



ELIMINATING TRANS FATS IN THE EUROPEAN UNION

Briefing
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About EPHA

EPHA is a change agent – Europe's leading NGO alliance advocating for better health. We are a dynamic member-led organisation, made up of public health civil society, patient groups, health professionals, and disease groups working together to improve health and strengthen the voice of public health in Europe.

EPHA is a member of, among others, the Social Platform, the Health and Environment Alliance (HEAL), the Alliance to Save Our Antibiotics, the Transatlantic Consumer Dialogue (TACD).

EPHA sits on various EU-level platforms, including the EU Multi-Stakeholder Platforms on Sustainable Development Goals (SDGs), High Level Forum for a Better Functioning Food Supply Chain, the EFSA Stakeholder Platform, DG AGRI Civil Dialogue Groups, and the Better Regulation Watchdog.

WHY A LEGAL LIMIT ON TRANS FATS IN FOOD MUST BE IMPLEMENTED AND ENFORCED WITHOUT DELAY

“Strictly limiting the prevalence of industrially produced trans fatty acids in all foods marketed in the EU could save about 50.000 lives every year”
European Heart Network¹

In October 2018 the European Commission put forward for consideration a long-awaited draft Regulation which proposes the introduction of a legal limit on industrially produced trans fats in food². The draft Commission Regulation, which amends Regulation (EC) No 1925/2006 on the addition of vitamins and minerals and of certain other substances to foods³, contains the following central provision:

“1(a) The content of trans fat, other than trans fat naturally occurring in animal fat, in food which is intended for the final consumer, shall not exceed 2 grams per 100 grams of fat.”

Health and consumer organisations, together with the European Parliament have previously called for this restriction, which follows existing legislation in several European countries⁴. It is meant to come into force in April 2021 - more than five years after the Commission's report on trans fats released in December 2015⁵ and more than four years after launching the inception impact assessment⁶.

This briefing, based on previous inputs by EPHA and its members, notably the European

Heart Network, examines once again the need for the introduction of such legislative limits on industrially produced trans fats and why it needs to be implemented and enforced without delay.

Trans fats harm health – the evidence is overwhelming

Trans fat consumption significantly increases the risk of cardiovascular disease (CVD), the leading cause of death for Europeans under the age of 65⁷. Evidence associates a 2% increase in total energy derived from trans fats to an almost 25% increase in the risk of death from coronary heart disease⁸.

Evidence also suggests that trans fat intake is associated with the development of other health conditions such as central adiposity, diabetes, Alzheimer's disease, breast cancer and impaired fertility.

While industrially produced trans fats and trans fats naturally present in animal products appear to be equally harmful⁹, the proportions of industrially produced trans fats in food are generally much higher than those of naturally occurring trans fats and, in most European



countries, they are the main dietary source of trans fats¹⁰.

Industrially produced trans fats provide no nutritional benefit to human diets apart from being a source of energy.

What are trans fats?

“Trans fats are a type of unsaturated fatty acids and can be classified as naturally occurring or industrially produced. Naturally occurring trans fats – or ruminant trans-fatty acids (rTFAs) – are produced by the gut bacteria of ruminant animals and found in small amounts in the food products from these animals (for example, the meat and milk products from cattle, sheep and goats).

Industrially produced trans fats are formed when fats and oils are modified by the use of industrial processing techniques. The process of partial hydrogenation is the primary mechanism used in the industrial production of trans fats; during the process, oil is hardened, which improves its commercial appeal by enhancing its sensory profile and texture and increasing its shelf life and tolerance to repeated heating. In oils that initially have a low content of trans fats, repeatedly heating them (e.g. in cooking) can generate additional trans fats.”¹¹

World Health Organization (WHO)
Regional Office for Europe

Without doubt, a legislative limit is the most effective policy option...

A recent systematic evidence review on the impacts of different policy options to reduce trans fats in the food supply – including voluntary reductions and labelling – confirms that setting a legislative limit is the most “effective, economical, and equitable policy approach”¹².

Similar conclusions were reached in previous studies, as well as the European Commission’s report on trans fats which states “that a legal limit for industrial TFA content would be the most effective measure in terms of public health, consumer protection and compatibility with the internal market”¹³.

The results of trans fats restrictions can be observed in real life. A US study found that people living in areas that restrict trans fats in foods had fewer hospitalisations for heart attack and stroke compared to residents in areas without restrictions¹⁴.

The case of Denmark

In 2003, Denmark became the first European country to introduce a legislative limit on the amount of industrially produced trans fat in food. The trans fat ‘ban’ imposed limits to the amount of trans fat to 2g per 100g of fat or oil, and has practically led to the elimination of trans fats in the Danish food supply.





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Following this legislation, a study was conducted to assess the impact of the ban on cardiovascular disease mortality rates, showing a decrease in CVD mortality in the 3 years after policy implementation. It also estimated that since the ban, approximately 700 lives have been saved each year, or 2 deaths avoided each day¹⁵. Over the past 10 years Denmark has seen the largest decreases in the number of deaths attributable to heart diseases in the European Union¹⁶.

...and probably the only real way to reduce trans fats intake in all population groups.

Despite a decline in the average trans fat intake in Europe, many Europeans continue to consume excessive amounts of trans fats, which significantly increases the risk of disease and premature death. There are indications that particular sub-populations might consume more than 5g of trans-fats per day¹⁷.

A study tracing trans fat content in pre-packaged foods from supermarkets and certain shops in 20 European countries, found that 396 packages out of 598 packages of biscuits/cakes/wafers reviewed had a trans fat content above 2g/100g of fat. It demonstrates that high concentrations of trans fats persist in popular foods in many European countries, particularly in South-Eastern Europe¹⁸.

At the same time, vulnerable consumers and

people from lower socio-economic groups throughout all of Europe tend to be at risk of higher trans fat intake, exacerbating health inequalities^{19 20 21 22}. An EU-wide legislative limit on trans fats would therefore support the alleviation of health inequalities both between and inside countries.

The WHO REPLACE Action Package

In May 2018 the World Health Organization released its REPLACE action package which calls for the elimination of industrially-produced trans fatty acids from the global food supply by 2023²³.

REPLACE stands for²⁴:

- **R**Eview dietary sources of industrially-produced trans fats and the landscape for required policy change.
- **P**romote the replacement of industrially-produced trans fats with healthier fats and oils.
- **L**egislate or enact regulatory actions to eliminate industrially-produced trans fats.
- **A**ssess and monitor trans fat content in the food supply and changes in trans fat consumption in the population.
- **C**reate awareness of the negative health impact of trans fat among policy-makers, producers, suppliers, and the public.
- **E**nforce compliance with policies and regulations.





[...] promoting healthy and sustainable diets that are less reliant on highly, or ‘ultra-’ processed food can provide an important contribution to mitigating potentially unwanted substitution effects.

A legislative limit will result in major health cost savings...

Introducing a legislative limit on industrially produced trans fats can bring major costs savings to EU healthcare systems. According to one estimate, if trans fat content was reduced to 1% of total energy intake, it would prevent 11,000 heart attacks and 7,000 deaths in England, as well as annually saving £2 billion (€2.28 billion) in cardiovascular-related healthcare costs²⁵.

Another English study examining the health impact of trans fat policy and associated government and industry costs, found the net cost of a full ban provided savings of £264m, with a minimum saving (in the most pessimistic scenario) of £64m²⁶.

A systematic review of modelling studies conducted by the World Health Organization found that an EU-wide legislative restriction would be most beneficial for the health of EU citizens and most effective in reducing healthcare costs²⁷. One modelling study estimated that an EU-wide trans fat ban would save more than € 51 billion over a lifetime compared to the reference scenario²⁸.

...without undue impact on food industry.

Legislative limits on trans fats already enforced in European countries such as Denmark, Austria, Hungary, Latvia, Iceland, Switzerland and Norway and introduced in Slovenia and Lithuania provide no evidence of significant negative financial impacts on the

food industry. On the contrary, an EU wide-limit would ensure a level playing field in the internal market, ensuring equal opportunities for all producers and blocking products high in trans fats from crossing borders, preventing unfair competition. Moreover food and drink manufacturers have already been reformulating their products in recent decades to reduce trans fats²⁹.

Furthermore, several large food companies themselves have actively called for a legislative restriction on trans fats in a joint letter with health and consumer organisations. In the letter these companies commit “to step up the engagement of our relevant trade associations where we are active in a spirit of sharing best practice to guide them [companies who have not yet minimised trans-fats] through the process of removing trans fats originating from partially hydrogenated oils from all foods in order to meet the proposed legislative limit”³⁰.

Even if a larger financial impact were expected, the benefits for people’s health and for the economy would still overwhelmingly support the legislative option.

However, more attention is required to ensure trans fats are substituted with healthier oils, while avoiding environmentally destructive options

As trans fats are phased out it is vital to ensure that they are replaced by healthier and environmentally sustainable alternatives. World Health Organization guidelines on fat intake for adults and children suggest



using polyunsaturated fatty acids (PUFAs) (preferred) or monounsaturated fatty acids (MUFAs) as a replacement for trans fats³¹.

The WHO REPLACE action package recommends the following actions to ensure appropriate substitution. These actions should accompany the implementation of the legislative limit on trans fats:

- Provide recommendations for replacement of trans fats with healthier fats and oils;
- Provide technical assistance to small- and medium-sized enterprises, if necessary, to overcome barriers to successfully implement trans fat regulations;
- Purchase and use products only containing healthy fats and oils in public institutions (e.g. schools, hospitals, government offices, etc.) and in government programmes;
- Increase consumer awareness on how to choose products containing healthier oils and fats.

In addition, promoting healthy and sustainable diets that are less reliant on highly, or ‘ultra-’ processed food can provide an important contribution to mitigating potentially unwanted substitution effects.

Avoiding palm oil?

Substituting trans fats with palm oil, a frequently considered option, may not maximise the health benefits from trans fat removal, given palm oil’s high saturated fat content³².

Moreover, the use of palm oil is controversial as its increased use is linked with major environmental and social concerns, including deforestation and ecosystem degradation³³, harm to indigenous populations³⁴, elimination of wildlife³⁵, and exacerbation of climate change³⁶.

While certification schemes for sustainable palm oil production exist³⁷, their effectiveness has been questioned³⁸. Also, such schemes may not be able to maintain sustainability credentials in face of significantly increased demand.



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