

HEALTH CLAIMS, PRECAUTIONS AND WARNINGS ON OMEGA-3 FATTY ACID FOOD SUPPLEMENTS

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INTRODUCTION & AIM

Health claims listed on the labels of food supplements contain voluntary information that should facilitate **consumers' choices**, while mandatory precautions and warnings are intended to safeguard **consumers' well-being**. Consumers' interest in health has fueled the expansion of the market of **omega-3 fatty acid (w-3-FA) supplements**.

The study focused on the evaluation of the regulatory compliance of health claims and mandatory statements on the labels of w-3-FA supplements.

RESULTS & DISCUSSION

- 76 out of 97 supplements - **verbal health claims** - the active substance
- 68 supplements - **w-3-FA claims** → 59 compliant with regulations (31 - single claim, 28 - multiple ones; 107 claims in total) (Fig.1).
- The **intake of w-3-FA** - not always appropriate to support the given claims (one supplement provided only 6% of the required dose) (Fig.2).
- The majority of the supplements contained **mandatory statements** (Fig.3), and some of them **warnings** and **precautions** (Fig.4).

METHOD

A cross-sectional study - **regulatory compliance** of w-3-FA supplements in terms of labelled:

- ❖ **health claims** - according to the EU register of health claims
- ❖ **mandatory statements** – according to the EU regulations

97 supplements included in the study were produced in numerous European countries and marketed in Serbia, whose regulatory framework is harmonized with the one in the EU, but in contrast requires the premarket registration of food supplements.

Intake of w-3-FA was calculated based on the labelled content of w-3-FA and recommended use of the supplement.

CONCLUSION

Along with questionable consumer understanding of health promotion claims, the volume and severity of misleading claims is posing considerable concerns for public health, urging stricter control of supplement labeling.

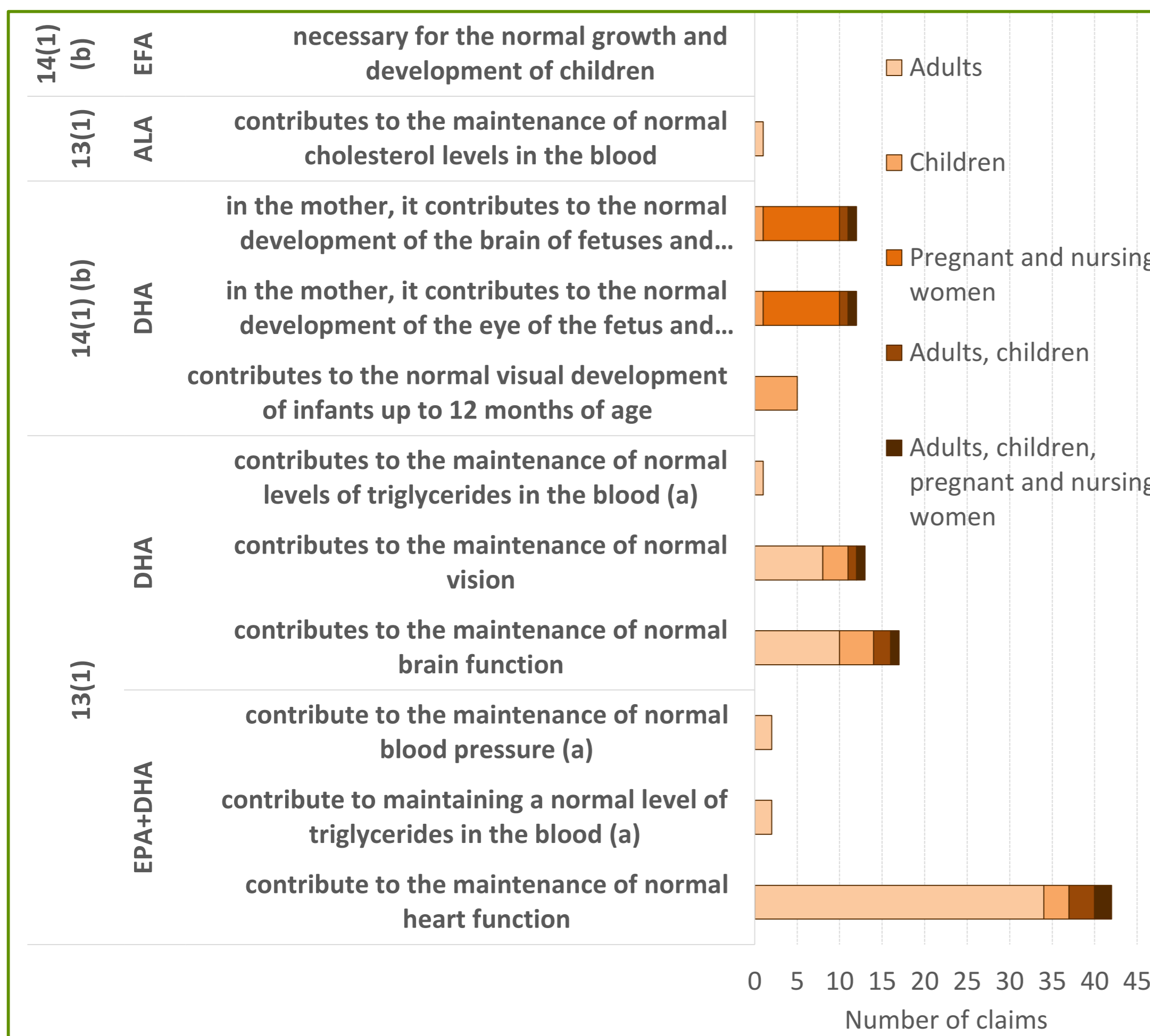


Figure 1. Authorized health claims referring to omega-3 fatty acids listed on supplement labels, categorized by the type of fatty acid and the regulation article to which the claim pertains (Article 13(1) – general claims and Article 14(1)(b) – claims related to children's health, displayed by target population groups. Note: (a) Usage restriction: The statement will not be used for food intended for children.

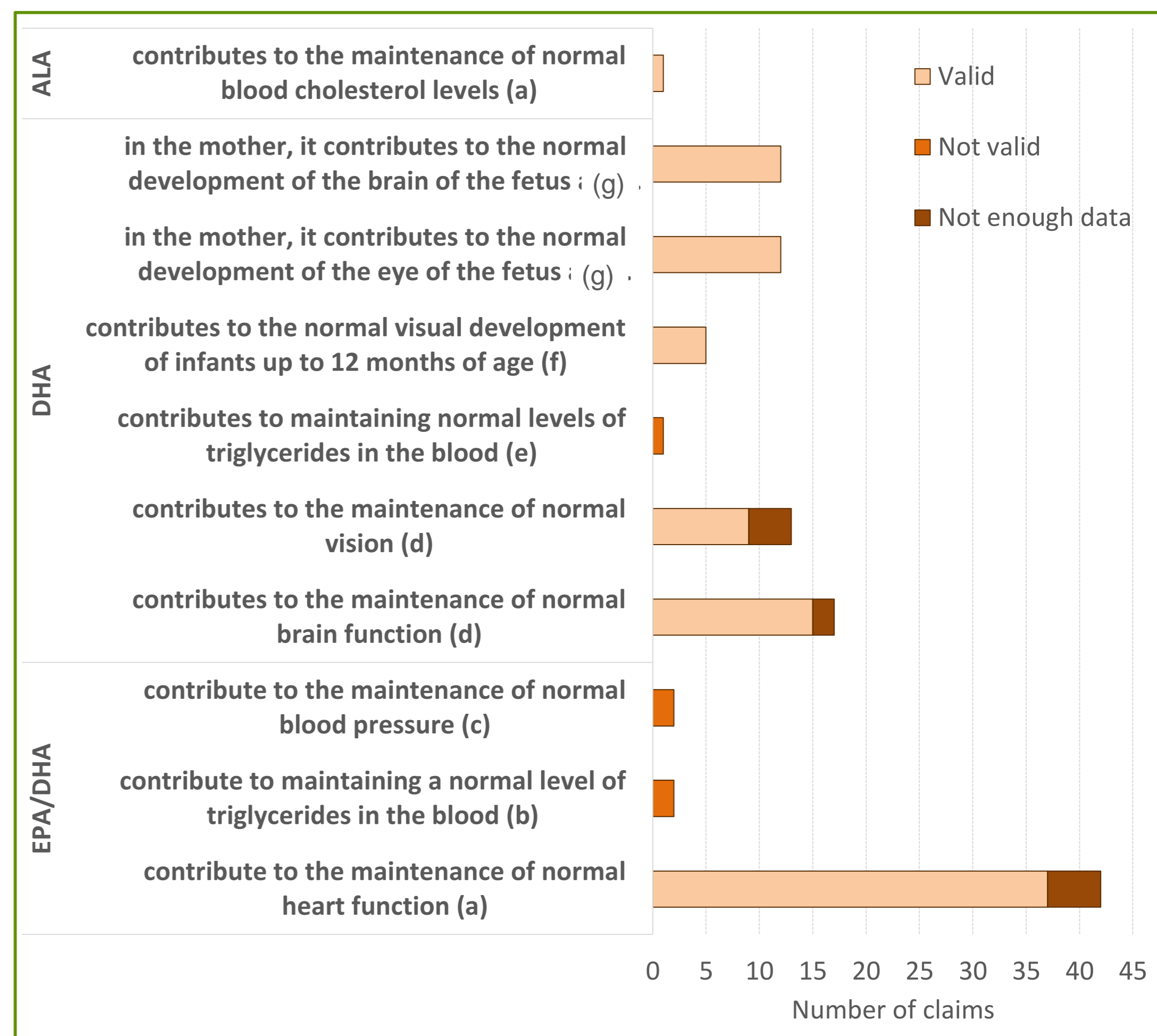


Figure 2. Validity assessment of claims based on ω -3-FA intake from supplements in relation to the intake requirements for foods bearing omega-3 claims. Notes: (a) A food that is at least a source of omega-3 fatty acids (at least 0.3 g of ALA per 100 g and per 100 kcal, or at least 40 mg of the combined EPA and DHA per 100 g and per 100 kcal). (b) A food that provides a daily intake of 2 g of EPA and DHA (c) A food that provides a daily intake of 3 g of EPA and DHA (d) Food that contains at least 40 mg of DHA per 100 g and per 100 kcal (e) Food that provides a daily intake of 2 g of DHA and contains DHA in combination with EPA (f) Food must contain at least 0.3% of its total fatty acids as DHA (g) Food that provides a daily intake of at least 200 mg of DHA

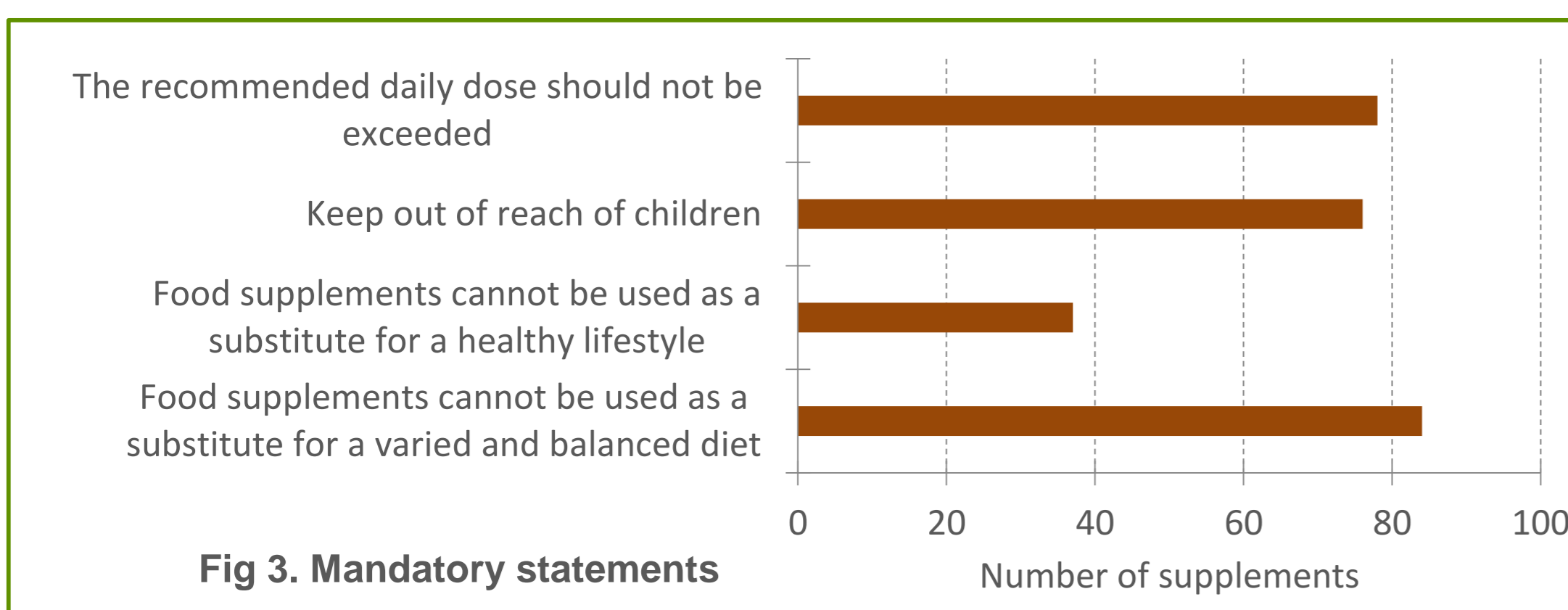


Fig 3. Mandatory statements

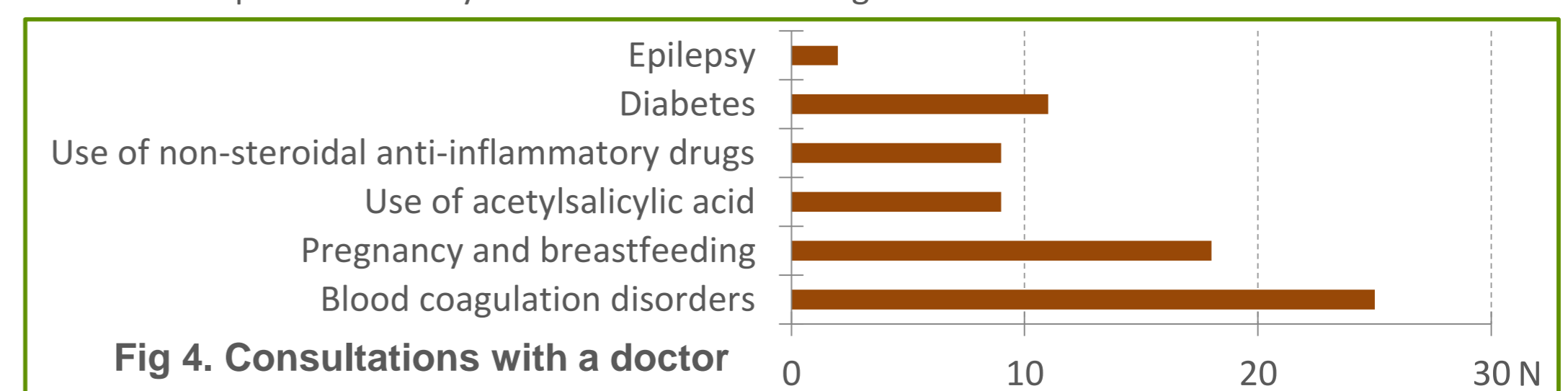


Fig 4. Consultations with a doctor