



Nutritionist **Rosie Shelley** comes down firmly on the side of those who are campaigning against the EU Food Supplements Directive

Bitter pill to swallow

HEADLINES screaming about the EU Food Supplements Directive have been difficult to avoid. The Directive passed into Irish law in 2003 with the aim to harmonise legislation across Europe and to ensure the safety of consumers. What it boils down to are stringent restrictions on which vitamins and minerals will be available, and at what strengths.

The campaign to challenge the Directive has reached a critical point, because this January the maximum permitted levels for these supplements will be set.

In the words of Jill Bell, President of the Irish Association of Health Stores (IASH): "Time is running out". Urging all those concerned to sign the campaign petitions, she compares the likelihood that "this regulation could see the demise of virtually all useful food supplements over the next two years".

Of all the countries in Europe, Ireland is demonstrating the most severe interpretation of the directive — what bestselling author and nutritionist **Patrick Holford** calls "a prehistoric position".

Ireland does indeed have a thriving food supplement industry, but, according to Holford, we also have "an immensely strong pharmaceutical tradition", and a major aim of the legislation is "harmonisation" or facilitation of the pharmaceutical industries across the member states.

Powerful international organisations, like the Alliance for Natural Health (ANH), are arguing that this harmonisation is in conflict with the second stated aim of ensuring consumer safety, and what these giant companies are supporting is the "legislating of safe, effective supplements out of existence".

The view of the FSAI (Food Safety Authority of Ireland) is that the maximum level of nutrients in supplements should be based on the very basic Recommended Daily Allowances, or RDAs. This sounds sensible, until you consider these levels were established in response to the spread of nutritional deficiency diseases — scurvy, rickets and so on — that occurred as a result of industrialisation over 200 years ago. They were intended to prevent disease, never to optimise health. Endless studies have shown an intake of nutrients around 10 times

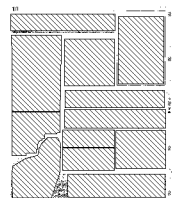
higher than RDAs is needed to protect and restore health.

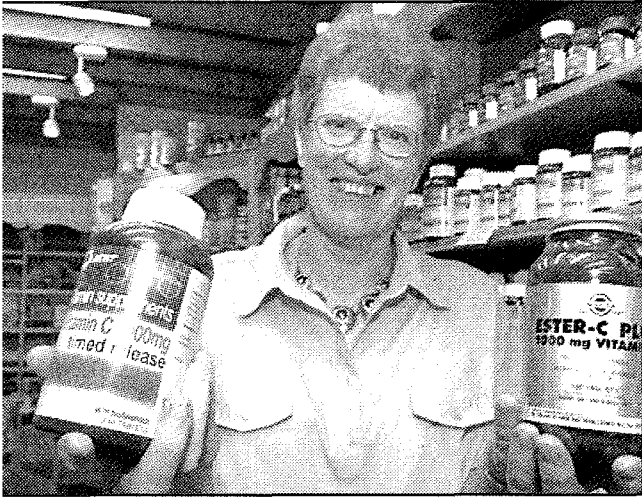
Holford uses the example of vitamin C, whose protective action against cancer, cardiovascular disease and the common cold is only significant at around 1000mg a day, while the RDA is 60mg. On top of that, there is no one-size-fits-all when it comes to our nutritional needs. For example, a smoker would need around four times the RDA of vitamin C to have the same blood level as a non-smoker, pregnant women need more folate, the elderly more vitamin D, vegans B12 supplementation and anaemics iron. People with high levels of environmental pollution also require higher levels of antioxidants, such as vitamins A, C and E, and selenium.

The EU argument is: "An adequate and varied diet could provide all necessary nutrients". But this is not the case. The average diet comes in under even the RDA for several key nutrients. Foods like white flour or rice lose nearly 80% of their nutrients during processing, and even if we follow a balanced, wholefood regime, that food is only as good as th

earth it is grown in. Plants take their minerals from the soil in order to grow and then produce vitamins, both of which are then passed on to us directly, or through the animals eating the plants, but modern farming methods mean soil mineral levels are seriously depleted. Add to that long storage periods, exposure to air and cooking, and there can really be no assurances when it comes to how nourishing any meal might be.

Anne Darcy, President of the Irish Association of Nutritional Therapists, says it's widely accepted that the diets of





VOCAL OPPOSER: Jill Bell, President of the Irish Association of Health Stores. Picture: Richard Mills



livestock should be supplemented: "It is quite shocking that humans are going to be denied access to the levels of nutrients necessary to compensate for the nutritional inadequacy in common foodstuffs."

But isn't it true, as the directive states, an "excessive intake of vitamins and minerals may result in adverse effects"? Well, yes. Vitamins A and D are not passed out of the body in the urine and so can accumulate in the liver, theoretically causing problems of varying severity. Vitamin C can in high doses cause loose bowels ("but then so does curry," says Patrick Holford. "And they're not banning that").

Other supplements have routinely been taken at levels 100 times or more above the RDA for therapeutic purposes, and usually any unwanted effects disappear as soon as the dose is reduced. Of course, anything is toxic if we take too much of it, even water — we can't legislate for common sense.

Above all, we need to remember, as Jill Bell notes: "In 40 years of higher level supplement usage, not one single case of any serious side effects has been recorded, while properly prescribed medicine is the fourth leading cause of death in the world". Patrick Holford puts it at 15,000 deaths a year in Britain, and says the safety issue is one of denying people access to vital nutrients.

Dr Robert Verkerk, founder of the ANH, is far from alone in seeing this in terms of an attack on our freedom of choice, our civil liberties. In his words: "There is a huge amount at stake for the future of natural healthcare."

Over 100,000 Irish people agree. They have signed an IAHS petition against the Declaration which will be presented to Minister for Health Mary Harney on December 12. Let's hope the Minister is in the mood for listening.

THE PROS and CONS

Against the Directive

■ Modern farming methods, soil mineral depletion and environmental toxins mean we are unable to source adequate levels of key nutrients from diet alone, even if we avoid nutritionally barren processed foods.

■ RDAs are outdated and ineffective, designed only to prevent serious deficiency diseases and not to optimise health.

■ There has not been one single case of significant side effects over 40 years of higher level supplement use, while prescribed drugs are the fourth leading cause of death in the world. Different health issues require different dosages.

■ Financially vested interests are at work. Health-food stores and supplement manufacturers are at risk.

For the Directive

■ Harmonising legislation across the member states will facilitate cohesion and the efficiency of large and profitable pharmaceutical companies.

■ An adequate diet should provide sufficient nutrition for most people under normal circumstances.

■ Maximum levels of nutrients based on RDA will ensure customer safety — excessive levels are dangerous.

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