report on Trans Fatty Acids

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Current legal situation

- Labelling of TFAs not allowed
- Requirement to label:
 - "**partially hydrogenated**" oils
(containing inter alia TFA) and
 - "**fully hydrogenated**" oils
(containing no TFA but saturated fatty acids only)

Scientific considerations

- Abundance of literature associating TFA consumption with **increased risk of heart disease**
- **Insufficient evidence** to establish whether there is any **difference between ruminant and industrial TFA** consumed in equivalent amounts on the risk of heart disease
- “TFA intakes should be **as low as possible** within the context of a nutritionally adequate diet”

National approaches

- Legal limits *(DK, AT, HU, CH, IS, LI, NO)*
- Self-Regulation *(BE, DE, NL, PL, UK, EL)*
- Dietary recommendations *(BG, MT, SK, UK, FI)*

Report on Trans Fat (TFA)

- Regulation (EU) No 1169/2011, Article 30 7.:
- *"By **13 December 2014**, the Commission, taking into account scientific evidence and experience acquired in Member States, shall submit a report on the **presence of trans fats in foods and in the overall diet** of the Union population.*
- *The aim of the report shall be to **assess the impact of appropriate means that could enable consumers to make healthier food and overall dietary choices or that could promote the provision of healthier food options to consumers**, including, among others, the **provision of information** on trans fats to consumers **or restrictions on their use**; The Commission shall accompany this report with a legislative proposal, if appropriate."*

Methodology followed

- **Joint Research Center:**
literature review, collect further evidence for all aspects required to be covered by TFA report
- **Consumer studies (labelling):**
 - online experiment 8 Member States
 - field experiment in-shop 1 Member State
- **Stakeholder Consultations**



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Stakeholder Consultations: Main Results

- Questionnaires: 25 MS and 14 stakeholders answered (2nd round: 5)
- Majority of products tested throughout Europe contain little or no TFA, but that some products still have high TFA levels
- **Average population intakes** of TFA mostly **below** WHO threshold of **1 E%**, certain population parts (across all ages) may still consume excess TFA
- **Little data regarding the knowledge** of the EU population about TFA, its occurrence in foods, its sources and health effects
- **Reformulation efforts have happened** to various degrees across EU, partly in response to legal TFA limits, partly through industry self-regulation or public-private partnerships, **often without increasing SFA levels**; measures commonly driven by public health concerns
- Over half MS waiting for EU level decision before considering TFA-related measures, some food sector representatives voiced desire for harmonised approach across Europe

Options Considered

- **Commission Staff Working Document** September 2014
- **4 Policy options:**
 - Option 1: EU introduces **mandatory TFA content declaration**
 - Option 2: EU introduces a **legal limit on the TFA content** of food
 - Option 3: **Voluntary agreements** towards reducing TFA in foods and diets are made at EU level
 - Option 4: **No further action** towards reducing TFA in foods and diets is taken at EU level

Option 1: Mandatory TFA Content Declaration

- Applies to **pre-packaged products** covered by the FIC
- Possibility of **price disparities** between reformulated products and cheaper alternatives:
could potentially widen health inequalities gap
- **Consumers** may need to **spend more time** reading labels to determine the healthier food alternative
- **Costs** for **industry for labelling** of TFA
- **Costs** for the **Member States governments** for **implementation and enforcement**; for **raising consumer awareness**
- **Public health benefits are expected**, may depend on population nutrition literacy & reformulation of foods

Option 2: Legal Limit on TFA Content of Food

- **Applies to all products**, both pre-packaged and non-pre-packaged
- **Cost** for the **consumer** may consist of the **reformulation costs** for the industry that may be shifted to the consumer
- **Costs** for the **Member States governments** include costs of **implementation and enforcement**
- **Public health benefits are considered to be highest** as all products would be covered and all population groups would benefit from TFA reductions

Option 3: Voluntary Agreements

- **Applies to all products**, both pre-packaged and non-pre-packaged
- Possibility of **price disparities** between reformulated products and cheaper alternatives: could potentially widen health inequalities gap
- **Cost** for the **consumer** may consist of the **reformulation costs** for the industry that may be shifted to the consumer
- **Public health benefits are expected**, their extent depends on industry participation and the coverage of food products on the market as well as the extent of reformulations achieved

Conclusions?

- No formal Commission position
- Internal consultations to start soon
- Possible adoption June 2015

THANK YOU !

