**POSITION**

**STATEMENT**

Last reviewed: July 2016

 **DIABETIC FOODS**

**KEY POINTS:**

* From 20 July 2016 under European Union (EU) regulation, manufacturers will no longer be able to label food as ‘diabetic’ or ‘suitable for diabetics’.
* Diabetes UK welcomes this regulation and the end of such terms as ‘diabetic’ or ‘suitable for diabetics’ on food labels
* Enforcement officers need to liaise with food and drink manufacturers to ensure compliance with current EU law.

**Introduction**

**Diabetes UK has being calling for several decades the removal of ‘suitable for diabetics’ and ‘diabetic’ labelling on food. Labelling a food as ‘diabetic’ is unhelpful and misleading for the consumer and implies a health benefit. Some people might see it as a stamp of approval or even essential for people with diabetes. The reality is that ‘diabetic’ foods can be as high in fat and calories as standard products and run counter to current dietary recommendations of a healthy diet. Also foods labelled as being ‘suitable for diabetics’ or ‘diabetic’ often cost more than equivalent standard products, so can lead people with diabetes to spend more than they need to.**

The European Commission (EC) has reviewed legislation on food intended for particular nutrition uses. The regulation, which is the result of this review, has purposefully omitted diabetic foods (1) because the EC has ruled that special foods are not needed for people with diabetes(1).This is based on conclusions from an EC report in 2008 (2) that states:

* There are no grounds for developing specific compositional requirements for foods intended for people with diabetes.
* People with diabetes should be able to meet their dietary needs by appropriate selection from everyday foods.
* There are no grounds for especially formulated foods for people with diabetes to manage their condition.

It was agreed at European Union (EU) level at a standing committee on Plants, Animals, Food and Feed that statements such as ‘suitable for diabetics’ and ‘diabetic’ would be difficult to consider as being compatible with EU law and should be regulated in line with legislation that currently exists that labeling of food must not mislead the consumer (3) In particular it should not:

* attribute the food to having properties that it does not possess, or
* claim that the food has special characteristics when in fact similar foods possess the same characteristics.

For this reason manufacturers should adhere to this regulation and discontinue the labelling of foods as ‘suitable for diabetics’ or ‘diabetic.’

**Current situation**

Diabetic’ foods became popular in the 1960s when diabetes care focused on eating a sugar-free diet. Since the 1980’s, dietary recommendations have moved away from a sugar free diet (4, 5, 6) and so the role for special ‘diabetic’ foods became obsolete over 30 years ago.

Current guidelines (7) no longer advise the use of sugar-free diets but the myth that people with diabetes cannot eat any sugar still persists. The truth is that people with diabetes can consume sugar but should be limited as part of a healthy balanced diet just like the rest of the general population. Good blood glucose control can still be achieved when sugar and sugar-containing foods are eaten in moderation. The guidelines also advise against the use of ‘diabetic’ foods.

People with diabetes are currently recommended to follow a low sugar,low salt, low saturated fat, healthy balanced diet so as to manage weight and control blood glucose, blood pressure and blood fat levels (7). Healthy eating advice is essentially similar for people with diabetes as it is for the general population. This in turn reduces the risk of diabetes related long term complications such as cardiovascular disease.

‘Diabetic’ foods have been a feature in many chocolate, sweets, biscuits and bakery ranges available in a variety of high street outlets such as supermarkets, pharmacies and “health food shops” as well as being widely available on the internet. As ‘diabetic’ foods can be just as high in calories and fat, continued consumption of these foods can contribute to weight gain and increase an individual’s susceptibility to other health conditions, for example, heart disease and stroke.

Apart from being high in fat and calories, these foods labelled as ‘diabetic’ tend to contain polyols (a group of nutritive sweeteners) as a substitute for sucrose (sugar). Examples of polyols used in diabetic foods include sorbitol, maltitol, xylitol, isomalt and mannitol. These polyols have fewer calories and less of an effect on blood glucose levels than sucrose. It is not exactly clear how these polyols should be ‘counted’ by people who are adjusting their insulin dose according to the amount of carbohydrate they consume, as not all the carbohydrate is absorbed. Further research is needed in this area. Excessive consumption of polyols can also cause diarrhoea, flatulence, and a laxative effect - especially in young children because of their low body weight In the UK, Our advice is that people with diabetes do not need specialist foods to manage their diabetes (7)and this is in line with the European Commission’s report in 2008 which stated that specialised foods for people with diabetes are not necessary (2).

 Stating:

* There are no grounds for developing specific compositional requirements for food intended for people with diabetes.
* People with diabetes should be able to meet their dietary needs by appropriate selection from everyday foods.

**Recommendations**

* Manufacturers should adhere to EC regulation and discontinue the labelling of foods as ‘suitable for diabetics’ or ‘diabetic’.
* Retailers should adhere to EC regulation and stop selling ‘diabetic’ foods.
* People affected by diabetes and their family and friends, are advised not to purchase ‘diabetic’ foods.
* Healthcare professionals should continue to advise people with diabetes not to purchase diabetic foods.
* If foods with polyols are consumed they should be eaten with caution – considering the laxative effect, fat and calorie content. It is important to check the food label and people who are taking insulin and carbohydrate counting should be mindful that they may need less insulin as not all the carbohydrate from polyols is absorbed.
* Members of the public can make complaints about food labelling that they consider to be misleading to their local Trading Standards team: [www.gov.uk/find-local-trading-standards-office](https://www.gov.uk/find-local-trading-standards-office)

**Further information**

**soon**

* For more information on diabetic foods please go to

**www.diabetes.org.uk/Guide-to-diabetes/Enjoy-food/**

* Trading Standards **www.tradingstandards.gov.uk/advice/index.cfm**

1 Regulation (EU) No 609/2013.Of The European Council of 12 June on food intended for infants and young children ,food for special medical purposes, and total diet replacement for weight control (recital 32).

<http://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32013R0609&from=EN>

2 COM (2008) 392 Report from the Commission to the European Parliament and the Council on foods for persons suffering from carbohydrate metabolism disorders (diabetes), Brussels, 26.6.2008.

<http://eur-lex.europa.eu/legal-content/EN/ALL/?uri=CELEX:52008DC0392>

3 Regulation (EU) No 1169/2011 of the European Parliament and of the Council of 25 October 2011 on the provision of food information to consumers

4 Nutrition Subcommittee, British Diabetic Association. Dietary recommendations for diabetics for the 1980's. Human Nutrition: Applied Nutrition 1982; 36A: 378-394.

5 Nutrition Subcommittee, British Diabetic Association. Dietary Recommendations for people with diabetes: an update for the 1990's. Diabetic Medicine (1992). 9; 189-2002.

6 Nutrition Subcommittee of the Diabetes Care Advisory Committee of Diabetes UK (2003). The implementation of nutritional advice for people with diabetes. Diabetic Medicine 20; 786 – 807.

7 Diabetes UK Nutrition Working Group. Diabetes UK evidence-based nutrition guidelines for the prevention and management of diabetes (2011).Diabetic Medicine 28 (11); 1282-1288

**References**

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