

Maintaining our food choices



Graham Price writes about problems that are beginning to impinge on, and will in the future continue to affect, gluten free labelling.

As we all know, and as research has repeatedly concluded and established, the only current treatment for coeliac disease is a gluten free diet i.e. totally gluten free and for life.

Is this possible? What are the consequences if it's not?

The Food Standard [1.2.8] relating to gluten free labelling is starting to impinge on food choices and food costs because of the increasing sensitivity of testing methods.

The Australia New Zealand Food Standards Code (the Code) requires that for a food to be labelled gluten free it must contain "no detectable gluten".

When this standard came into effect some ten years ago, The Coeliac Society had representation on the Food Standards Australian New Zealand external team on gluten labelling issues and was fully supportive of this change from the then equivalent of 200ppm (parts per million which is the same as mg/Kg). At the time of this change, the testing method's limit of detection was 30ppm. However since then the testing method has become much more sensitive (reducing to 3ppm).

In Europe and North America, there is now a predetermined level of gluten (20ppm) defined as gluten free. This has also been adopted by CODEX – an international organisation dealing with food standards and is supported by health professionals and the coeliac societies in these countries. This standard came into effect in January 2009 (manufacturers have until January 2011 to comply with the law allowing time to make all necessary changes to product ranges and labels). Some countries still believe that 100ppm is satisfactory.

In Australia, the reason that

the term "no detectable gluten" was designated rather than a predetermined level is not a difficulty with Food Standards Australia New Zealand or The Coeliac Society or our consultant gastroenterologists. The problem is with the Australian Competition and Consumer Commission (ACCC) who require that free must mean free (whether fat free, sugar free, milk free etc.). If you can find gluten in a product – no

matter at what level or by what test – it can't be labelled gluten free.

The Coeliac Society of Australia and our consultant gastroenterologists support the CODEX standard of 20ppm. This level is also supported by Dr Robert Anderson¹ as being safe for those diagnosed with coeliac disease. In a letter to the Australian Competition and Consumer Commission dated 11 October 2007, Dr Anderson has written:

I confirm my support of the level of 20ppm gluten being defined as gluten free for two reasons.

1. It is in line with the proposed variation to the CODEX definition and will give a level of international uniformity. (USA is also moving to 20ppm).

There is no evidence that this level of gluten causes any problem for a person with coeliac disease. To the contrary, a study^{3,4} has shown that 10mg per day of gluten appears to be a safe daily intake (Catassi C, Fabiani E, Iacono G, D'Agate C, Francavilla R, Biagi F, Volta U, Accomando S, Picarelli A, De Vitis I, Pianelli G, Gesuita R, Carle F, Mandolesi A, Bearzi I, Fasano A. A prospective, double-blind, placebo-controlled trial to establish a safe gluten threshold for patients with celiac disease. Am J Clin Nutr. 2007;85:160-6.).

2. 500g of a food containing 20ppm of gluten would need to be consumed each day to reach 10mg (which is safe).

I believe it is essential that we have a definition of gluten free that is both achievable in commercial food manufacturing processes and is also safe for coeliacs. A level of 20ppm will achieve both these goals. It is also essential that the term gluten free be retained as it is used internationally in the medical profession as the treatment for coeliac disease.

I am happy to be contacted by the ACCC if any further information is required.

Yours sincerely,

*Robert P Anderson
MBChB BMedSc PhD FRACP*

Summary

- Foods containing less than 20ppm gluten have been shown to be safe for people diagnosed with coeliac disease and are accepted by coeliac societies in Europe and North America (and their members). These products are in fact labelled gluten free in these countries.
- To be labelled gluten free in Australia the product must contain "no detectable gluten".
- The current level of detection of gluten is 3ppm.
- Therefore foods with gluten content between 3ppm and 19ppm, although safe for those diagnosed with coeliac disease, cannot be labelled gluten free in Australia.
- In an effort to increase food choices and minimise food costs, The Coeliac Society will endorse food products containing less than 20ppm in line with international standards.
- The Coeliac Society logo identifies suitable and safe food products for those diagnosed with coeliac disease.

When the testing limit in Australia reduced to 10ppm (below the CODEX level), a product containing 8ppm could be labelled gluten free. Now, the same product if tested at the current level of 3ppm contains detectable gluten and can no longer be labelled gluten free. In the future, as the testing method becomes even more sensitive, some foods that are currently declared as gluten free will no longer be labelled as gluten free.

With the complexities of commercial food production, there is every chance that the term "gluten free" will disappear, as manufacturers struggle to meet the more sensitive testing available. There is no doubt that in an ideal world, gluten free should mean exactly that.

However, already the term gluten free is disappearing from products previously consumed by those diagnosed with coeliac disease with no problem. Not because the product has changed, but because the testing sensitivity has changed.

As well as losing gluten free products, there is no doubt we are paying an increasing amount for gluten free food because manufacturers have to source more costly ingredients and review manufacturing processes within their factories. One of the problems with being diagnosed with coeliac disease is the increased cost of food. The current testing/labelling situation is only adding to this.

The difference in standard between Australia and other countries will almost certainly impinge on foods imported from overseas as they are manufactured to comply with the CODEX standard but will not be tested to conform to the "no detectable gluten" limit required under the Australian Code. This could result in the loss of overseas products and seriously limit gluten free food choices available in Australia.

With the consent of The Coeliac Society and at its request I have attempted to have this matter raised through a number of forums, with a view to have the Code reviewed to the same level for gluten free as the rest of the world (20ppm). To date I have been unsuccessful, but we need to keep trying (and will).

Due to the fact that we are already losing the label "gluten free" from some products with gluten

levels between 3ppm and 20ppm, The Coeliac Society of Australia has decided to endorse food with a gluten level of less than 20ppm in line with international standards. These foods will not be labelled gluten free if they contain detectable gluten but will carry our endorsement logo.

I am aware that various internet forums and websites discuss gluten free issues (these forums are not monitored and information appearing is not always accurate and medically founded) and it may be interpreted that this action is a cop out, and not in the best interests of our members. This is certainly not our aim – in fact the opposite is true.

However there are two options – to proceed as we are at present, working with gluten free being defined with a cut off that is rapidly diminishing, resulting in less and less gluten free foods available and becoming more expensive OR alternatively, developing a mechanism that will allow maximum safe food choices at more reasonable and affordable prices.

There are two comforting factors –

1. The rest of the coeliac world (hundreds of thousands of those diagnosed with coeliac disease) consume food every day with levels of up to 20ppm. There is no evidence

of any negative consequences (symptoms, blood tests or biopsies) because of this.

2. As Dr Anderson indicated in his letter, there has been a study^{3,4} carried out in Italy with those diagnosed with coeliac disease consuming small amounts of gluten. In comments on this study, Dr Jason Tye-Din² has said that "These results suggest that 10mg of gluten daily is likely to be safe and well tolerated".

To consume 10mg of gluten you would need to eat ½kg of a food with 20ppm. You would need to do this every day and even then, this level of gluten "is likely to be safe and well tolerated".

Graham Price OAM, BSc Hons
Technical Officer / The Coeliac Society

If you see our logo (below) on foods not labelled as gluten free, these have been tested to contain less than 20ppm and with the advice of our consultant gastroenterologists are considered suitable for those diagnosed with coeliac disease.



200ppm	Gluten Free Standard – Europe, Australia 1996
30ppm	Gluten Free Standard Australia 10 years ago – No Detectable Gluten – Limit of Test 30ppm
20ppm	Gluten Free Standard in Europe, North America 2010 – Accepted by CODEX Recommended by The Coeliac Society's Consultant Gastroenterologists, Standard for The Coeliac Society Endorsement
10ppm	Gluten Free Standard Australia 5 years ago – No Detectable Gluten – Limit of Test 10ppm
3ppm	Gluten Free Standard Australia 2010 – No Detectable Gluten – Limit of Test 3ppm

The current test sensitivity of 3ppm is reducing gluten free choices while increasing food costs, with no accompanying health benefit.

References

1. Robert P Anderson MBChB BMedSc PhD FRACP*
Ian Mackay Fellow, Head of Coeliac Disease Research Group, WEHI Consultant Gastroenterologist, Coeliac Clinic, Alfred Hospital, Melbourne, Founder and Chairman of the Board, Coeliac Research Fund, CEO, Director and Founder, Nexpep Pty Ltd.
2. Dr Jason Tye-Din is a consultant gastroenterologist at the Royal Melbourne and Box Hill Hospitals and a NHMRC post-doctoral researcher at the Walter

and Eliza Hall Institute of Medical Research. He is a consultant to and shareholder of Nexpep Pty Ltd.

3. Catassi et al. A prospective, double-blind, placebo-controlled trial to establish a safe gluten threshold for patients with celiac disease. *Am J Clin Nutr* [2007] vol. 85 (1) pp. 160-6.

4. Further reading regarding this study can be found on our website:
<http://www.coeliacsociety.com.au/research.html>.