

## informing the food industry

## Navigate the Science. Manage the Risk.

NZMS Scientific Food Allergen Seminar Auckland, 20 August 2019 Christchurch, 22 August 2019

#### **Debbie Hawkes**

Director, Allergen Bureau (General Manager –Quality & Operations ANZ, Hawkins Watts)



## **Quick Poll:**

How many people in the room have a Food Allergy or have a close relative with a Food Allergy?





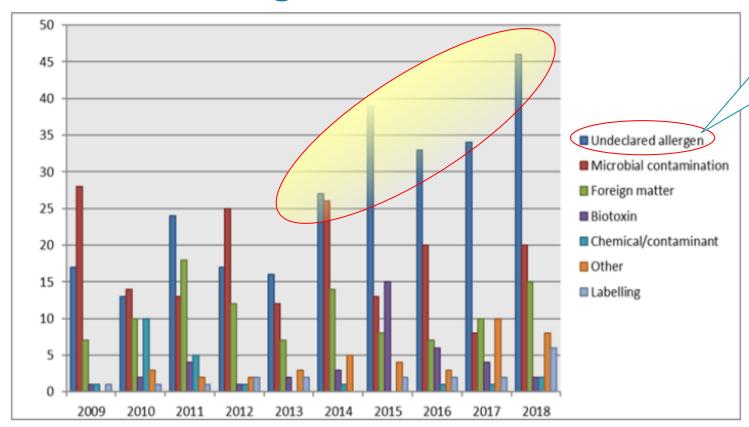
#### **Overview**

- FSANZ Allergen related recall stats
- Who is the Allergen Bureau? Mission & Vision
- Why is this topic so important?
- VITAL® Program
- FAMS2019, VSEP & transition VITAL 2.0 to VITAL 3.0
- Allergen Risk Review Website
- Further AB Working Groups & Recent Activities
  - ✓ VITAL Standard Certification
  - ✓ Risk Review Anomalies
  - ✓ Food Industry Guide to Allergen Management and Labelling
  - ✓ Agricultural Cross Contact Working Group
  - ✓ Food Allergen Analysis added to Website





## **FSANZ Allergen related Recall Stats**



Source: http://www.foodstandards.govt.nz/industry/foodrecalls/recallstats/Pages/default.aspx

Undeclared Allergens are still the major cause of FSANZ (Australian) recalls (46% in 2018)

## FSANZ identified key causes for allergen related recalls:

- ✓ Packaging errors
- ✓ Supplier allergen verification
- ✓ Lack of skills/knowledge of labelling requirements
- ✓ Accidental cross contamination

#### 2019 MPI NZ stats:

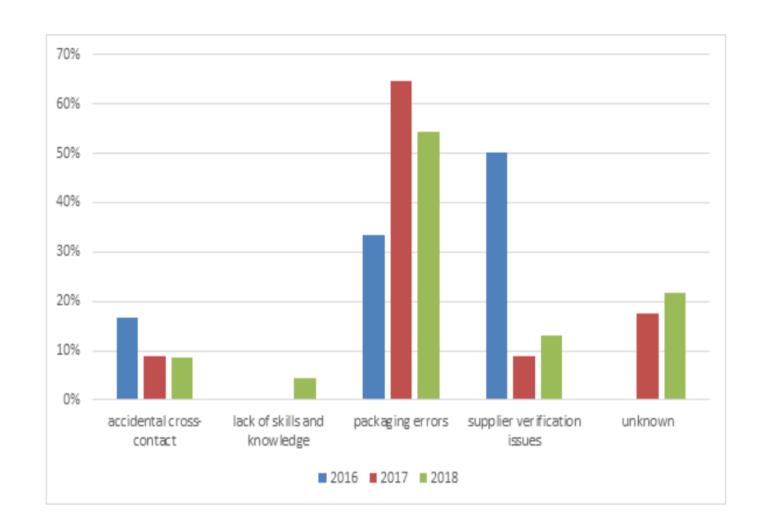
26/49 (53%) Undeclared allergen



# Reasons for Allergen recalls?

- 1. Packaging errors
- 2. Supplier verification
- 3. Unknown
- 4. Accidental cross contact
- 5. Lack of skills/knowledge of labelling requirements

http://www.foodstandards.gov.au/industry/foodrecal ls/recallstats/Pages/allergen-stats.aspx Figure 4







## Overcoming these statistics

- ✓ Ensure the business has a robust allergen management plan
- ✓ Implement a risk assessment tool. e.g. VITAL®
  - Eliminate and reduce the allergen risk in your facilities
  - Understand and manage the risk





### Who is the Allergen Bureau?

- The Allergen Bureau is the peak industry body representing food industry allergen management in Australia and New Zealand
- The Allergen Bureau is a membership based organisation established to provide food industry with rapid responses to questions about allergen risk management in food ingredients and manufactured foods
- Established 2005, pre-competitive,
   'not-for-profit', industry volunteer Board

#### Full Members:





































































#### The Allergen Bureau – Our Vision and Mission

#### Vision

 The Allergen Bureau is a globally recognised and supported industry organisation promoting best practice food industry allergen management, risk review and consistent labelling to facilitate informed consumer choice

#### **Mission**

- To facilitate a globally accepted, consistent, science-based approach to food allergen risk assessment, management and communication that:
  - guides industry best practice
  - assists allergen sensitive consumers to make informed choices based on label information



### **Allergen Bureau Organisation**

#### **Board of Directors**

Kirsten Grinter (Nestlé Australia Ltd)
Caroline Gray (DuPont)
Debbie Hawkes (Hawkins Watts)
Jasmine Lacis-Lee (DTS Food Assurance)
David Henning (Invited Director)

#### Our support network

VITAL® Coordinator / Support Georgina Christe

Technical expertise Simon Brooke-Ta

VITAL Scientific Expert Panel (VSEP)

Georgina Christensen & Lisa Warren

Simon Brooke-Taylor & Robin Sherlock

#### **Funded Secretariat**

Tom Lewis, Ray Murphy, Alice Doyle



NZMS Aug 2019

## Top ten countries visiting Allergen Bureau website

Australia (40%) Germany (4%)

New Zealand (8%) Spain (3%)

United Kingdom (7%) France (2%)

United States (7%) India (2%)

Netherlands (4%) Italy (2%)

10,923 Non-bounce sessions Jan – Jul 2019







## VITAL® Online subscriptions

- Over 3100 registered organisations use the VITAL<sup>®</sup> Online, with over 4850 individual users
- Top 10 Countries by users
  - ✓ Australia
  - ✓ New Zealand
  - √ Netherlands
  - ✓ United Kingdom
  - ✓ Germany
  - ✓ Spain
  - ✓ Italy
  - ✓ United States
  - ✓ Belgium
  - ✓ France



International Interest still growing









Tools & Helpline



Risk Review Anomalies









(WG3) Certification





(WG1) Risk VITAL Online



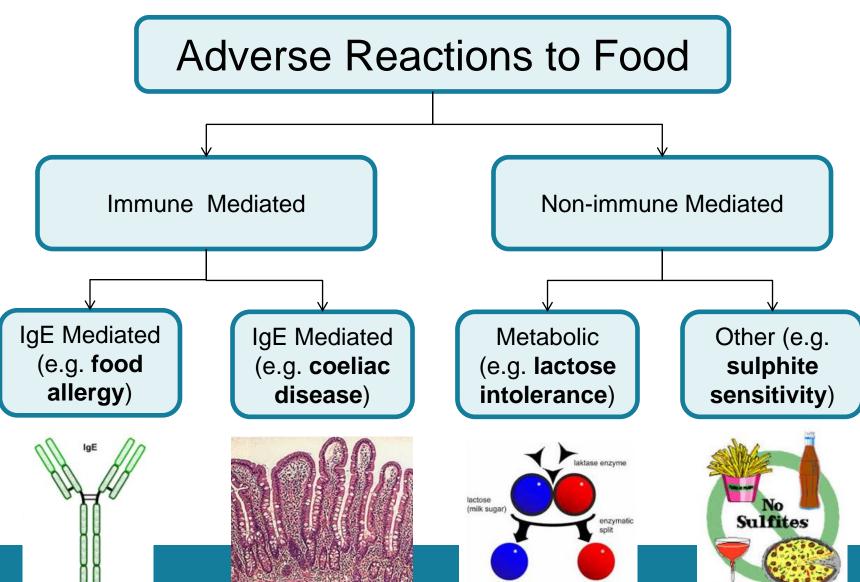




## Why is this so important?









## Some symptoms of an allergic reaction to a food







Urticaria

**Atopic Dermatitis** 

Anaphylaxis



#### The allergic reaction

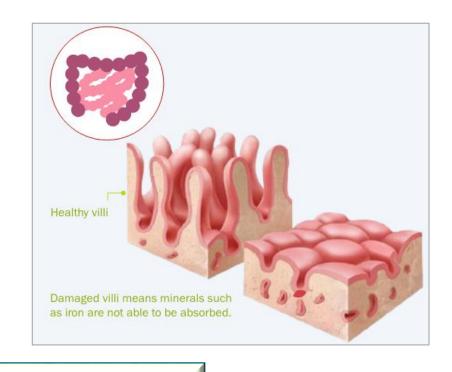
- Dermal skin breaks out in hives or eczema
- Gastrointestinal nausea, cramps, diarrhoea
- Respiratory struggle for air
- Circulatory blood pressure drops, lose consciousness

Anaphylaxis is an acute allergic reaction ~ in rare cases, multiple organ systems are affected and death can occur in as little as ten minutes



#### Coeliac disease

The immune system reacts abnormally to gluten (a protein found in wheat, rye, barley and oats) causing small bowel damage.



Wheat allergy (allergic response to wheat protein) is different to coeliac disease (immune response to gluten proteins)



#### **Food intolerance**

Detrimental reaction to food – not a food allergy. Symptoms are generally less serious than true food allergy and often limited to digestive problems.



Lactose intolerance is an example where a person is intolerant to the lactose carbohydrate in milk which is different to an allergy to milk protein



### **Sulphite intolerance**

Sulphites are a family of preservatives permitted for use in some food and drinks. (Additives 220-228)

Sulphite intolerance can trigger asthma symptoms in individuals with underlying asthma.

Wheezing is the most common reaction to sulphites. In very rare cases however, anaphylaxis can occur.



### Impact of food allergy

- > There is currently no cure
- > Sensitivity differs between individuals, depends on type of food, amount ingested and other activities at time of ingestion
- People with food allergy do not know when their next allergic reaction will occur or how severe it will be.
- ▶ But 65% of food products in Australian supermarkets have a Precautionary Allergen Label (PAL).
  Are they all valid?



Avoidance of the food is the only protection



### Food allergy rates increasing in Australia & New Zealand

#### Food allergy affects\*

- > 11% infants
  (up to 12 months old)
- > 4-8% children (up to 5 years)
- > ~2% adults

- Rapid increase in food allergic disease in last 30 years in mainly the Western world
- 80% of children outgrow milk, egg, soy and wheat allergy by age 5
- individuals allergic to peanuts, tree nuts, sesame or seafood will have this for life

<sup>\*</sup>ASCIA 2015 www.allergy.org.au

Pre rea lal

Inques died or



Sonja

Cadbury has year-old Isal the allergen

> By Thomas Burrow 20 Sep 2018, 11:39 I

> allergic

after 'al

confuse

packet







A NINE-YEAR-C wrong Cadbury packaging.

Isabel Marrero mum Helen gar Milk mislabelled in coconut

RESIDENCE NATIONAL HEALTHCAR

Child aged 10 dies after drin importer admits label charge

At the time, the responding hospital was not required to and did not notify the department that this Coconut beverage was the suspected cause of the boy's anaphylactic reaction.

As a result the Coconut milk remained in the marketplace for six weeks before being recalled, putting other milk-allergic consumers at risk.

By Tim Barlags

5 d Ram, first published in



A 10-year-old child died from an allergic reaction after drinking a "natural" coconut drink imported by a Sydney firm.

The canned product from Taiwan, Greentime Natural Coconut Drink, is sold in most states and was recalled just over a month later following the tragedy in December 2013. But it was never revealed that it was blamed for causing the fatal anaphylactic reaction in the child from Melbourne.

The NSW Food Authority said importer Narkena Pty Ltd based in western Sydney, pleaded guilty in September to three labelling charges and will be sentenced later this

The authority said the company entered pleas of guilty to two charges that the drink was labelled in a way that falsely described the food and to one charge of selling food in a manner that contravened the Food Standards





A 15-y contai always

▲ Natasha

at Heathro

The sa

on its "

This is way the

vear before a teenage sc



#### What is the new law?



## Victorian Public Health & Wellbeing Act 2008, effective from 1 November 2018.

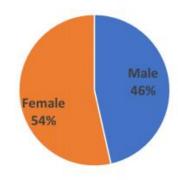
- All Victorian public and private hospitals must notify the department of all cases presenting to hospital for treatment of anaphylaxis.
  - All ages, all causes: food, blood-derived products, drugs, vaccine, insect venom, other/unknown included.
- Public Health and Wellbeing Regulations 2009 prescribe the manner and period for notification.
- Australian first.

Copied from presentation by Erica Clifford, Dept Health & Human Services, Victoria



#### Preliminary data 1 November 2018 – 1 May 2019 (26 weeks)

1200 notifications in total46 per week on average



#### <u>Timeliness:</u>

Packaged food notifications received: 24 hr from diagnosis

All other notifications received:
 1-2 days on average

#### Context of reaction:

- 46% of food-related cases are first time reactions
- Majority of remaining food cases involve consumption in error



#### Data gathered



#### **Case information**

- Demographics (age, gender, country of birth)
- Adrenaline auto-injector carriage
- Prior history of allergy
- Circumstances around food consumption (accidental, Precautionary Allergen Labelling)

#### Food Related

#### Suspected cause of anaphylaxis

Packaged food – type and brand

Unpackaged food from food premises – food, premises

Food – other

Blood-derived product – product, batch number

Drug – type, name

Vaccine – type, name

Insect venom – insect type

Other – details of suspected cause

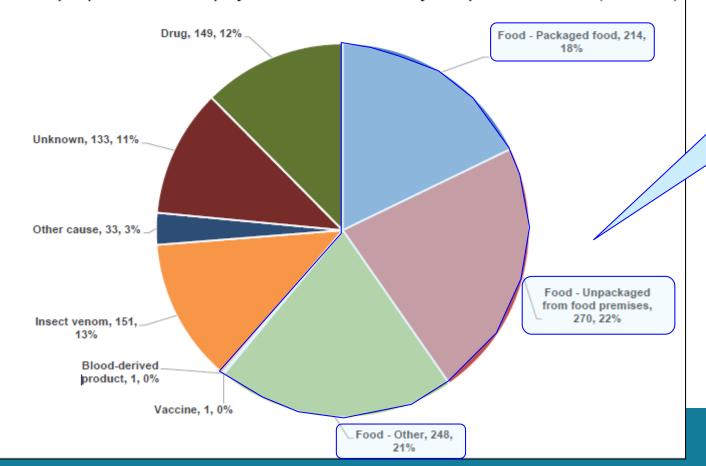
Unknown - any relevant details



#### Preliminary data

1 November 2018 – 1 May 2019, Victoria

Number and proportion of anaphylaxis notifications by suspected cause (n=1200)



Food Related 214, 18% 270, 22% 248, 21% 732, 61%



## Labelling examples

Contains soy and milk
BUT
no soy or milk in ingredient list







## Labelling examples







## Labelling examples -

Same/Similar product but 3 different allergen positions

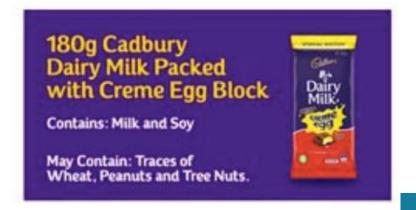


Contains: Milk, Soy + Egg and Wheat





Contains: Milk, Soy





### Labelling examples – "Gluten Free"



Be aware "Gluten-Free" has different definitions around the world.

Codex & EU, US "Gluten-Free" is <20 ppm

FSANZ Sched 4-3: Nutrition, health & related claims:

The food must not contain:

- (a) detectable gluten; or
- (b) oats or oat products; or
- (c) cereals containing \*gluten that have been malted, or products of such cereals.



### Labelling examples - Improvement

2018 – Milk removed



2019 – Egg added, Soy removed





## Why should the food industry manage food allergens?

- Protect allergic consumers
- Consumers depend on food that is labelled correctly
- Food safety necessity
- Legal requirement for declaring food allergens, and providing safe food
- Costly to have non-compliance, allergen issues with consumers, recalls, withdrawals, re-labelling





















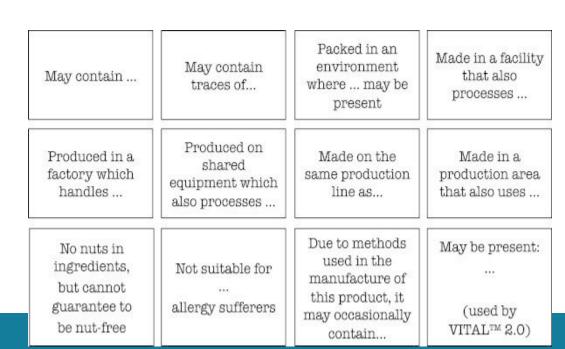
## The VITAL® Program





## VITAL Program – Why was it developed?

- May contain ...... Inconsistent use of Allergen Risk Assessment
- Proliferation of cross contact statements across the industry, survey of 350 products in 2005 revealed 42 creative statements!
- Allergic consumers were ignoring cross contact statements
- Action levels varied between manufacturers, no consistency







## Voluntary Incidental Trace Allergen Labelling

The VITAL® Program is a standardised allergen risk assessment process for food industry







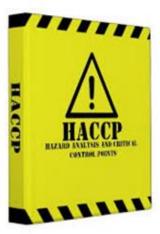


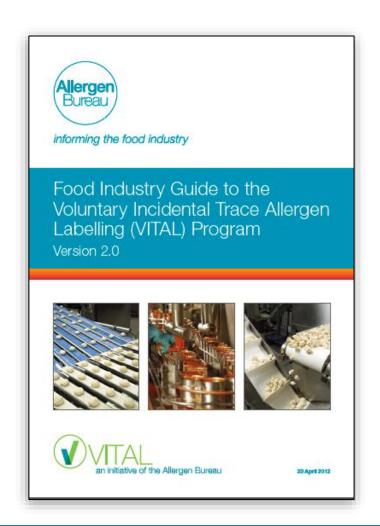
### The VITAL® Program MUST be part of ...

An established allergen management plan

which includes...

a HACCP based food safety program that is adapted for allergen control









#### The 10 Steps of VITAL®

- 1. Determination of relevant allergens
- 2. Identification of intentionally added allergens
- 3. Identification and quantification of cross contact allergens due to ingredients
- 4. Identification and quantification of cross contact allergens due to processing
- 5. Calculation of total cross contact allergen in finished product
- Determination of Action Levels
- 7. Review of labelling recommendations and sources of cross contact
- 8. Recording of assumptions
- 9. Validation of VITAL assessment
- 10. Ongoing monitoring

Consider VITAL as a systematic allergen risk assessment tool.

It's not just about cross contact!







#### VITAL® Training

- Available through endorsed training providers
- Obtain VITAL training certificate by attending the training course
- Endorsed training providers listed on AB website



#### VITAL® Training Providers Region/Countries of Delivery

Training Providers Home Base	Training Provider Name	Languages	Region/Country of VITAL Training Delivery										
			Australia	NZ	SE Asia	North Asia	Pacific	Africa	Europe	USA & Canada	Mexico & S.America	Virtual (V)	Online (O)
	BSI Group	English	•						•				
Ą	DTS FACTA	English				(V) Only		(V) Only	•		(V) Only		
Australia	HACCP Mentor	English			(V) Only	(V) Only		(V) Only	•		(V) Only		
	Integrity Compliance Solutions	English			SE Asia. India	China, Japan, Korea		(V) Only	•		(V) Only		
New Zealand	SIS Training & Consulting Ltd	English		•									
Africa	FACTS							•					
	Allergenen Consultanoy	Dutch, English							NL, BE, (Other countries (V) on request)				
m Er	Eurofins Analytics France	French (English, German)							All French speaking countries, UK and NL, DEU on request.				
Europe	FIS Europe	German, English							DEU, AUT, NL, OH, BE, UK				
	ifp - Institut für Produktqualität	German, English							DEU, AUT, CH (in German). Other EU countries in English				
	KTBA FoodCampus	Dutoh, English							NL, BE				
North America	Sabal Food Safety Consulting	English, Spanish							•	•	•		



### FAMS2019, VSEP & new Reference Doses



informing the food industry

Summary of the VITAL Scientific Expert Panel Recommendations





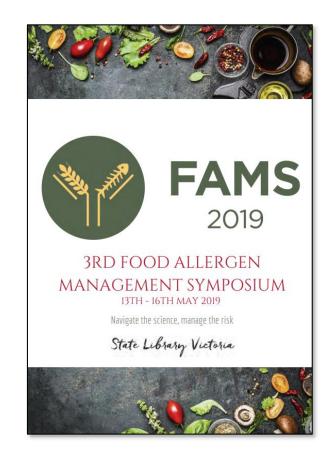




## FAMS2019 3<sup>rd</sup> Food Allergen Management Symposium Navigate the science, manage the risk

#### **Key Speakers**

- ✓ Professor Steve Taylor, Food Allergy Research & Resource Program, University of Nebraska, USA
- ✓ Joseph Baumert, Food Allergy Research & Resource Program, University of Nebraska, USA
- ✓ René Crevel, René Crevel Consulting Ltd
- ✓ Samuel Godefroy, Université Laval, Québec, Canada
- ✓ Jonathon Hourihane, University College Cork, Ireland
- ✓ Derek Castles, Food Standards Australia New Zealand
- ✓ Professor Clare Mills, The University of Manchester, UK
- ✓ Ben Remington, Netherlands Organisation for Applied Scientific Research
- ✓ Maria Said, Allergy & Anaphylaxis Australia, Australia
- ✓ Penny Jorgensen, Allergy New Zealand, NZ
- ✓ Sandra Vale, National Allergy Strategy, Australia



http://allergenbureau.net/resources/ conference-presentations/2019conference-presentations/





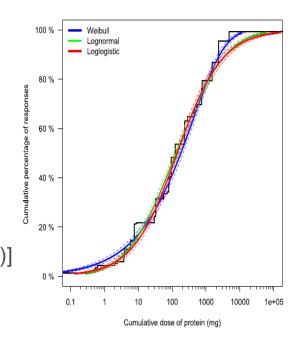
#### VSEP: More clinical data, better modelling => new Reference doses

Refer: Ben Remington (TNO) - The Modelling Behind the Translation from Individual Thresholds to Population Threshold Dose Distribution at FAMS2019.

Project determines how individual thresholds from food allergic subjects can be grouped and analyzed statistically to determine population threshold for a number of food allergens.

Based on objective Double blind, placebo-controlled food challenges, with description of NOEAL (No observed adverse effect level) and/or LOAEL (Lowest observed adverse effect level)

Collaboration between FARRP, TNO & Matthew Wheeler, US CDC [(NIOSH)] resulted in the development a new Stacked Model Averaging program. This incorporates 5 different statistical models. (Weibull, Log Logistic, Log Normal, Log Double Exponential, General Pareto)



Better modelling accounts for study-to-study heterogeneity (different locations, clinicians etc)

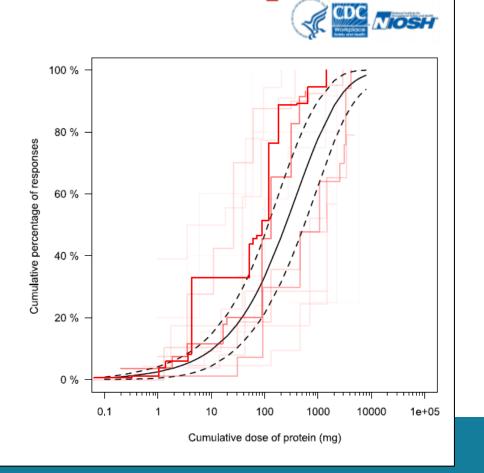




#### **VSEP:** More clinical data, better modelling => new Reference doses

#### **Stacked Model Averaging**

- Account for uncertainty in the survival curve by using a weighted average of the individual distributions based on "Goodness of Fit"
- Account for Study-to-Study heterogeneity
  - i.e. different locations, different protocols, different clinicians or nurses, etc
  - However, n = 1 case studies are no longer able to be included in the dataset for use
- Combine all knowledge to create an "averaged" distribution







#### VSEP Recommended Reference Doses (mg protein)

Allergen	No. of individuals	VITAL 2.0 Ref Dose (mg protein)	2019 VSEP Ref Dose (mg protein) [ED01] => VITAL 3.0	Change	2019 VSEP Ref Dose (mg protein) [ED05]
Egg	431	0.03	0.2	<b>↑</b>	2.3
Hazelnut	411	0.1	0.1	✓	3.5
Lupin	25	4.0	2.6	Ψ	15.3
Milk	450	0.1	0.2	<b>↑</b>	2.4
Mustard	33	0.05	0.05	✓	0.4
Peanut	1306	0.2	0.2	✓	2.1
Sesame	40	0.2	0.1	Ψ	2.7
Shrimp	75	10.0	25	<b>↑</b>	280
Soy (milk + flour)	87	1.0 (soy flour)	0.5	•	10.0
Wheat	99	1.0	0.7	Ψ	6.1
Cashew	245		0.05		0.8
Celery	82		0.05		1.3
Fish	82		1.3		12.1
Walnut	74		0.03		0.8

*ED* = Eliciting Dose

**ED01** = 1% of allergic consumers may have mild transitory reaction

ED05 = 5% of allergic consumers may have mild transitory reaction



#### The VSEP Recommendation Impacts for VITAL®

#### **Considerations for Allergen Bureau**

- ✓ Need to strike a balance between blanket labelling and not labelling effectively
- ✓ Increasing global interest in VITAL so we need to ensure acceptance, integrity and trust until consensus emerges

#### Methodology

Moved to Stacked Model Averaging which gives more robust science

#### Reference Dose based on ED01

1% of allergic consumers could have a mild reaction
This allows the majority of allergic consumers to eat a normal diet
More consistent approach across all reference doses
Some references doses will change, and new reference doses added







## VITAL 2.0 to VITAL 3.0 Reference Dose Changes ED01 (mg protein)

Allergen	VITAL 2.0	VITAL 3.0
	Dose Increased	<b>↑</b>
Egg	0.03	0.2
Milk	0.1	0.2
Shrimp	10	25
Fish	0.1	1.3
Reference L	ose No Change	• ✓
Hazelnut	0.1	0.1
Peanut	0.2	0.2
Mustard	0.05	0.05
Reference I	Dose Decreased	4 ↓
Lupin	4.0	2.6
Soy (Milk & Flour)	1.0	0.5
Wheat	1.0	0.7
Sesame	0.2	0.1
New Re	eference Dose	
Cashew (Pistachio)	XXX	0.05
Celery	XXX	0.05
Walnut (Pecan)	XXX	0.03







Caution

Work in Progress

#### Transition VITAL® 2.0 to VITAL® 3.0

- VITAL 2.0 is the current version in VITAL Online & assessments should continue to be done using this
- Current work in progress target completion for launch at Oct 24 AGM:
  - ✓ Enhance Online program update functionality to support VITAL 3.0 transition e.g. Update All recipes, Summary of recipes by allergen status, Recipe change history.
  - √ Formalise VSEP recommendations report
  - ✓ Update the VITAL Guide
  - ✓ Update VITAL Training Package to include Risk Review website and VITAL 3.0
  - ✓ Update FIGAML (Food Industry Guide to Allergen Management and Labelling)
- So VITAL Online users should review the new Reference Doses, and be aware of changes increases, decreases, or new in the change to VITAL 3.0
- It is important that the process of doing an overall risk review and a VITAL risk assessment will not change. The basis of the VITAL Program continues to be good risk review and good manufacturing processes (GMP).



#### Allergen Risk Review Website



through the process



#### Risk Review vs Allergen Management Definition



- Documented systematic approaches
- Identify allergen risks, allergen challenges in manufacturing
- Cover all aspects of supply chain

Similar but not the same

#### Allergen Management

the procedures, policies and practices contributing to the control of allergens within a food business.

#### Risk Review

the process of thoroughly investigating the allergen status of a food.

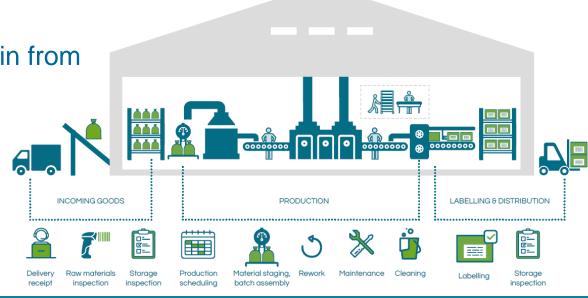




#### **Allergen Risk Review Website**

- ✓ Detailed guidance to investigate allergen status of a food.
- ✓ Interactive webpage accessible from the Allergen Bureau website to guide the user to do best practice Allergen Risk Review.
- ✓ Appropriate for a broad food industry audience (local, international, SME, corporations)
- ✓ Expandable to include entire supply chain from primary production to finished product.
- ✓ A flexible, living document.
- ✓ Lots of detail, but easy to use and focus on specific areas of concern.

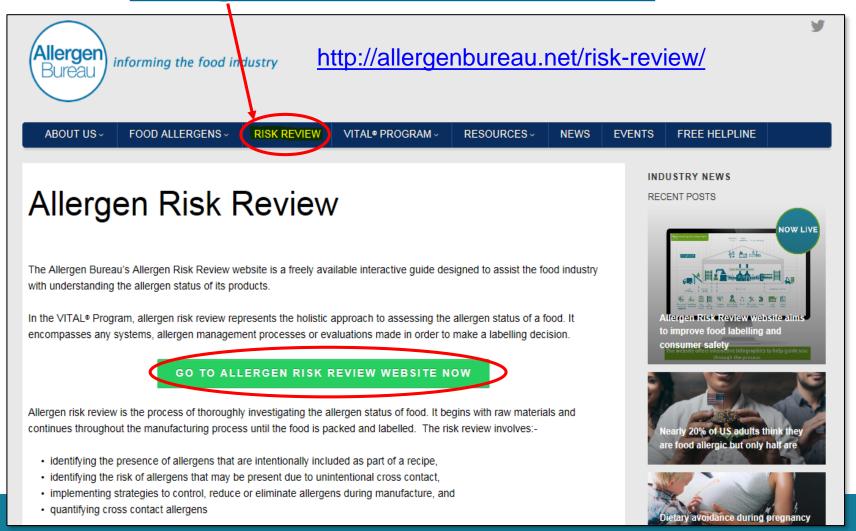
We welcome your feedback!!







#### **Allergen Risk Review website**









#### Allergen Risk Review Website Advantages

- Freely available
- Provides information about allergen risk review
- Reassurance for decisions and assumptions
- Visual tool to show allergen impact
- Share within your organisation
- Inform international suppliers





# Further Allergen Bureau Working Groups & Recent Activities







#### VITAL® Standard - Certification

- VITAL Standard has been written in compliance with ISO 17065.
- Designed as an extra module for GFSI-recognised certified sites with HACCP based Allergen Management Programs.
- VITAL certification is product specific.
- Has been trialled by a few companies and Certification bodies to ensure it can be interpreted & applied consistently.
- Current work in progress to manage the VITAL Standard, including developing Industry & Auditor training/competency, and providing required support and agreements for Certification bodies.
- VITAL Standard to be launched at Allergen Bureau AGM 24<sup>th</sup> Oct.
- Application to JAS-ANZ for accreditation to be determined based on industry need







#### VITAL® Standard – Certification & VITAL Mark

- Optional on-pack mark for VITAL Std certified products
- Must be placed next to ingredient list, as it is an endorsement of the integrity of the allergen labelling.
- Don't want VITAL mark to be misinterpreted as "Allergen Free"
- All VITAL Std certified products will be listed on Allergen Bureau website register.











#### Risk Review Anomalies

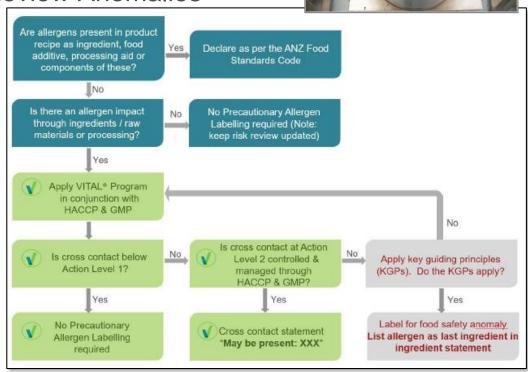
AB, Ai Group & AFGC - working together on Risk Review Anomalies

Anomaly = Allergens known to be present at significant levels but not formulated as an ingredient & inappropriate to label as "May be present XXX".

Occur where the process or environment cannot be altered or impacted through GMP.
e.g. Milk/Dairy in Dark Chocolate due to single conch

Collaborated with ANZ jurisdictions, Allergy NZ, and Allergy & Anaphylaxis Australia (A&AA).

Guiding principles & decision tree published to ensure appropriate labelling for the food allergic consumer. <a href="http://allergenbureau.net/about-us/allergen-bureau-working-groups/">http://allergenbureau.net/about-us/allergen-bureau-working-groups/</a>



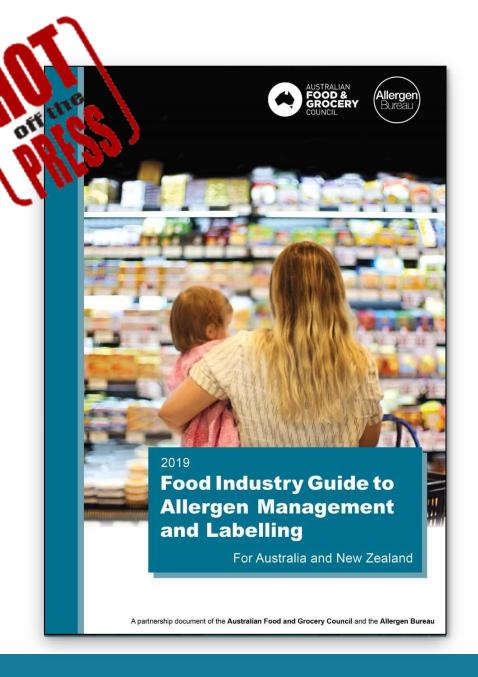
**N.B.** Declaring the allergen substance, ie milk, as the last ingredient in the ingredient list is not a substitute for appropriate risk review. Every attempt should be made to eliminate the allergen effectively.



## Food Industry Guide to Allergen Management and Labelling

#### **TABLE OF CONTENTS**

1. INTI	RODUCTION	2
1.1	Food Allergy, Intolerance & Coeliac Disease	3
1.2	Regulatory Requirements	7
2. ALL	ERGEN MANAGEMENT	14
2.1	Overview	14
2.2	Allergen Management	14
2.3	Allergen Risk Review	16
2.3	Allergen Analysis	17
3. ALL	ERGEN LABELLING & COMMUNICATION	19
3.1	Overview	
3.2	Allergen Labelling Best Practice	19
3.3	Allergen Declaration	23
3.4	Allergen Communication	
4. FOC	DD RECALLS	35
5. APP	PENDIX	37
5.1	Food Recall Case Studies	37
5.2	Management of Reports of an Alleged Allergic Reaction	39







#### **Agricultural Cross Contact Working Group –**

Peanut in Chinese Garlic



Copied from presentation by Joanne Price, Langdon Ingredients





#### Agricultural Cross Contact Working Group –

Gluten & Soy in Australian Maize

Maize – Gluten and Soy



Grown in Australia for over 150 years.

Grown in Queensland and NSW

- Maize and Soy bean Summer crops
- Cereal crops (Wheat, Barley Winter crops)

Gluten

6 Years of Gluten batch testing per pallet Majority <5ppm Sporadic Gluten detections

#### Soy

Some of the contracted farms also grow soybean, not a rotational crop

Nil soy detection



Copied from presentation by Joanne Price, Langdon Ingredients





#### Agricultural Cross Contact Working Group –

Gluten in Turkish Oregano



Oregano is derived from Turkey – Potential cross contact from field level wild wheat & barley

EU <20ppm gluten tolerance

Comparing composite versus individual sample testing

- Composite Sampling of the 1st and every 20th bag (composited sample of 10 bags) = 18ppm gluten
- Individual testing of the same lot no. revealed

>80ppm	7/0	CA .	26	10	10	<b>∠</b> E
>00PPIII	/0	04	20	13	10	<b>V</b> 3
The second second			10000	2007	1000	

Validation testing illustrated composite testing can dilute a result

Samples	Highest	Lowest	Composite	
n=10	15ppm	<5ppm	7.5ppm	
n=5	16ppm	11ppm	14ppm	
n=10	19ppm	<5ppm	11.8ppm	



Copied from presentation by Joanne Price, Langdon Ingredients





#### **Agricultural Cross Contact Working Group**

- Food industry driven working group
  - > Intent is to identify and communicate the challenges in this area
  - Provide guidance on assessing the risk
  - > Provide guidance to determine labelling outcomes
  - > Inform international suppliers
- Phase 1 and Phase 2
- Board approved April 2019





#### **Agricultural Cross Contact Working Group**

#### **Phase 1 - Quick Wins for Industry**

- 1. Update "Unexpected Allergens in Food" resource
- 2. Develop agricultural cross contact issue flow chart
- 3. Publish an informative paper
- 4. Guidance resource on ingredient allergen declarations from suppliers/growers
- 5. Sampling and testing guidance
- 6. Establish cross sectoral working relationship

#### **Phase 2 - Overarching Guidance document**

7. Agricultural allergen cross contact Food Industry Management Guide



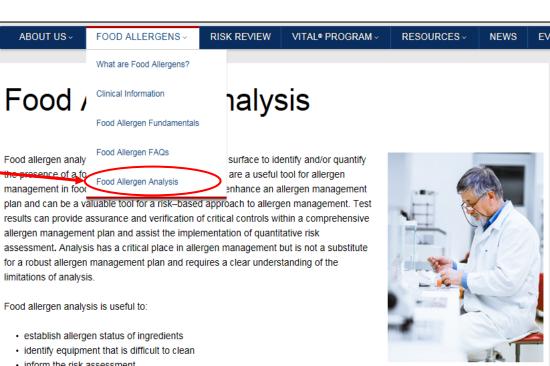




#### Food Allergen Analysis – Website Addition

#### Includes valuable guidance on:

- Sampling Plans
- Test Kits and their uses
- Types of Laboratory Analysis
- How to choose the most appropriate method
- What you should be asking your laboratory providers?



- · inform the risk assessment
- · confirm VITAL® (Voluntary Incidental Trace Allergen Labelling Program) assumptions
- · verify final product status in high risk environments
- monitor effect of critical changes

Allergen analysis has a place in finished product testing and verifying free from claims, but a single test result should not be considered in isolation and choosing the correct type of analysis and test can be complex. The analysis should be appropriate for the matrix and allergen and the method chosen should be robust, reliable, repeatable, sensitive and specific. As with all food testing methods, results are only representative of the samples tested and it is of critical importance to use an appropriate riskbased Sampling plan.

Sampling Plan

Quantitative assessment of cross contact allergens using analytical testing should consider the sporadic nature



#### Awards for best practice allergen management

In conjunction with NZIFST & AIFST the Allergen Bureau provides the annual best practise in allergen management awards.

Based on contribution to a consistent, science-based approach to food allergen risk assessment, management and communication that guides industry best practice and assists allergen sensitive consumers to make informed choices based on label information.

Prize includes trans-tasman airfare and accommodation to attend AIFST/NZIFST conference

#### **Congratulations to our 2019 Winners:**

- ✓ Australia: Sarah Proctor, Lion Dairy & Drinks
- ✓ New Zealand : Sue Wheeler & Team, Woolworths NZ









#### Conclusion

- ✓ Allergen Bureau continues to respond to stakeholder needs
  - Working groups
  - Development of resources to support allergen management & VITAL
  - eNews, Helpdesk, Website
- ✓ Collaborate with key stakeholders
  - National Allergy Strategy
  - Allergen Collaboration (FSANZ)
  - Allergy NZ, Allergy & Anaphylaxis Australia (A&AA)
  - Australian Food & Grocery Council
  - Food Technology Association of Australia (SME Project)
  - FSANZ & Codex consultation pieces













✓ International Collaborations – South Africa, South America and more...



#### For further engagement & information

- Visit the Allergen Bureau website <u>www.allergenbureau.net</u>
- Join us & enjoy the benefits of the Allergen Bureau membership www.allergenbureau.net/about-us/join-us/
- Subscribe to our free monthly Allergen Bureau eNews <u>www.allergenbureau.net/news/</u>
- Access the free Allergen Bureau Helpline
  - ✓ email: info@allergenbureau.net
  - ✓ Phone: +61 437 918 959 (International)



- Secretariat (Dr Tom Lewis & Ray Murphy)
- VITAL® Coordinator (Georgina Christensen) & Support (Lisa Warren)



## Thank you for listening... Any questions?





#### Examples of inappropriate approach to managing allergens

- Example 1: Allergen analysis of finished product (solely) used to determine cross contact allergen presence and quantification Limitations to allergen analysis mean that allergen may be in the product but it cannot be identified using the test applied or may be at a level lower than the sensitivity of the test.
- ★ Example 2: Declaring every allergen on site in a precautionary allergen statement despite excellent verification and validation of line showing no cross contact

This is likely to result in over-declaring allergens. This type of labelling is unhelpful for consumers and perpetuates the claim from those with food allergies that food companies over-label to protect themselves. This diminishes the overall effectiveness of allergen labelling.