1. **Name of Governmental Department or Agency**
   Food Safety Authority of Ireland (FSAI)

2. **Title of the Project**
   FSAI2 Modelling the impact of maximum amounts (MA) in fortified foods and food supplements on the nutritional status of the Irish population

3. **Description of the Project**
   
   Directive 2002/46/EC on food supplements lays down rules for the labelling, presentation and advertising of food supplements, and harmonises the vitamin and mineral composition of these products. Regulation (EC) 1925/2006 on food fortification harmonises the voluntary addition of vitamins and minerals to foodstuffs by laying down provisions on the conditions for and restrictions on the addition of vitamins and minerals to foodstuffs. While provided for in the legislation, maximum amounts (MA) for the addition of vitamins and minerals in food supplements and fortified foods have never been set. Work was initiated by the Commission in 2006 and a working group was established who met a number of times in 2008/2009. However, due to challenges identified, the work was put on hold in 2009. Since 2020, this work recommenced at the European level through the establishment of a taskforce to develop a method to set MA for both fortified foods and food supplements. The European Food Safety Authority (EFSA) are currently reviewing tolerable upper intake levels (ULs) for certain nutrients to support this work.

   The setting of MA is important to ensure the safety of such products in the European Union. In the absence of these, there is no legislative limits on the amounts of nutrients that can be added to fortified foods and food supplements on the Irish market. However, evidence from the National Food Consumption Surveys informs us that those who consume fortified foods and food supplements predominately have better nutritional status than those who do not. In fact, healthy eating advice often includes the consumption of such products to ensure nutrient sufficiency. This advice may be particularly important for certain population groups. For example, in the “FSAI Scientific Recommendations for Food-Based Dietary Guidelines for 1- to 5-Year-Olds in Ireland”, it states that ‘a combination of red meat approximately 3 days a week and an iron-fortified breakfast cereal 5 days a week was necessary to prevent iron deficiency in 1-to-3-year olds’. Furthermore, in the FSAI Scientific Recommendations for Food-Based Dietary Guidelines for Older Adults, it recommends that ‘fortified foods provide a good and particularly bioavailable source of folate and related B vitamins (B12, B6 and riboflavin)’. Therefore, in the absence of an ‘ad lib’ approach to adding nutrients to fortified foods and food supplements, this research will look to investigate whether there is a potential risk of causing unintended nutritional deficiencies in certain population groups when MA are introduced.

   Therefore, this project aims to:
Investigate the impact of setting MA for food supplements and fortified foods on the nutritional status of Irish population aged 1 and older

Identify whether there is potential for nutrient deficiencies in certain vulnerable population groups i.e., young children, teenagers, those who are pregnant or lactating, older adults

### 4. Project Scope

**Task 1:** Using the National Pre-School Nutrition Survey (NPNS), the the National Children’s Food II (NCFS II) and proposed MA for food supplements and fortified foods, perform modelling techniques to identify the potential change in nutrient intakes of children aged 1-12 years

**Task 2:** Using the National Teen’s Food Survey (NTFS II) and proposed MA for food supplements and fortified foods, perform modelling techniques to identify the potential change in nutrient intakes of teenagers

**Task 3:** Using the National Adult Nutrition Survey (NANS) and proposed MA for food supplements and fortified foods, perform modelling techniques to identify the potential change in nutrient intakes of adults

**Task 4:** Conduct a market scan to evaluate the impact of MA on commonly consumed fortified foods on the Irish market

**Task 5:** Review the FSAI Food Notifications System to identify food supplements containing nutrients higher than the proposed MA

**Task 6:** Prepare a report and present their findings to the FSAI Scientific Committee and PHN subcommittee. Publish findings in relevant peer reviewed publications and lead an evaluation of the findings of the study to decide on next steps.

The Fellow would work closely with the Public Health Nutrition Safety (PHNS) team on this project. They would also liaise with the Chief Specialist in Public Health Nutrition and Public Health Nutrition Policy (PHNP) team as it is envisaged that this work would inform policy development.

### 5. Skills/Expertise Required

The skills required are as follows:

- Public Health Nutrition
- Ability to model national food consumption data
- Market scans
- Working with large datasets
- Statistical analysis
- Ability to critically review and collate peer reviewed and grey literature
- Science communication (written and oral)

### 6. Expected Outputs of Project

The project outcomes are:

1. Dataset on the various modelling scenarios across the different age groups
2. Dataset on food supplements containing vitamin and minerals higher than proposed MA
3. Dataset on fortified foods currently on the Irish market containing vitamin and minerals higher than proposed MA
4. Internal report and presentation on the findings for the Scientific Committee & PHN Subcommittee
5. Scientific peer-reviewed publications

7. Working Arrangements

If a candidate prefers to be based at the FSAI offices in Dublin’s IFSC area, then this could be accommodated. However, the candidate need not be based permanently in Dublin and could work from any location but must be prepared to attend the FSAI offices in Dublin’s IFSC as required. They will report to the Public Health Nutrition Manager who will be responsible for directing the work. Arrangements would have to be made for access to the FSAI IT systems and this would depend on the location of the candidate. The candidate would be required to sign confidentiality agreements and any other relevant documents as determined by the HR department.

8. Expected Timeline

The project is expected to take 12 months full-time.

9. Contact Details

Dr. Clare O’Donovan