

Food Labeling

The important role that nutrition plays in maintaining and improving the nation's health has been well documented. In particular, proper nutrition is an essential part of the management and treatment of diabetes mellitus.

To make appropriate food choices, consumers must have information available to them that is truthful, meaningful, understandable, and complete. It also must not be misleading. Food labels that include nutrition and ingredient information are the most efficient and practical way to communicate much of these data. Appropriate nationally uniform food labeling can help consumers make reasonable purchasing decisions. New FDA regulations for food labeling will be phased in beginning May 1994.

In this Position Statement, the food label is considered to be the entire outer package, not just that portion displaying nutrient content.

GENERAL PRINCIPLES—No food should be designated or promoted as “good” or “bad,” “healthful” or “unhealthful.” Such characterizations have meaning only when considered in the context of the individual's overall food consumption and health status.

Food labeling (as set forth herein) should be mandatory for all processed and packaged foods (including those with Federal Standards of Identity) except for fresh produce and products that contain negligible amounts of nutrients (e.g., spices).

The American Diabetes Association (ADA) regards the primary purpose of food labeling to be that of providing

quantitative nutritional data. Explicit or implied health claims are strongly discouraged. Any product descriptors used on labels must be truthful and not misleading.

To properly use the information imparted by food labels, consumers must be educated about and must understand basic principles of good nutrition and how to use food-label information. Food labels cannot compensate for inadequate nutritional knowledge. This is particularly true for people with diabetes who must be knowledgeable about foods in relation to diabetes management.

ADA encourages food retailers to provide consumers with scientifically sound and objective information that will assist them in making appropriate food choices and in using food-label information.

SPECIFIC RECOMMENDATIONS—

The serving size used in the labeling should meet the following guidelines:

- It should be of the typically used size and given in a common household measure (e.g., cup, count) and in the equivalent weight in grams.
- It should be standardized within food types; e.g., all jams and jellies should be labeled with the same typical serving size (e.g., 1 teaspoon).
- Foods advertised as single-serving containers or typically consumed as such (e.g., candy bars and snack foods) should provide nutrient data based on the entire contents as the serving size.
- If a packaged food requires the addition of other ingredients (e.g., milk)

for use, the nutritional labeling should be based on the content and portion size of 1) the packaged ingredients and 2) the product as consumed.

- Wording on the label that indicates a comparison or nutrient change (e.g., nutrient reduction) must relate to serving size rather than the entire package. For example, the label should not read “save 200 calories” when the reduction is only 25 cal/serving and the package contains 8 servings.

Calorie and nutrient content should be shown on a per-serving basis and should include calories, carbohydrates (g), dietary fiber (g), fat (g), including saturated and unsaturated fat (g), cholesterol (mg), protein (g), and sodium content (mg). Optional information includes breakdown of total carbohydrate into grams of simple sugars and starches; breakdown of dietary fiber into grams of soluble and insoluble fiber; breakdown of total fat into grams of saturated, monounsaturated, and polyunsaturated fatty acids; calcium and phosphorus content; potassium content; and exchange-list equivalents (if used, they should follow ADA's Guidelines for Authors of Diabetes Recipes, available on request to Editor, *Diabetes Forecast*, c/o ADA). The serving size used should be the same for all of the nutrients and exchange-list equivalents included on the label.

Product descriptors should conform to the following guidelines:

- The terms *low sugar*, *diabetic*, *dietetic*, and *lite* or *light* have no generally accepted definition and should not be used in labeling.
- The terms *sugar free*, *sugarless*, *no sugar*, *no sugar added*, *no added sugar*, *made without sugar*, and *unsweetened* are confusing to consumers and can be misleading. They should not be used for food that contains 1) any added caloric sweetener (e.g., sucrose, dextrose, fructose, lactose, maltose, honey, corn syrup, molasses, fruit juice, or fruit juice concentrate) or 2) a sugar alcohol (e.g., mannitol, sorbitol, or hydrogenated starch hydroly-

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sate) unless the food meets the federal government's definitions* of low or reduced calorie.



*THE FOOD AND DRUG ADMINISTRATION AND U.S. DEPARTMENT OF AGRICULTURE HAVE LEGAL DEFINITIONS FOR MANY FOOD DESCRIPTORS. BY LAW, THESE TERMS CAN BE USED ON LABELS ONLY FOR FOODS THAT MEET THESE DEFINITIONS.

- If the label contains a voluntary or legally required comparison statement (e.g., reduced calorie) and the final product requires mixing with other ingredients, the comparison must be in terms of equivalent "other" ingredients. For example, if a reduced-calorie pudding mix is compared with a regular pudding mix, the comparison must be done with the same kind of milk; i.e.,

the data for the regular mix should not be based on 2% milk and for the reduced-calorie mix based on skim milk. The terms *reduced cholesterol*, *low cholesterol*, or *cholesterol free* suggest that cholesterol has been removed from the food. Therefore, the terms should be used only for foods that have been processed to remove some or all of their cholesterol.