



Imetyksen tuki ry., Finland

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Comments on the working document on the draft Commission Directive on Infant formulae and Follow-on Formulae SANCO D4/HL/mm/D440180 rev 2 of February 2005

Please find our comments below. Please find also attached the IBFAN summary.

Best Regards,
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on behalf of Imetyksen tuki ry

www.imetys.fi (in Finnish)

1. Background of Imetyksen tuki ry.

Imetyksen tuki ry. is a mother-to-mother support organization working throughout Finland. Its aim is to support and promote breastfeeding by providing adequate information and support to mothers facing problems in breastfeeding. Through our breastfeeding supporting groups and lactation consultants we have got a good picture of the current situation concerning the thought and attitudes towards feeding a baby in general.

2. General comments

In Finland the markets for the baby food are quite significant. Breastmilk is often seen as a source of food among others, perhaps only a little bit healthier compared to formulae. The image of breastmilk and breastfeeding compared to commercial formulae has a strong influence on the way the baby is fed as breastfeeding itself provides no benefits to any commercial parties. On the contrary, the formulae

industry benefits when a baby is not breastfed. Therefore breastfeeding must be protected and supported by legislation.

At the moment in Finland the supplementary food is recommended from four to six months. This compared to the recommendation of exclusive breastfeeding until 6 months is very confusing to parents. Another current problem is that some professionals still recommend supplementary food for a baby even as young as three months also in such cases when the baby has no medical reasons for that.

In Finland we still miss the whole ratification of the *International Code of Marketing of Breast-milk Substitutes* – for example the advertising bottles and teats is allowed. Recently, breastfeeding has been raised as a relevant issue. If the legislation is not protecting breastfeeding well enough could mean a significant drawback in the field of promoting breastfeeding. Reports of the IBFAN, which is an independent organization, show that in several cases the current Directive on Infant formulae and Follow-on Formulae it is not followed. Because of this, there should also be more control on whether the Directive is followed.

We support IBFAN/Baby Milk Action Comments on the draft Commission Directive on Infant formulae and Follow-on Formulae and agree that:

“This proposal for a recasting of the Commission Directive on infant formulae and follow-on formulae (91/321/EEC) is inadequate and in some senses unethical.”

3. Comments

We would like to comment the working document on the draft Commission Directive on Infant formulae and Follow-on Formulae as following:

- a) In our opinion the European legislation should be brought into line with the requirements of the *International Code of Marketing of Breast-milk Substitutes* and the subsequent relevant World Health Assembly Resolutions. This approach should be set as a minimum requirement of this legislation.
- b) Comparing the amounts of nutrients between formulae and breastmilk is a problematic issue. First, the amounts of in Breastmilk are averages and assessments. The actual amounts depend of the age of the baby and differ throughout feeding and time of day. The labels should include a comment that formulae is not digested as well as Breastmilk because of which some of the amounts differ from average Breastmilk values.
- c) Formulae should not be provided free or low-cost in any case even for the purpose of a study.
- d) In Article 8: The name of products manufactured entirely from cow’s milk proteins, should include “cow milk” instead of “milk”; respectively in Finnish ”Lehmänmaitopohjainen äidinmaidonkorvike” or ”Lehmänmaitopohjainen vieroitusvalmiste”.
- e) In article 8 section 5: In addition there should also be a mention of the difficulty of reversing the decision not to breast-feed and of the possible negative effect on breast-feeding or introducing partial bottle-feeding.

- f) The advertising of bottles or teats should be prohibited according to the *International Code of Marketing of Breast-milk Substitutes*.
- g) When an additional supplement is added in formulae, for example Lactobacillus Gaefilus, there should be a mention that the product is not superior to breastmilk.
- h) At the moment, vitamin D is added in the formulae in larger amounts compared to breastmilk. This can lead to confusion and wrong interpretation among parents as the amounts of supplementary vitamin D is different for exclusively breastfed and partially breastfed.
- i) The general problem when advertising of the health benefits of certain formulae is that this is only a fact when compared to other formulae. No formulae has been proven healthier when compared to Breastmilk. On the contrary, several studies show that breastmilk is superior compare to formula. However, when a significant improvement has been found, it should also be made as a requirement in the quality standard to all formulae in order to improve the formulae in general.

IBFAN/Baby Milk Action Comments on the working document on the draft *Commission Directive on Infant formulae and Follow-on Formulae* SANCO D4/HL/mm/D440180 rev 2 of February 2005.

Summary of changes that need to be made :

- European legislation should not permit the promotion of any breastmilk substitute or any food or drink marketed as suitable for babies less than 6 months of age, or any promotion of bottles and teats.
- Health and nutrition claims on foods for infants and young children undermine breastfeeding and are misleading in that they imply equivalency or health benefits for breastmilk substitutes. Nutrition and health claims are not the same as nutrition information (which is essential) and, in creating a perceived advantage, they confuse parents. Breast milk substitutes have no health advantage over breastfeeding. Health and nutrition claims violate the *International Code of Marketing of Breast-milk Substitutes* and the subsequent relevant WHA Resolutions and should not be permitted.
- Ingredients shown by independently-funded research to be safe and essential for infant health should be mandatory.
- Powdered infant formulas (including powdered breastmilk fortifiers) must carry explicit warnings that the product is not sterile and may be contaminated by *Enterobacter sakazakii* and/or other pathogens.
- No food other than infant formula (or formulas for special medical purposes) should be labelled as suitable for infants under the age of 6 months.
- The safety of soya should be questioned and, if permitted, its risks explicitly stated on the label continued.
- Follow-on milks are not necessary. If these products are permitted on the market, their promotion should be prohibited.
- Free and low-cost supplies of breastmilk substitutes should not be allowed in any part of the health care system.