

To the  
Scientific Advisory Committee on Nutrition

Dortmund, September 1.  
September 2014

## **Comments on the SACN draft report on Carbohydrates and Health report**

### **To the Scientific Advisory Committee on Nutrition**

I very much appreciate the enormous effort of the Committee to undertake an in depth evaluation on this very important area in primary prevention.

In addition to the comments submitted by Prof. Arne Astrup and the International Carbohydrate Quality Consortium (ICQC) – of which I am a member - I would like to comment on recommendation 12.26:

*"The dietary reference value for free sugars should be set at a population average of around 5% of dietary energy for age-groups from 2.0 years upwards. This is based on the need to limit free sugars to no more than 10% of total energy intake at an individual level, which is likely to lead to a population average free sugars intake of around 5% of total energy.*

*With the proposed reduction in the population reference intake of free sugars, the energy should be replaced with starches, sugars contained within the cellular structure of foods and in milk and milk products."*

Aiming at 5% of energy from added sugar as suggested by the SACN report (compared to 10% upper limit suggested by other international dietary guidelines) is not supported by the scientific evidence. While it is plausible that a higher *ad libitum* sugar consumption leads to higher energy intakes, sugar intake *per se* does not appear to be causally linked to obesity because no association of isocaloric exchange of sugar against other carbohydrates and weight change could be established (Te Morenga 2013). A reduction of energy from free sugars, if not compensated, would seem appropriate among populations with undesirable levels of overweight and obesity, however this idea is not reflected in a public health message of 5% expressed as percentage of energy (which does NOT encourage a reduction of overall energy intake).

Finally, the SACN recommendation that "the energy should be replaced with starches" carries a risk of substantially higher intakes of high starch/high glycemic index foods,

particularly in the absence of any recommendation regarding the choice of low glycemic index foods.

I would appreciate if these thoughts are considered in a revision of the SACN report.

Sincerely yours,

PD Dr. Anette E. Buyken