

SCIENTIFIC OPINION

Scientific Opinion on the substantiation of health claims related to
"Lactobacillus gasseri CECT5714 and Lactobacillus coryniformis
CECT5711" and decreasing potentially pathogenic intestinal
microorganisms and improvement of intestinal transit (ID 937) pursuant to
Article 13 of Regulation (EC) No 1924/2006¹

EFSA Panel on Dietetic Products, Nutrition and Allergies (NDA)²

European Food Safety Authority (EFSA), Parma, Italy

SUMMARY

Following a request from the European Commission, the Panel on Dietetic Products, Nutrition and Allergies was asked to provide a scientific opinion on a list of health claims pursuant to Article 13 of Regulation 1924/2006. This opinion addresses the scientific substantiation of health claims in relation to "Lactobacillus gasseri CECT5714 and Lactobacillus coryniformis CECT5711" and decreasing potentially pathogenic intestinal microorganisms and improvement of intestinal transit. The scientific substantiation is based on the information provided by the Member States in the consolidated list of Article 13 health claims and references that EFSA has received from Member States or directly from stakeholders.

The food constituent that is the subject of the health claims is a combination of the strains *'Lactobacillus gasseri* CECT5714 and *Lactobacillus coryniformis* CECT5711'. The Panel considers that the combination of the strains, *Lactobacillus gasseri* CECT5714 and *Lactobacillus coryniformis* CECT5711, is sufficiently characterised.

Decreasing potentially pathogenic intestinal microorganisms

The claimed effect "intestinal flora" is not sufficiently defined but in the context of the proposed wording, the Panel assumes that the claimed effect refers to aspects of "probiotic, and balances your healthy intestinal flora". The Panel considers that decreasing potentially pathogenic intestinal microorganisms might be beneficial to human health.

The Panel notes that the human intervention studies cited did not show an effect of *Lactobacillus gasseri* CECT5714 and *Lactobacillus coryniformis* CECT5711 consumption on decreasing the potentially pathogenic intestinal microorganisms, and that the other references submitted are related to *in vitro* characteristics and properties of the strains, safety aspects or are review papers.

¹ On request from the European Commission, Question No EFSA-Q-2008-1724, adopted on 02 July 2009.

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For citation purposes: EFSA Panel on Dietetic Products, Nutrition and Allergies (NDA); Scientific Opinion on the substantiation of health claims related to "*Lactobacillus gasseri* CECT5714 and *Lactobacillus coryniformis* CECT5711" and decreasing potentially pathogenic intestinal microorganisms and improvement of intestinal transit (ID 937) pursuant to Article 13 of Regulation (EC) No 1924/2006 on request from the European Commission. EFSA Journal 2009; 7(9) 1238. [13 pp.]. doi:10.2903/j.efsa.2009.1238. Available online: www.efsa.europa.eu



On the basis of the data available, the Panel concludes that a cause and effect relationship has not been established between the consumption of "Lactobacillus gasseri CECT5714" and Lactobacillus coryniformis CECT5711" and decreasing potentially pathogenic intestinal microorganisms.

Improvement of intestinal transit

The claimed effect is "intestinal transit". In the context of the proposed wording, the Panel assumes that the claimed effect refers to "improves your intestinal transit". The Panel considers that improvement of intestinal transit within the normal range might be beneficial to human health.

The Panel notes the weaknesses of the intervention study in healthy adults and that the other references cited provided no scientific data that could be used to substantiate the claimed effect.

On the basis of the data available, the Panel concludes that a cause and effect relationship has not been established between the consumption of "Lactobacillus gasseri CECT5714" and Lactobacillus coryniformis CECT5711" and improvement of intestinal transit within the normal range.

KEY WORDS

Lactobacillus gasseri CECT5714, Lactobacillus coryniformis CECT5711, intestinal flora, potentially pathogenic microorganisms, intestinal transit time, bowel, health claims.



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ACKNOWLEDGEMENTS

The European Food Safety Authority wishes to thank for the preparation of this opinion:

The members of the Working Group on Claims: Jean-Louis Bresson, Albert Flynn, Marina Heinonen, Hannu Korhonen, Martinus Løvik, Ambroise Martin, Hildegard Przyrembel, Seppo Salminen, Sean (J.J.) Strain, Inge Tetens, Henk van den Berg, Hendrik van Loveren and Hans Verhagen.

The members of the Claims/Sub-Working Group Gut/Immune: Miguel Gueimonde, Martinus Løvik, Bevan Moseley, Seppo Salminen, Stephan Strobel, Hania Szajewska and Hendrik van Loveren.



INFORMATION AS PROVIDED IN THE CONSOLIDATED LIST

The consolidated list of health claims pursuant to Article 13 of Regulation 1924/2006³ submitted by Member States contains main entry claims with corresponding conditions of use and literature from similar health claims. The information provided in the consolidated list for the health claims subject of this opinion is given in Table 1.

Table 1. Main entry health claims related to "Lactobacillus gasseri CECT5714 and Lactobacillus coryniformis CECT5711", including conditions of use from similar claims, as proposed in the Consolidated List.

ID	Food or Food component	Health Relationship	Proposed wording	
937	Lactobacillus gasseri CECT5714 and Lactobacillus coryniformis CECT5711	Intestinal flora and intestinal transit	-probiotic -balances your healthy intestinal flora; -improves your intestinal transit.	
	 Conditions of use mind.D202 täglich, täglicher Verzehr von probiotischen Milchprodukten über einen Zeitraum von 3-4 Wochen at least 10[8] cfu/day dairy fermented product periods of 3-4 weeks daily consumption 			

ASSESSMENT

1. Characterisation of the food/constituent

The food constituent that is the subject of the health claim is a combination of the strains *'Lactobacillus gasseri* CECT5714 and *Lactobacillus coryniformis* CECT5711'. The strain *Lactobacillus gasseri* CECT5714 (hereafter *L. gasseri* CECT5714) species identity as well as the strain identity and characteristics have been determined using phenotypic and genotypic methods as indicated in the references provided (Martín et al., 2003 and 2005b).

The strain *Lactobacillus coryniformis* CECT5711 (hereafter *L. coryniformis* CECT5711) species identity as well as the strain identity and characteristics have been reported in the literature (Martín et al., 2005a; Lara-Villoslada et al., 2007c). In addition, the lac gene cluster of the strain has been sequenced and the sequence is available in the literature (Corral et al., 2006).

The Panel notes that a culture collection number from the Spanish Type Culture Collection (CECT) is provided for *L. gasseri* CECT5714 and *L. coryniformis* CECT5711. CECT accepts deposits as a restricted-access non-public International Depositary Authority under the Budapest Treaty.

The Panel considers that the combination of the strains, *Lactobacillus gasseri* CECT5714 and *Lactobacillus coryniformis* CECT5711, which is the subject of the health claim, is sufficiently characterised.

2. Relevance of the claimed effect to human health

2.1. Decreasing potentially pathogenic intestinal microorganisms

The claimed effect is "intestinal flora". The Panel assumes that the target population is the general population.

"Intestinal flora" is not sufficiently defined. In the context of the proposed wording, the Panel assumes that the claimed effect refers to aspects of: "probiotic, and balances your healthy intestinal flora".

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³ Regulation (EC) No 1924/2006 of the European Parliament and of the Council of 20 December 2006 on nutrition and health claims made on foods. OJ L 404, 30.12.2006, p. 9–25.



The numbers/proportions of bacterial groups that would constitute a "balanced/healthy" intestinal flora have not been established. Increasing the number of any groups of bacteria is not in itself considered as beneficial. The Panel considers that no evidence has been provided that aspects of the claimed effect, "probiotic" and "balances your healthy intestinal flora", are beneficial to human health.

The Panel considers that "balances your healthy intestinal flora" in the context of decreasing potentially pathogenic intestinal microorganisms might be beneficial to human health.

2.2. Improvement of intestinal transit

The claimed effect is "intestinal transit". The Panel assumes that the target population is the general population.

In the context of the proposed wording, the Panel assumes that the claimed effect refers to "improves your intestinal transit".

The Panel considers that improvement of intestinal transit within the normal range might be beneficial to human health.

3. Scientific substantiation of the claimed effect

3.1. Decreasing potentially pathogenic intestinal microorganisms

In a human intervention study (Olivares et al., 2006a), the effect of administration of the strains *L. coryniformis* CECT5711 and *L. gasseri* CECT5714 on short chain fatty acids (SCFA) faecal concentration and selected parameters of immune response was measured. Additionally, an impact on faecal bacteria counts was assessed. The study was a randomised, double-blind, placebo-controlled study in 30 adult volunteers (aged 23 – 43 years, 15 females). After a 2-week period of restricted diet without any fermented foods a combination of the strains *L. coryniformis* CECT5711 and *L. gasseri* CECT5714 *vs.* standard yogurt (containing 10⁸ *Streptococcus thermophilus*) was administered during the next 2 weeks. A significant increase in lactobacilli counts was found in faecal cultures. The Panel notes that the effect of the combination of the strains on potentially pathogenic intestinal microorganisms was not measured in this study.

In a randomised, double-blind, placebo-controlled study in 30 healthy adults (aged 23–43 years, 15 females) investigated the oral administration of *L. gasseri* CECT5714 and *L. coryniformis* CECT5711 at a concentration of $2x10^9$ cfu/day for each of the strains under investigation in a dairy product which also contained 10^8 *Streptococcus thermophilus* (Olivares et al., 2006c). The consumption of the evaluated strains led to a significant increase in the number of faecal lactic acid bacteria (from 6.97 \pm 0.158 to 7.59 \pm 0.213 cfu/g of faeces). The Panel notes that the effect of the combination of the strains on potentially pathogenic intestinal microorganisms was not measured in this study.

Lara-Villoslada et al. (2007a) evaluated the effects of consumption of the strains L. coryniformis CECT5711 and L. gasseri CECT5714 in 30 children aged between 3 and 12 years. It was conducted as a non-randomised, non-placebo controlled, 3 week sequential administration study of 200 mL of a normal yoghurt containing L. bulgaricus and S. thermophilus followed by administration of 80 mL of the yoghurt with L. bulgaricus substituted by the strains under investigation. Concentration of L. coryniformis CECT5711 was 1.8×10^7 cfu/g and L. gasseri CECT5716 was 2×10^6 cfu/g. An increase in faecal lactobacilli counts was shown at the end of the intervention (from 7.76 ± 0.15 to 8.05 ± 0.14 cfu/g of faeces (P < 0.05). No statistically significant differences were found in counts of other measured microorganisms (e.g. Bacteroides, Clostridia, Enterococci). The Panel notes that in this study no significant decrease of potentially pathogenic intestinal microorganisms was found compared to the control groups.

Other references submitted in the list are related to *in vitro* characteristics of both strains of bacteria, their properties (Martin et al., 2003, Martin et al., 2005a; Martin et al., 2005b; Olivares et al., 2005b), and safety aspects (Lara-Villoslada et al., 2007c) or are review papers (Guarner and Schaafsma, 1998; Lara-Villoslada et al., 2007b; Saavedra et al., 2001). The Panel notes that these references do not



assess the effect of *Lactobacillus gasseri* CECT5714 and *Lactobacillus coryniformis* CECT5711 consumption and decreasing potentially pathogenic intestinal microorganisms, and considers that these references did not provide scientific data that could be used to substantiate the claimed effect.

Overall, the human intervention studies cited did not show an effect of *Lactobacillus gasseri* CECT5714 and *Lactobacillus coryniformis* CECT5711 consumption and decreasing the potentially pathogenic intestinal microorganisms, and the other references did not provide scientific data that could be used to substantiate the claimed effect.

The Panel concludes that a cause and effect relationship has not been established between the consumption of "Lactobacillus gasseri CECT5714 and Lactobacillus coryniformis CECT5711" and decreasing potentially pathogenic intestinal microorganisms.

3.2. Improvement of intestinal transit

One randomised, double-blind, placebo-controlled study (Olivares et al., 2006c) in 30 healthy adults (aged 23–43 years, 15 females), investigated the oral administration of *L. gasseri* CECT5714 and *L. coryniformis* CECT5711 at a concentration of $2x10^9$ cfu/day for each of the strains under investigation in a dairy product which also contained 10^8 *Streptococcus thermophilus*. The analysis included faecal cultures of the administered strains, genomic analysis, measurement of short chain fatty acids and water content of faeces. Bowel habits were evaluated with a questionnaire. Individuals who received the strains under investigation reported an increase in a stool volume score and in the number of stools/week at the end of the 4-week treatment period. Volunteers in both treatment arms reported a positive effect on the frequency of bowel movements which was significantly increased in the experimental group. The presence of both strains was transient and returned to basal levels 2 weeks after cessation of administration. The assessment of the frequency of bowel movements is questionnaire-based and showed a difference in the number of stools/week between the intervention group (8.0/week) and the control group (7.3/week). Participants in the experimental group reported a positive effect under the questionnaire item "bowel habit" compared to the control group. The Panel notes the weaknesses of the study which include the small sample size, short duration period, and lack of a validated questionnaire to assess the measured outcome.

Other references submitted in the list are related to *in vitro* characteristics of both strains of bacteria, their properties (Martin et al., 2003, Martin et al., 2005a; Martin et al., 2005b; Olivares et al., 2005b), and safety aspects (Lara-Villoslada et al., 2007c) or are review papers (Guarner and Schaafsma, 1998; Lara-Villoslada et al., 2007b; Saavedra et al., 2001). The Panel notes that these references do not assess the effect of *Lactobacillus gasseri* CECT5714 and *Lactobacillus coryniformis* CECT5711 consumption on the improvement of intestinal transit.

Overall, the Panel notes the weaknesses of the intervention study in healthy adults and that the other references cited provided no scientific data that could be used to substantiate the claimed effect.

The Panel concludes that a cause and effect relationship has not been established between the consumption of "Lactobacillus gasseri CECT5714 and Lactobacillus coryniformis CECT5711" and improvement of intestinal transit within the normal range.

CONCLUSIONS

On the basis of the data available, the Panel concludes that:

• The food constituent, the combination of "Lactobacillus gasseri CECT5714 and Lactobacillus coryniformis CECT5711", which is the subject of the health claim is sufficiently characterised.

Decreasing potentially pathogenic intestinal microorganisms

• The claimed effect is "intestinal flora". The target population is assumed to be the general population. Decreasing potentially pathogenic intestinal microorganisms might be beneficial to human health.



• A cause and effect relationship has not been established between the consumption of "Lactobacillus gasseri CECT5714" and Lactobacillus coryniformis CECT5711" and decreasing potentially pathogenic intestinal microorganisms.

Improvement of intestinal transit

- The claimed effect is "intestinal transit". The target population is assumed to be the general population. Improvement of intestinal transit within the normal range might be beneficial to human health.
- A cause and effect relationship has not been established between the consumption of "Lactobacillus *gasseri CECT5714* and *Lactobacillus coryniformis CECT5711*" and improvement of intestinal transit within the normal range.

DOCUMENTATION PROVIDED TO EFSA

Health claims pursuant to Article 13 of Regulation (EC) No 1924/2006 (No: EFSA-Q-2008-1724). The scientific substantiation is based on the information provided by the Member States in the consolidated list of Article 13 health claims and references that EFSA has received from Member States or directly from stakeholders.

The full list of supporting references as provided to EFSA is available on: http://www.efsa.europa.eu/panels/nda/claims/article13.htm.

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APPENDICES

APPENDIX A

BACKGROUND AND TERMS OF REFERENCE AS PROVIDED BY THE EUROPEAN COMMISSION

The Regulation 1924/2006 on nutrition and health claims made on foods⁴ (hereinafter "the Regulation") entered into force on 19th January 2007.

Article 13 of the Regulation foresees that the Commission shall adopt a Community list of permitted health claims other than those referring to the reduction of disease risk and to children's development and health. This Community list shall be adopted through the Regulatory Committee procedure and following consultation of the European Food Safety Authority (EFSA).

Health claims are defined as "any claim that states, suggests or implies that a relationship exists between a food category, a food or one of its constituents and health".

In accordance with Article 13 (1) health claims other than those referring to the reduction of disease risk and to children's development and health are health claims describing or referring to:

- a) the role of a nutrient or other substance in growth, development and the functions of the body; or
- b) psychological and behavioural functions; or
- c) without prejudice to Directive 96/8/EC, slimming or weight-control or a reduction in the sense of hunger or an increase in the sense of satiety or to the reduction of the available energy from the diet.

To be included in the Community list of permitted health claims, the claims shall be:

- (i) based on generally accepted scientific evidence; and
- (ii) well understood by the average consumer.

Member States provided the Commission with lists of claims as referred to in Article 13(1) by 31 January 2008 accompanied by the conditions applying to them and by references to the relevant scientific justification. These lists have been consolidated into the list which forms the basis for the EFSA consultation in accordance with Article 13 (3).

ISSUES THAT NEED TO BE CONSIDERED

IMPORTANCE AND PERTINENCE OF THE FOOD⁵

Foods are commonly involved in many different functions⁶ of the body, and for one single food many health claims may therefore be scientifically true. Therefore, the relative importance of food e.g. nutrients in relation to other nutrients for the expressed beneficial effect should be considered: for functions affected by a large number of dietary factors it should be considered whether a reference to a single food is scientifically pertinent.

It should also be considered if the information on the characteristics of the food contains aspects pertinent to the beneficial effect.

SUBSTANTIATION OF CLAIMS BY GENERALLY ACCEPTABLE SCIENTIFIC EVIDENCE

Scientific substantiation is the main aspect to be taken into account to authorise health claims. Claims should be scientifically substantiated by taking into account the totality of the available scientific data, and by weighing the evidence, and shall demonstrate the extent to which:

the claimed effect of the food is beneficial for human health, (a)

⁴ OJ L12, 18/01/2007

⁵ The term 'food' when used in this Terms of Reference refers to a food constituent, the food or the food category.

⁶ The term 'function' when used in this Terms of Reference refers to health claims in Article 13(1)(a), (b) and (c).



- (b) a cause and effect relationship is established between consumption of the food and the claimed effect in humans (such as: the strength, consistency, specificity, dose-response, and biological plausibility of the relationship).
- (c) the quantity of the food and pattern of consumption required to obtain the claimed effect could reasonably be achieved as part of a balanced diet,
- (d) the specific study group(s) in which the evidence was obtained is representative of the target population for which the claim is intended.

EFSA has mentioned in its scientific and technical guidance for the preparation and presentation of the application for authorisation of health claims consistent criteria for the potential sources of scientific data. Such sources may not be available for all health claims. Nevertheless it will be relevant and important that EFSA comments on the availability and quality of such data in order to allow the regulator to judge and make a risk management decision about the acceptability of health claims included in the submitted list.

The scientific evidence about the role of a food on a nutritional or physiological function is not enough to justify the claim. The beneficial effect of the dietary intake has also to be demonstrated. Moreover, the beneficial effect should be significant i.e. satisfactorily demonstrate to beneficially affect identified functions in the body in a way which is relevant to health. Although an appreciation of the beneficial effect in relation to the nutritional status of the European population may be of interest, the presence or absence of the actual need for a nutrient or other substance with nutritional or physiological effect for that population should not, however, condition such considerations.

Different types of effects can be claimed. Claims referring to the maintenance of a function may be distinct from claims referring to the improvement of a function. EFSA may wish to comment whether such different claims comply with the criteria laid down in the Regulation.

WORDING OF HEALTH CLAIMS

Scientific substantiation of health claims is the main aspect on which EFSA's opinion is requested. However, the wording of health claims should also be commented by EFSA in its opinion.

There is potentially a plethora of expressions that may be used to convey the relationship between the food and the function. This may be due to commercial practices, consumer perception and linguistic or cultural differences across the EU. Nevertheless, the wording used to make health claims should be truthful, clear, reliable and useful to the consumer in choosing a healthy diet.

In addition to fulfilling the general principles and conditions of the Regulation laid down in Article 3 and 5, Article 13(1)(a) stipulates that health claims shall describe or refer to "the role of a nutrient or other substance in growth, development and the functions of the body". Therefore, the requirement to describe or refer to the 'role' of a nutrient or substance in growth, development and the functions of the body should be carefully considered.

The specificity of the wording is very important. Health claims such as "Substance X supports the function of the joints" may not sufficiently do so, whereas a claim such as "Substance X helps maintain the flexibility of the joints" would. In the first example of a claim it is unclear which of the various functions of the joints is described or referred to contrary to the latter example which specifies this by using the word "flexibility".

The clarity of the wording is very important. The guiding principle should be that the description or reference to the role of the nutrient or other substance shall be clear and unambiguous and therefore be specified to the extent possible i.e. descriptive words/ terms which can have multiple meanings should be avoided. To this end, wordings like "strengthens your natural defences" or "contain antioxidants" should be considered as well as "may" or "might" as opposed to words like "contributes", "aids" or "helps".

In addition, for functions affected by a large number of dietary factors it should be considered whether wordings such as "indispensable", "necessary", "essential" and "important" reflects the strength of the scientific evidence.



Similar alternative wordings as mentioned above are used for claims relating to different relationships between the various foods and health. It is not the intention of the regulator to adopt a detailed and rigid list of claims where all possible wordings for the different claims are approved. Therefore, it is not required that EFSA comments on each individual wording for each claim unless the wording is strictly pertinent to a specific claim. It would be appreciated though that EFSA may consider and comment generally on such elements relating to wording to ensure the compliance with the criteria laid down in the Regulation.

In doing so the explanation provided for in recital 16 of the Regulation on the notion of the average consumer should be recalled. In addition, such assessment should take into account the particular perspective and/or knowledge in the target group of the claim, if such is indicated or implied.

TERMS OF REFERENCE

HEALTH CLAIMS OTHER THAN THOSE REFERRING TO THE REDUCTION OF DISEASE RISK AND TO CHILDREN'S DEVELOPMENT AND HEALTH

EFSA should in particular consider, and provide advice on the following aspects:

- ➤ Whether adequate information is provided on the characteristics of the food pertinent to the beneficial effect.
- ➤ Whether the beneficial effect of the food on the function is substantiated by generally accepted scientific evidence by taking into account the totality of the available scientific data, and by weighing the evidence. In this context EFSA is invited to comment on the nature and quality of the totality of the evidence provided according to consistent criteria.
- The specific importance of the food for the claimed effect. For functions affected by a large number of dietary factors whether a reference to a single food is scientifically pertinent.

In addition, EFSA should consider the claimed effect on the function, and provide advice on the extent to which:

- > the claimed effect of the food in the identified function is beneficial.
- ➤ a cause and effect relationship has been established between consumption of the food and the claimed effect in humans and whether the magnitude of the effect is related to the quantity consumed.
- where appropriate, the effect on the function is significant in relation to the quantity of the food proposed to be consumed and if this quantity could reasonably be consumed as part of a balanced diet.
- ➤ the specific study group(s) in which the evidence was obtained is representative of the target population for which the claim is intended.
- > the wordings used to express the claimed effect reflect the scientific evidence and complies with the criteria laid down in the Regulation.

When considering these elements EFSA should also provide advice, when appropriate:

> on the appropriate application of Article 10 (2) (c) and (d) in the Regulation, which provides for additional labelling requirements addressed to persons who should avoid using the food; and/or warnings for products that are likely to present a health risk if consumed to excess.



APPENDIX B

EFSA DISCLAIMER

The present opinion does not constitute, and cannot be construed as, an authorisation to the marketing of the food/food constituent, a positive assessment of its safety, nor a decision on whether the food/food constituent is, or is not, classified as foodstuffs. It should be noted that such an assessment is not foreseen in the framework of Regulation (EC) No 1924/2006.

It should also be highlighted that the scope, the proposed wordings of the claims and the conditions of use as proposed in the Consolidated List may be subject to changes, pending the outcome of the authorisation procedure foreseen in Article 13(3) of Regulation (EC) No 1924/2006.