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13 June 2019

Mr Mark Booth
CEO
Food Standards Australia and New Zealand
PO Box 5423
KINGSTON ACT 2604
AUSTRALIA

Via email: submissions@foodstandards.gov.au

Dear Mr Booth

Call for submissions – Application A1173 Minimum protein in follow-on formula

The Royal Australasian College of Physicians (RACP) welcomes the Food Standards Australia and New Zealand (FSANZ) call for submissions on application A1173 Minimum protein in follow-on formula.

The RACP is Australia and New Zealand's largest medical college, representing over 25,000 physicians, including 4,500 paediatricians, across over 30 specialties. Our members routinely work with newborns, infants, young children and their families. The RACP has previously made submissions to FSANZ commenting on the regulation of infant formula products for special dietary use and expressing concern over the regulation of marketing of infant formula in Australia, including labelling of infant formula products.

We have consulted with members of our Paediatrics & Child Health Division and its Paediatric Policy Advisory Committee to provide the following general concerns about application A1173.

While the proposal to reduce the minimum protein requirement for follow-on formula from 0.45 g/100 kJ to 0.38 g/100 kJ in the Australia New Zealand Food Standards Code (the Code) appears safe from a nutritional point of view, we believe this is a too restricted view and FSANZ should take care in moving to a new status quo without a thorough examination of the possible changes to infants' future wellbeing.

Firstly, infant nutrition is not just about growth. There is some emerging research about the effect of early nutrition on the microbiome and consequent or concurrent epigenetic changes associated with this. Microbiome alteration (which has been shown to occur in rats) and epigenetic changes in the first year of life which are being documented at an increasing rate.¹ We also believe that it is also overly simplistic to attribute a lower rate of subsequent

¹ Indrio F, Martini S, Francavilla R, Corvaglia L, Cristofori F, Mastrolia SA, Neu J, Rautava S, Russo Spina G, Raimondi F and Loverro G (2017) Epigenetic Matters: The Link between Early Nutrition, Microbiome, and Long-term Health Development. *Front. Pediatr.* 5:178. doi: 10.3389/fped.2017.00178

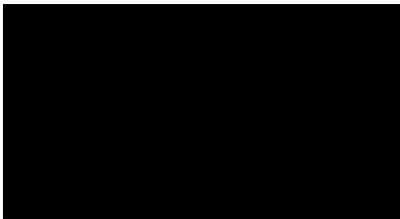
obesity in children to the lower concentration of protein in follow on formula, given the complex causality of adult obesity.

Our second concern is that the change to lower protein follow-on formula is likely to be used as a marketing tool by infant formula manufacturers creating more segmentation and differentiation in an already crowded infant formula market. The lower protein content in follow-on formula could for example be marketed as an improvement making infant formula more “human breastmilk-like”.

While possibly seen by some as a legitimate marketing tactic, it runs the risk of creating an erroneous view in the public that infant formula is as good as human breastmilk, or at least getting closer to it in composition. The RACP believes that this is problematic given the complex interactions of the thousands of constituents in human breastmilk (HBM) and its ability to change over time to meet the needs of the infant. We have therefore repeatedly highlighted the importance of expanding and strengthening regulation around marketing of infant formula in Australia to avoid such problematic and potentially misleading marketing tactics.

The RACP will continue to advocate for effective means of safeguarding breastfeeding as the best infant feeding option for optimal health outcomes, and ensuring infant formula is safe for those who need to use it. Should you require further information or wish to discuss this further, please contact Yvonne Gritschneider, Policy and Advocacy Officer on policy@racp.edu.au or +61 2 9256 9618.

Yours sincerely



President, Paediatrics & Child Health Division