

ENSA position on WHO guidelines on free sugars intake

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On 4 March 2015, the World Health Organisation (WHO) has published a new report entitled 'Guideline: sugars intake for adult and children', in which it recommends to reduce the intake of 'free sugars' in the diet to less than 10% of the total energy intake.

The WHO recognises that 'sugars' in the diet include

- intrinsic sugars (incorporated within the structure of intact fruit and vegetables),
- sugars from milk (lactose and galactose) and
- so-called "free sugars" (mono- and disaccharides added to foods and sugars naturally present in honey, syrups, fruit juices and fruit juice concentrates),

and that all sugars contribute the same energy amount (4 kcal/g).

The WHO is concerned that an increasing intake of "free sugars" in the diet is associated with increases in body weight, and that the intake of free sugars (particularly in the form of sugar-sweetened beverages) may reduce the intake of foods containing more nutritionally adequate calories.

ENSA welcomes all initiatives encouraging healthy eating habits among both adults and children and supports WHO's work aiming to reduce the risk of non-communicable diseases (NCDs) among adults and children.

However, ENSA notes that milk sugars are excluded in the WHO's recommendation to limit free sugars intake to less than 10% of total energy intake, because there would be 'no reported evidence of adverse effects of consumption of sugars naturally present in milk'.

First, ENSA disagrees with the WHO's focus on "free sugars" only. The WHO's conclusions regarding the relationship between free sugars intake and body weight (which according to the WHO are based on low and moderate quality evidence) do not sufficiently take into account the overall effect of excessive calorie intake on body weight gain (regardless of the type of sugar) according to EFSA. The different treatment of "free sugars" compared to milk sugars is not supported by scientific evidence.

In addition, ENSA would like to express its concerns regarding the discrimination of food products which contain free sugars but are nutritionally equivalent to dairy milk, such as soy drinks. Indirectly, the different treatment of "free sugars" and milk sugars in the WHO's recommendation, may give public authorities and consumers the wrong perception that milk products would be healthier than soy products.

Scientific evidence suggests that excessive calorie intake, rather than the metabolic effect of different sugars, leads to weight gain

All sugars (mono- and disaccharides including lactose and sucrose) provide the same energy amount (4 kcal/g) and the body metabolises mono- and di-saccharides in the same way, irrespective of whether they are naturally present or added to food products. Moreover, there is no analytical method able to distinguish between added and naturally present sugars in food.



In the literature review of Te Morenga¹, commissioned by the WHO, there is no evidence of a difference in weight change as a result of difference in sugars intake when energy intake is equivalent: “We identified 12 studies that involved iso-energetic change of dietary sugars with other macronutrients. (...) We saw no evidence of difference in weight change as a result of differences in sugars intake when energy intakes were equivalent.”

These findings confirm that excessive calorie intake, rather than the metabolic effect of different sugars, leads to weight gain. The approach taken by the WHO with respect to the alleged difference between "free sugars" and milk sugars is not supported by current scientific evidence and is therefore discriminatory.

Oral health not only depends on the amount and type of sugars, but also on consumption patterns and other factors

Concerning oral health, any food and drink that contains fermentable carbohydrates (such as fructose, lactose, and sucrose) can be broken down by mouth bacteria to produce acids. There is no evidence that soy drinks containing 2.2 g sugars per 100 ml is more detrimental for teeth than milk which contains 5 g of lactose. EFSA concluded in a scientific opinion on carbohydrates that caries development related to the consumption of sucrose and other cariogenic carbohydrates, depends not only on the amount of sugars consumed but also on the frequency of consumption, oral hygiene, exposure to fluoride and other factors.

In a recent publication of the SACN UK (Scientific advisory committee on nutrition) it was concluded that higher consumption of sugars and sugars-containing food and beverages is associated with a greater risk of dental caries. Tooth decay occurs when the frequency or extent of demineralisation exceeds the capacity of saliva to remineralise.

Soy drinks are nutritionally equivalent to semi- skimmed milk

Plain soy drinks are a good source of high quality protein and contain calcium as well as essential poly-unsaturated fats such as omega 3 and omega-6 and low amounts of sugars (2.2 g sugars/100 ml - lower than sugars content present in cow’s milk). They do not contribute to overweight, obesity and dental caries, and they have a clear nutritional value.

Soy drinks are nutritionally equivalent to semi-skimmed milk: they have a similar energy content and have the same amount of high quality protein as dairy. Soy drinks are generally enriched with calcium, vitamin D and Vitamin B2.

Low amounts of sugars are added to soy drinks to provide a consumer-friendly taste. Even after this addition, soy drinks have an equal or even lower sugars content compared to dairy, e.g. plain calcium-enriched soy drink only contains 2.2 g sugars/100ml compared to semi-skimmed cow’s milk containing 4.9 g of lactose/100 ml.

They are clearly different from sugars-sweetened beverages since they contain important nutrients such as high quality protein, fats and carbohydrates, as well as vitamins and minerals. They have a nutritional composition which makes them fit perfectly in a healthy and balanced diet.

Food consumption surveys indicate that dairy milk and milk drinks contribute for about 8% of the total sugars intake in adults (resp. UK 7.5%, Germany 8,2%, and the Netherlands 8.4%) and for about 9-10% in children (UK 10.7%, NL 9%)^{2,3,4}

Conclusion

From a nutritional point of view, there is no scientifically justifiable reason to treat milk products, containing sugars (lactose), differently from alternative products, containing added sugars, as long as the overall sugars and energy content as well as the nutritional value are equivalent.

ENSA is concerned that the WHO's recommendations, if followed literally without taking into account the specificities of certain food categories, could lead to an unfair treatment of food products which are nutritionally equivalent and might generate discriminatory effects, such as higher taxation levels or more restrictive compliance rules in future national and international policies.

It is clear that soy drinks are not the sugars-sweetened beverages targeted by WHO because it would reduce the intake of foods containing more nutritionally adequate calories. To the contrary, soy drinks perfectly fit in a healthy and balanced diet.

Soy drinks, soy alternatives to yoghurt and soy desserts have a similar nutritional composition to dairy products and serve the same nutritional needs. Consumers use soy-based foods in the same way and at the same consumption moments as dairy products.

ENSA believes that soy foods and dairy are equally healthy and should be treated equally.

ENSA calls on the WHO and all stakeholders involved to support consumers in making informed food choices and to ensure consistent and fair treatment of nutritionally similar foods serving the same consumer needs.

Reference

¹ Te Morenga L., Mallard S., Mann J.; Dietary sugars and body weight: systematic review and meta-analyses of randomised controlled trials and cohort studies. *BMJ*. 2012 Jan 15;346

² RIVM 2013; VCP 2007-2010; Memo Bijdrage van voedingsmiddelengroepen aan de inneming van mono- en disacchariden en energie -NL

³ National Diet and nutrition survey years 1-2 combined (2008-2010)-UK

⁴ Nationale Verzehrstudie II ; 2008 ; Max Rubner-Institut; Bundesforschungsinstitut für Ernährung und Lebensmittel (Germany)

About ENSA

Established in January 2003, the ENSA represents the interests of natural soyfood manufacturers in Europe. The term “natural” refers to the production process used by ENSA members to produce food using whole soybeans. Soy food products from ENSA members are produced without any use of GM (genetically modified) material or GM beans.

ENSA is an association of internationally operating European companies, producing soy and other plant-based foods and beverages ranging from large corporations to small, family-owned businesses with an annual turnover of €0.5 billion. Since its establishment in 2003, ENSA has been raising awareness about the role of soy and a plant-based diet in moving towards more sustainable food production and consumption patterns.

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