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Panel on Food Safety and Environmental Hygiene

Background brief prepared by the Legislative Council Secretariat for the meeting on 14 November 2017

Reduction of salt and sugar in food

Purpose

This paper provides background information on the Government's relevant work relating to the reduction of salt and sugar in food, and summarizes major views and concerns of members of the Panel on Food Safety and Environmental Hygiene on the subject.

Background

2. According to information provided by the Administration in April 2015, dietary salt (sodium) intake is closely related to the development of hypertension which in turn is a major risk factor for cardiovascular diseases. Excessive salt intake is also associated with higher risk of fatal stroke and coronary heart disease. On the other hand, excessive dietary sugar intake is associated with overweight/obesity and dental caries.

World Health Organisation's recommendations on salt and sugar reduction

3. The World Health Organisation ("WHO") recommends adults to consume less than 5 g of salt daily, for the reduction of blood pressure and risk of cardiovascular diseases, stroke and coronary heart disease. Decreased salt intake in the population is a cost-effective public health intervention that could potentially reduce the burden of non-communicable diseases ("NCDs"), which are well recognized as the major public health challenge all over the world, on society. In the 66th World Health Assembly held in 2013, the WHO Member States adopted a set of nine voluntary global targets to be achieved

by 2025 for the prevention and control of NCDs. One of these targets is a 30% relative reduction in mean population intake of salt.

4. According to WHO's recommendation issued in 2002, free sugars should make up less than 10% of total energy intake per day. This translates into less than about 50 g of free sugars per day for someone having a 2000-Kcal diet. In March 2015, WHO issued a new set of guidelines with two strong recommendations: (a) a reduced intake of free sugars throughout the life course; and (b) for both adults and children, to reduce the intake of free sugars to less than 10% of total energy intake².

Hong Kong's situation

NCD Burden in Hong Kong

5. In Hong Kong, malignant neoplasms (31.3%), heart diseases (13.4%) and cerebrovascular diseases (7.5%) together accounted for more than half of all registered deaths in 2013. According to a survey conducted by the Census and Statistics Department in 2011-2012, prevalence of hypertension increased Overall speaking, 11% of the local population suffered from hypertension as diagnosed by medical practitioners of Western medicine. Besides, in the past few decades, consistently about two-fifths of adults aged 18-64 were classified as overweight and obese (BMI \geq 23). In 2014, the prevalence was 39%. The detection rate of overweight and obesity among primary school students increased from 16.1% in 1995-1996 to 22.2% in 2008-2009, falling slightly and gradually to 20% in 2013-2014. For secondary school students, the corresponding detection rate increased from 13.2% in 1996-1997 to 19.5% in 2013-2014. It should be noted that obesity increases the risk of developing certain chronic diseases.

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According to the definition of WHO and the Food and Agriculture Organisation of the United Nations, free sugars mean monosaccharides and disaccharides added to food by the manufacturer, cook or consumer, plus sugars naturally present in honey, syrups, and fruit juices.

In the new set of guidelines, WHO also makes a conditional recommendation and suggests a further reduction of the intake of free sugars to below 5% of total energy intake (this translates into less than 25 g of free sugars or five cube sugars per day for someone having a 2000-Kcal diet). The recommendation to further limit free sugars intake to less than 5% of total energy intake is based on very low quality evidence from ecological studies in which a positive dose-response relationship between free sugars intake and dental caries was observed at free sugars intake of less than 5% of total energy intake. According to WHO, policy-making will require substantial debate and involvement of various stakeholders for translating them into action.

Consumption of salt and sugar in Hong Kong

6. According to the Administration, local population-based studies on the dietary intake of salt or sugar among the general public are limited. two local research studies conducted in 1996 and 2011, it was estimated that the salt intake among adults could be as much as 10 g per day (twice the level recommended by WHO). Since the studies were conducted years ago and/or focused on a subgroup of population, more updated information of the general population is required to reflect the current situation. Based on available data from the Centre for Food Safety ("CFS"), it is estimated that major food groups contributing to sodium intake of the adult population in a descending order are condiment and sauce (44%), followed by soup (14%), ham/sausage/meatball (8%), bread (6%), dim sum (6%) and siu mei/lo mei (4%). On the other hand, it is estimated that the mean intake of total sugar among the local adults is 53 g per day based on data collected from the dietary studies conducted by CFS. Based on CFS' available data, it is estimated that 32% of total sugar intake is from non-alcoholic beverages, which consist of carbonated drinks, tea and fruit and vegetable juices/juice drinks.

Salt and sugar contents in food in Hong Kong

7. In order to have an overview of the nutrient content of food available in the local market, including prepackaged and non-prepackaged items, CFS has, since 2006, conducted a number of risk assessment studies on nutrients (including salt and sugar). The studies have revealed that salt and sugar contents vary across different kinds of food, with differences also found within the same kind of food. This entails that there is room for salt and sugar reduction in foods.

Strategies for reducing the intake of salt and sugar in food

8. In view of the increasing NCD burden in Hong Kong, the Government considers it necessary to strengthen the work with respect to reduction in salt and sugar intake. In this regard, the Government announced the establishment of the Committee on Reduction of Salt and Sugar in Food ("the Committee") in March 2015 which is responsible for making recommendations to the Secretary for Food and Health on the formulation of policy directions, strategies and work plans for reducing the intake of salt and sugar by the public and the salt and sugar contents in food.

Members' concerns

9. Members' major views and concerns over the Government's work relating to the reduction of salt and sugar in food are summarized below.

Need for setting up the Committee

- 10. Some members queried the need for setting up the Committee. In their view, the work tasked upon the Committee should be undertaken by the Food and Health Bureau, the Department of Health and/or CFS. Some members, on the other hand, supported the establishment of the Committee and suggested that the Administration should review the scope of work of the Committee to enhance its functions.
- 11. According to the Administration, local research studies had showed that the dietary intake of salt or sugar among the general public had exceeded the levels recommended by WHO. The reduction in salt and sugar intake was not simply a personal choice of consumers but involved the cooperation of the food trade to reduce the use of salt and sugar during the food preparation process. The Government considered it necessary to set up the Committee to map out an effective strategy for reduction of salt and sugar.

<u>Labelling requirement on salt and sugar contents</u>

- 12. There was a view that the Administration should standardize the labelling requirement regarding the salt and sugar contents of prepackaged food products, so as to help the general public, in particular the elderly, make informed choices to protect their health. Concerns were raised about the legibility of some nutrition labels and some members doubted whether people had made good use of the information on nutrition labels for healthier choices of food products with lower sugar and salt contents. There was a suggestion that such information on nutrition labels should be highlighted to alert the consumers.
- 13. According to the Administration, the trade was required to provide legible nutrition labels under the existing Food and Drugs (Composition and Labelling) Regulations (Cap. 132W). CFS had issued "Trade Guidelines on Preparation of Legible Food Label" in May 2012 to assist the trade in providing clear and legible information on the food labels. It also conducted a study in collaboration with the Consumer Council in 2013 on the legibility of the nutrition labels of prepackaged food products sold in Hong Kong with reference to the Guidelines. In the early stages, upon detection of non-compliance with the requirements of the Nutrition Labelling Scheme in prepackaged food,

including the failure to provide legible nutrition labels, CFS would issue a warning letter to the food trader concerned requiring compliance within a specified period. However, after a review of its enforcement work conducted in the middle of 2014, CFS would initiate prosecution immediately without allowing any time for rectification if it identified any non-compliance with the legibility requirements for nutrition labels.

Publicity and education work

- 14. Some members considered that the Government should step up education and publicity with a view to promoting in Hong Kong a healthy dietary culture, i.e. less consumption of salt and sugar. They also considered that the Committee should devise concrete proposals to encourage the practitioners of the food trade (e.g. food suppliers, restaurants and chefs) to reduce gradually the use of salt and sugar in the food manufacturing and preparation process. Some other members, however, expressed concern about the impact of the reduction of salt and sugar on the catering industry, particularly those food premises serving traditional Chinese cuisine which might have high salt/sugar content.
- 15. The Administration advised that it had strengthened publicity work in recent years to enhance public awareness about nutrition labelling, such as organizing quiz competitions at schools. Prepackaged food products fulfilling the relevant requirements could carry claims as "low sugar" and "low sodium" in their nutrition labels to facilitate consumers to make informed choices.

Latest developments

- 16. On 20 October 2017, the Administration and the Committee announced the launching of the voluntary "Salt/Sugar" Label Scheme for Prepackaged Food Products³. According to the Administration, the purpose of the Scheme (jointly introduced by the Committee, the Food and Health Bureau and CFS) is to assist consumers to easily identify low-salt and low-sugar products. It will also serve as a catalyst for the trade to provide more varieties of low-salt-low-sugar products for consumers.
- 17. The Administration will update members on the Committee's work in the reduction of salt and sugar in food at the meeting on 14 November 2017.

Details of the Scheme have been posted on the dedicated webpage of CFS (www.cfs.gov.hk/english/programme/programme_rdss/programme_Salt_Sugar_Label_Scheme.html).

Relevant papers

18. A list of the relevant papers on the website of the Legislative Council is in the **Appendix**.

Council Business Division 2
<u>Legislative Council Secretariat</u>
8 November 2017

Appendix

Relevant papers on reduction of salt and sugar in food

Date of meeting	Paper
14 April 2015	Agenda
	<u>Minutes</u>

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