April 16, 2007

To: All Interested Parties

From: Secretary, Board of Health

Subject: The Regulation of Trans Fat in the Canadian Food Supply

The Board of Health on April 16, 2007, considered a report (March 29, 2007) from the Medical Officer of Health, with respect to the Regulation of Trans Fat in the Canadian Food Supply.

The Medical Officer of Health gave a presentation and filed a copy of his presentation materials.

The following persons addressed the Board of Health:

- Deryk Jackson, and filed a written submission;
- Andreea Ionescu; and
- Sally Brown, Chief Executive Officer, Heart and Stroke Foundation of Canada.

The Board of Health:

1. requested a meeting with the Federal Minister of Health to urge the Government of Canada to implement the recommendations of the Trans Fat Task Force, and to ensure that artificially produced trans fat is regulated in the Canadian food supply; and furthermore, to urge the Federal Minister of Health to move quickly to ensure that the regulations come into effect sooner than the Trans Fat Task Force recommended;

2. requested all Agencies, Boards, Commissions and Divisions operating food premises to voluntarily reduce the amount of artificially produced trans fat contained in foods served and sold in City-operated facilities so that they do not exceed the amounts proposed by the Trans Fat Task Force to ensure that:

   a. for all vegetable oils and soft, spreadable (tub-type) margarines sold to the public or for use as an ingredient in the preparation of foods on site, the total trans fat content would be limited to 2% of the total fat content;

   b. for all other foods purchased for sale to the public or for use as an ingredient in the preparation of foods on site, the total trans fat content be limited to 5% of the total fat content. This limit would not apply to food products for which the fat originates exclusively from ruminant meat or dairy products;
3. requested all City Agencies, Boards, and Commissions and Divisions operating food premises to develop and submit implementation plans to the Medical Officer of Health by July 2007, to achieve the trans fat targets of the Trans Fat Task Force, and further that the Medical Officer of Health review the plans and report to the Board of Health by September 2007, on the trans fat reductions achieved;

4. requested that all nutrition programs funded through Toronto Public Health entirely eliminate artificial trans fats from their menus;

5. requested the Medical Officer of Health to:
   a. audit/review all Toronto Public Health funded nutritional programs to ensure they meet the Board of Health’s trans fat requirements;
   b. develop a communications strategy for restaurant associations and the public about the Board’s decision on trans fat and the health effects of trans fat;
   c. partner with both the Toronto District and Catholic School Boards to develop an appropriate curriculum for school-age children on trans fat products;
   d. ensure that the Working Group on Nutrition Criteria in Municipal Child Care Centres includes parent representation;
   e. create a list of common, most used ingredients which meet the recommended guidelines or are completely free of artificial trans fats;
   f. create a list of products for a typical child care menu which is free of partially hydrogenated oils and vegetable oil shortening by typical serving size that meet the recommended guidelines;
   g. report back to the Board of Health on the top ten other food additives or container properties which may harm children’s health at child care centres;
   h. report back to the Board of Health by September 2007, on a regulatory strategy for the phasing out of trans fat in all Toronto restaurants and other food service establishments, including all institutional food service facilities funded by the City of Toronto;

6. requested the General Manager, Children’s Services to:
   a. to incorporate the trans fat and nutrition criteria developed for directly-operated centres, into the operating criteria that applies to purchase-of-service child care centres;
   b. continue to work to entirely eliminate artificial trans fats in menus at City-owned child care centres;
7. forwarded a copy of this report to:
   a. all City Agencies, Boards, Commissions and Divisions where food is served or sold, as well as the Toronto District School Board, Toronto Catholic District School Board, the Minister of Health Promotion, the Minister of Health and Long-Term Care and the Minister of Children and Youth Services; and
   b. all Boards of Health and Public Health Units in Ontario to encourage them to support the Board of Health’s recommendations.

[Signature]
Secretary,
Board of Health

C. Davidovits.jd
Item HL3.1

Attachment

Sent to: Federal Minister of Health
          All Agencies, Boards and Commissions
          Toronto District School Board
          Toronto Catholic District School Board
          Minister of Health Promotion
          Minister of Health and Long-Term Care
          Minister of Children and Youth Services
          All Boards of Health and Public Health Units in Ontario
          Deputy City Manager, Sue Corke
          Deputy City Manager, Richard Butts
          Deputy City Manager and Chief Financial Officer, Joseph Pennachetti
          City Manager, Shirley Hoy

   c. Medical Officer of Health
      General Manager, Children’s Services
      Interested Persons
The Regulation of Trans Fat in the Canadian Food Supply

Date: March 29, 2007
To: Board of Health
From: Medical Officer of Health
Wards: All
Reference Number:

SUMMARY

The purpose of this report is to recommend that the Board of Health urge the Federal Government to regulate trans fat in the Canadian food supply through the implementation of the recommendations of the Federal Trans Fat Task Force.

Some trans fat occurs naturally in foods, but most is created through the processing of unsaturated fat. This is termed "artificially produced trans fat". Trans fat is not essential to our diet and provides no health benefit. It is used in foods to extend the shelf life of products or to provide desired textural properties. There is compelling evidence that artificially produced trans fat is linked to coronary heart disease. Heart disease is among the leading causes of death in Toronto. The Heart and Stroke Foundation of Canada (HSFC) has estimated that processed trans fat could be responsible for as many as 30,000 to 50,000 heart attack deaths every decade in Canada.

In June of 2006 the Federal Trans Fat Task Force submitted its final report to the Minister of Health. The Task Force recommended that trans fat be limited in the Canadian food supply. If implemented, Canada would be only the second country in the world, after Denmark, to regulate trans fat in the food supply. The recommendations of the Trans Fat Task Force cover food items available in grocery stores as well as foods served in restaurants and food service establishments. The Task Force recommends that foods purchased from a manufacturer by retailers or food service establishments for direct sale to consumers be regulated on a finished product or output basis and foods prepared on site by retailers or food service establishments be regulated on an ingredient or input basis. The Minister of Health promised to respond to the Trans Fat Task Force recommendations in the fall of 2006, but to date, there has been no announcement.
RECOMMENDATIONS

The Medical Officer of Health recommends that:

1. the Board of Health request a meeting with the Federal Minister of Health to urge the Government of Canada to implement the recommendations of the Trans Fat Task Force, and to ensure that artificially produced trans fat is regulated in the Canadian food supply. Furthermore, that the Board urge the Federal Minister of Health to move quickly to ensure that the regulations come into effect sooner than the Trans Fat Task Force recommended.

2. the Board of Health request all Agencies, Boards, Commissions and Divisions operating food premises to voluntarily reduce the amount of artificially produced trans fat contained in foods served and sold in City-operated facilities so that they do not exceed the amounts proposed by the Trans Fat Task Force. This would ensure that:
   
a) For all vegetable oils and soft, spreadable (tub-type) margarines sold to the public or for use as an ingredient in the preparation of foods on site, the total trans fat content would be limited to 2% of the total fat content.

b) For all other foods purchased for sale to the public or for use as an ingredient in the preparation of foods on site, the total trans fat content be limited to 5% of the total fat content. This limit would not apply to food products for which the fat originates exclusively from ruminant meat or dairy products.

3. this report be forwarded to all City Agencies, Boards, Commissions and Divisions where food is served or sold, as well as the Toronto District School Board, Toronto Catholic District School Board, the Minister of Health Promotion, Minister of Health and Long-Term Care and Minister of Children and Youth Services.

Financial Impact

There are no financial implications related to this report.

DECISION HISTORY

At its meeting of September 2, 1999, the Board of Health asked the federal government to implement mandatory nutrition labelling including disclosure of trans fat content of food. The federal government implemented this measure in December 2005.
ISSUE BACKGROUND

What is trans fat?

Trans fat occurs naturally and is found in low levels (2-5% of fat) in foods such as dairy products, beef and lamb. However, most of the trans fat in our diet is artificial, created when an unsaturated fat that is liquid at room temperature is processed or hydrogenated to make it a solid or semi-solid at room temperature. Trans fat is listed on food labels as “partially hydrogenated” or “vegetable oil shortening”. Trans fat is commonly found in margarines, baked goods like cookies and crackers, and deep fried foods from fast food outlets. Food manufacturers use trans fat because it extends the shelf-life of foods and provides textural properties that are perceived as desirable.

What are the health implications of trans fat?

In 1979, the Report of the Ad Hoc Committee on the Composition of Special Margarines was presented to the Federal Minister of Health. One of the recommendations in that report was that, “industry should be encouraged to seek ways to …. [reduce] the trans fatty acid content of Canadian foods”, and that “further research should be supported … [on] the effects of trans fatty acids on serum lipids in man”.


Since that time, metabolic and observational epidemiological studies have continued to consistently find that trans fat increases the risk of heart disease. Based on results from four large studies, a 2% decrease in trans fat intake (as a percent of total energy) could result in about 25% fewer deaths from coronary heart disease per year. Studies show that trans fat increases blood levels of “bad” (LDL) cholesterol and decreases levels of “good” (HDL) cholesterol. Both effects are associated with increased risk of coronary heart disease. The Heart and Stroke Foundation of Canada (HSFC) has estimated that processed trans fat could be responsible for as many as 30,000 to 50,000 heart attack deaths every decade in Canada.

In 2003, the World Health Organization (WHO) recommended that trans fat intake be limited to less than 1% of overall energy intake. There are no precise estimates of daily consumption of trans fat in Canada. However, the Trans Fat Task Force estimated average daily consumption of trans fat to be 3-9 grams. For a person consuming a 2000 calorie diet, this represents approximately 4% of total energy. Some fast food items may contain as much as 6.5 grams of trans fat per serving.

Federal action to date on trans fat

In January 2003, federal Food and Drug Regulations were amended with respect to nutrition labelling, nutrient content claims and health claims. As a result, mandatory
nutrition labelling came into effect in Canada in December 2005. Canada was the first country in the world to require mandatory labelling of trans fat on pre-packaged food. The Nutrition Facts table on the label must declare the trans fat content of the food along with twelve other nutrients. A declaration of “zero trans fat” may be made on the label if the trans fat content is less than 0.2 grams per serving. Many food manufacturers have reformulated food products to reduce the amount of trans fat and enable their products to be labelled free of trans fat. There are no requirements currently in place for nutrition labelling on restaurant menus.

In early 2005, the Trans Fat Task Force was formed in response to the passage of an opposition motion introduced in the House of Commons calling for Health Canada and the Heart and Stroke Foundation of Canada to co-chair a multi-stakeholder task force. The Task Force had a mandate to develop recommendations to “effectively eliminate or reduce processed trans fat in Canadian foods to the lowest level possible”.

The Task Force was comprised of individuals from the food manufacturing and food service industries, the federal government, health non-governmental organizations, academia, consumer groups and oilseed producers and processors. In the summer of 2005, the Trans Fat Task Force provided an interim report to the Minister of Health and in June 2006, the final report, TRANSforming the Food Supply, was submitted to the Minister. The recommendations of the Task Force are:

a) Foods purchased by retailers or food service establishments from a manufacturer for direct sale to consumers be regulated on a finished product or output basis and foods prepared on site by retailers or food service establishments be regulated on an ingredient or input basis.

b) For all vegetable oils and soft, spreadable (tub-type) margarines sold to consumers or for use as an ingredient in the preparation of foods on site by retailers or food service establishments, the total trans fat content be limited by regulation to 2% of the total fat content.

c) For all other foods purchased by a retail or food service establishment for sale to consumers or for use as an ingredient in the preparation of foods on site, the total trans fat content be limited by regulation to 5% of the total fat content. This limit does not apply to food products for which the fat originates exclusively from ruminant meat or dairy products.

Based on modeling, it is estimated that the average trans fat intake of Canadians would be reduced by at least 55% if these recommendations are implemented. This would decrease the trans fat intakes from 4.9 g/day to 2.4 g/day on average. At this level, the average daily intake of trans fat for all age groups would represent less than 1% of energy intake, consistent with the WHO recommendation. This would significantly improve the heart health of Canadians and save lives. It is estimated by Health Canada that this would reduce coronary heart disease-related deaths by 5% or more per year.
The Task Force has proposed timelines for the implementation of the recommendations. They recommended up to two years to develop regulations and up to two years to implement the regulations.

The recently released Canada’s Food Guide, *Eating Well with Canada’s Food Guide*, contains a strong message to Canadians to “Limit trans fat”. This is based on the Dietary Reference Intakes (DRI’s) “a common set of reference values for Canada and the United States that are based on scientifically grounded relationships between nutrients and indicators of adequacy, as well as the prevention of chronic diseases, in apparently healthy populations”. These values were developed by the Food and Nutrition Board of the National Academies’ Institute of Medicine with support from the Canadian and American governments and others. The DRI’s replace the U.S. Recommended Dietary Allowances (RDAs) and the Canadian Recommended Nutrient Intakes (RNIs) which served as the foundation of nutrition policy in each country. The DRI’s recommend that trans fat be kept as low as possible in the diet because any increase in trans fatty acid intake increases the risk of coronary heart disease.

In August 2006, the Medical Officer of Health wrote to the Federal Minister of Health, urging him to implement the recommendations of Trans Fat Task Force. The letter also urged the Minister to move more quickly to implement the recommendation to regulate trans fat in the Canadian food supply. In early 2007, the Medical Officer of Health and TPH staff met with the Heart and Stroke Foundation of Canada, the co-chair of the Trans Fat Task Force, to discuss opportunities to collaborate on advocacy efforts.

**Other Jurisdictions**

Denmark was the first country in the world to regulate trans fat by setting an upper limit on the percentage of artificially produced trans fat permitted in foods. In March 2003, the Danish Veterinary and Food Administration introduced an Executive Order limiting artificially produced trans fat to a maximum of 2% of total fat in each food item. A phased-in implementation occurred from June 2003 to January 2004. The Trans Fat Task Force studied the Danish experience and found that trans fat has been virtually eliminated from foods that were a significant source of trans fat in the Danish diet, including fast foods from internationally operated fast food chains. The regulations did not have a noticeable effect on the price or quality of foods, and trans fat contained in margarines was replaced largely with healthier fats (monounsaturated fats) rather than less healthy alternatives (saturated fats).

In December 2006, New York City amended its Health Code to regulate food containing artificial trans fat. The amendment specifies that no foods containing artificial trans fat shall be stored, distributed, held for service, used in preparation of any menu item, or served in any food service establishment. A food whose nutrition facts label, or other documentation from the manufacturer, lists the trans fat content less than 0.5 grams per serving is not deemed to contain artificial trans fat. The amendment is effective July 1, 2007, for oils, shortenings and margarines used for frying and in spreads, but allows 18
months for food service establishments to replace artificial trans fat in all other food items used in baking and in deep-frying yeast dough and cake batters.

New York City health authorities will provide technical support for restaurants and bakeries through a helpline staffed by culinary science experts; training for restaurant personnel; and resource materials, including brochures, practical tips and information about alternatives to trans fat.

**COMMENTS**

The Trans Fat Task Force recommendations take a regulatory approach to reduce trans fat in all processed foods to the lowest possible levels. This approach was influenced by a number of factors:

- The need to target a full range of food products
- The success of trans fat regulation in Denmark
- The lessons learned from nutrition labelling and other related initiatives
- The need to send a consistent and strong message to seed growers and oil producers to invest in healthier alternatives
- The fact that benefits would accrue even for people who do not read nutrition labels, including vulnerable groups with lower incomes and/or literacy skills

The federal regulatory approach recommended by the Trans Fat Task Force will ensure that all Canadians benefit, including vulnerable groups. It will also provide a level playing field for the food industry, so that artificially produced trans fat is significantly reduced in all food products in all Canadian jurisdictions.

For these reasons, the Board of Health should urge the Federal Minister of Health to implement the recommendations of the Trans Fat Task Force. This would ensure that artificially produced trans fat is regulated in the Canadian food supply. In view of the success of regulation in other jurisdictions and the scale of the health risks involved, implementation should proceed more quickly than the four-year time frame recommended by the Task Force.

While the regulatory approach is pending, Toronto Public Health (TPH) will continue to monitor other jurisdictions and promote the reduction of trans fat in Toronto by:

1. Requesting the Ontario Public Health Association/Nutrition Resource Centre to consider including trans fat criteria in the nutrition standard for the Eat Smart! Program that recognizes restaurants, and workplace and school cafeterias for high nutrition standards.

2. Requesting Toronto food service establishments to reduce voluntarily the amount of trans fat they use in food preparation and in prepared foods. A “Nutrition Matters” fact sheet on trans fat and an offer from TPH to answer general questions by telephone on trans fat and healthier alternatives will be provided.

Staff report for action for The Regulation of Trans Fat in the Canadian Food Supply
3. Requesting all City Agencies, Boards, Commissions and Divisions operating food premises to voluntarily reduce the amount of artificially produced trans fat contained in foods served and sold in city-operated facilities so that they do not exceed the amounts proposed by the Trans Fat Task Force. This would ensure that:

   a) For all vegetable oils and soft, spreadable (tub-type) margarines sold to the public or for use as an ingredient in the preparation of foods on site, the total trans fat content would be limited to 2% of the total fat content.

   b) For all other foods purchased for sale to the public or for use as an ingredient in the preparation of foods on site, the total trans fat content is limited to 5% of the total fat content. This limit would not apply to food products for which the fat originates exclusively from ruminant meat or dairy products.

4. Working with Toronto’s Municipal Child Care Services to create the Joint Working Group on Nutrition Criteria in Municipal Child Care Centres. The purpose of the Joint Working Group is to ensure that current knowledge and evidence about optimal nutrition requirements for young children are reflected in food that is provided to children in municipal child care centres. One of the first activities of the Joint Working Group is a review of the recommendations of the Trans Fat Task Force in relation to foods purchased for and served at city-operated child care centres.

5. Requesting the Toronto District School Board and the Toronto Catholic District School Board to voluntarily reduce the amount of artificially produced trans fat contained in foods served and sold in schools so that they do not exceed the amounts proposed by the Trans Fat Task Force (see above).

6. Ensuring TPH-operated programs and services that offer food are serving trans fat-free food items that are consistent with Eating Well with Canada’s Food Guide.

7. Requesting programs in which TPH plays a significant partner role (e.g., Student Nutrition Program) to voluntarily reduce the amount of trans fat used in food preparation and served in prepared foods. In the Student Nutrition Program, the TPH Nutrition Standard will be revised to specifically address trans fat in the lower fat message. Training workshops for coordinators and volunteers will include information on trans fat and direction regarding planning menus.

8. Requesting opportunities to work with culinary arts programs at Toronto colleges to ensure that students are aware of the health implications of trans fats and healthier alternatives to trans fats.
9. Working with the Heart and Stroke Foundation and other stakeholders in advocacy and public education efforts to address trans fat within the context of healthy eating.

10. Monitoring trans fat policy in other jurisdictions.

The Trans Fat Task Force’s regulatory recommendations are a feasible, consistent approach that is expected to significantly improve the heart health of Canadians. In addition to urging the Canadian government to take prompt action on these recommendations, the City of Toronto can move forward with a number of voluntary actions that will contribute to the reduction of trans fat consumption in Toronto.

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SIGNATURE

Dr. David McKeown
Medical Officer of Health

ATTACHMENT

Attachment 1: Executive Summary of TRANSforming the Food Supply Report of the Trans Fat Task Force Report submitted to the Minister of Health (June 2006)
Attachment 1
TRANSforming the Food Supply Report of the Trans Fat Task Force
Executive Summary

This document represents the final report of the Trans Fat Task Force to the federal
Minister of Health. The Task Force was formed in early 2005, following passage of an
opposition motion in the House of Commons in November 2004. The motion called on
Health Canada and the Heart and Stroke Foundation of Canada to co-chair a multi-
stakeholder task force with a mandate to develop recommendations and strategies “to
effectively eliminate or reduce processed1 trans fats in Canadian foods to the lowest level
possible.”

What Are Trans Fats?
Industrially produced trans fats are formed during partial hydrogenation, a process used
by the food industry to harden and stabilize liquid vegetable oils. Among other
advantages, this process maintains the taste and smell characteristics of oils enabling a
longer shelf life for final food products.

The majority of the trans fats in our diet are industrially produced and are typically found
in foods made with partially hydrogenated oil, primarily baked and fried foods. The trans
fat content of some of these foods may be as high as 45% of the total fat in the product.

Trans fats also occur naturally. They are found at low levels (generally 2–5% of fat
content) in ruminant-based foods such as dairy products and beef, although the level in
lamb may be as high as 8%.

Health Concerns and International Response
There is a significant and growing body of evidence linking trans fats to coronary heart
disease indicating trans fats may do even more harm than saturated fats. Metabolic
studies, for instance, show that trans fats increase blood levels of LDL (“bad”)
cholesterol and decrease blood levels of HDL (“good”) cholesterol. Both effects are
strongly associated with increased coronary heart disease. Saturated fats are thought to be
less damaging because they elevate both the “bad” and “good” types of cholesterol.
Epidemiological data also point to a greater risk of coronary heart disease from increases
in dietary trans fats than from increases in dietary saturated fats.

In 2002, the Panel on Macronutrients of the U.S. National Academies of Science,
Institute of Medicine, recommended that trans fat consumption be as low as possible
while ensuring a nutritionally adequate diet. The Panel did not set a safe upper limit
because the evidence suggests that any rise in trans fat intake increases coronary heart
disease risk. Subsequently, in 2003, the World Health Organization recommended that
trans fat intake be limited to less than 1% of overall energy intake—a limit regarded by
that body as a practical level of intake consistent with public health goals.

1 The terms “processed trans fats” and “industrially produced trans fats” are used interchangeably in the
report. The former term was used in the Parliamentary motion, but most experts and Task Force members
preferred the latter.

Staff report for action for The Regulation of Trans Fat in the Canadian Food Supply
Governments have started to take notice. In 2003, Denmark became the first country to set an upper limit on the percentage of industrially produced trans fat in foods, limiting trans fats from sources other than meats and dairy products to a maximum of 2% of total fat in each food item. In 2005, Canada became the first country to regulate the mandatory labelling of trans fats on prepackaged foods. And, in 2006, the United States introduced the mandatory declaration of trans fats in foods containing 0.5 grams or more per serving.

**Situation in Canada**

In Canada, scientists raised concerns about the detrimental effects of trans fats and the levels in the Canadian diet as far back as 1990. However, the use of partially hydrogenated oils continued to increase. By the mid-1990s, researchers estimated that Canadians had one of the highest intakes of trans fats in the world.

Today, the situation is much improved. Mandatory nutrition labelling and heightened consumer awareness have prompted food manufacturers to reduce or eliminate trans fats from many processed foods sold in grocery stores. For example, almost all bread products and salad dressings are now free of trans fats. Significant progress has also been achieved in certain food categories such as french fries and snack foods.

Despite the good news, however, many other foods – including some varieties of baked goods, oriental noodles, snack puddings, liquid coffee whiteners, microwave popcorn, toaster pastries, hard margarines and shortenings – still contain high amounts of trans fats. There is also evidence that consumer awareness and labelling alone will not result in reformulation of all processed foods with higher trans fat content as this change may present additional challenges and costs to some manufacturers.

Voluntary guidelines for providing nutrition information to consumers have recently been developed by the restaurant and food service sector. However, it is difficult to gauge the impact of this voluntary action on trans fat intake.

**Task Force Approach**

To ensure that its recommendations would be based on the best available evidence, the Task Force collected information from a variety of sources. Studies commissioned by Agriculture and Agri-Food Canada, a review of available alternatives to partially hydrogenated fats and oils by the Expert Committee on Fats, Oils and Other Lipids, a targeted scan of processed foods sold in grocery stores and a public consultation with the food industry enabled the Task Force to assess the feasibility of reducing the use of processed trans fats. The Task Force also commissioned a comprehensive scientific literature review and sought advice from internationally recognized experts on the health implications of substituting other fatty acids for trans fats.

The work of the Task Force was also informed by a modelling initiative undertaken by Health Canada to demonstrate the effect of limiting the trans fat content of foods on the total dietary intake of trans fats, as well as by expert opinion on the outcomes of the Danish and Canadian regulatory approaches to date.
The Choice of a Regulated Approach
Taking all the evidence into consideration, the Task Force agreed to a regulatory approach to effectively eliminate trans fat in all processed foods or reduce it to the lowest possible level. Factors influencing the decision included:

- The need to target the full range of food products;
- The Danish experience with regulation;
- The lessons learned from nutrition labelling and other related initiatives;
- The need to send a consistent and strong signal to seed growers and oil producers to invest in healthier alternatives; and
- The fact that benefits would accrue even to people who do not read labels, including vulnerable groups with lower incomes and/or lower literacy skills, who have a higher risk of coronary heart disease.

Designing the Regulations
Once the decision to recommend a regulatory approach had been taken, the Task Force considered a number of factors in setting the appropriate regulatory limits for Canada including:

- The evidence on the health effects of trans fats and the fact that trans fats have no intrinsic health value above their caloric value;
- Current dietary recommendations regarding trans fats (including the World Health Organization’s recommendation that trans fat intake of daily diets should be 1% of energy intake or less);
- The unavoidable presence of trans fats in typical diets (including naturally occurring and industrially produced);
- Comments from a Danish scientific expert that similar overall health benefits would have been achieved in Denmark if the legislated level of trans fat had been slightly higher; and
- The desire to find a level that would permit the use of a range of healthier alternatives.

The Task Force also took into account two of its working principles – feasibility and sustainability – as well as the desire to simplify compliance and enforcement.

Recommendations
Given the dietary patterns of Canadians, including the amount of food consumed outside the home, the Task Force felt that it was important to find a solution that would encompass both manufactured foods and foods prepared in retail and food service establishments (e.g. in restaurants, food service operations and some grocery store bakeries and outlets). For practical reasons, however, the Task Force decided to limit the trans fat content of manufactured foods on a finished product or output basis and the content of foods prepared on site in retail and food service establishments on an ingredient or input basis.
The recommended regulations apply equally to all foods, domestic or imported, as per other Food and Drug Regulations. They do not apply to ingredients sold to food manufacturers as, in this case, limits would be set on a *finished product* or *output* basis.

*The Task Force recommends that:*

**Foods purchased by retailers or food service establishments from a manufacturer for direct sale to consumers be regulated on a finished product or output basis and foods prepared on site by retailers or food service establishments be regulated on an ingredient or input basis.**

In setting the recommended limits, the Task Force decided to explore a dual approach: a lower limit for vegetable oils and soft, spreadable tub-type margarines and a higher limit for all other foods containing industrially produced trans fats.

Setting a limit for "all other foods” was the more challenging task. This is because some foods contain both naturally occurring and industrially produced trans fats and there is no officially accepted analytical method for determining the amounts of each type of trans fat. Ultimately, the Task Force decided to set a limit that would be low enough to ensure a significant reduction in industrially produced trans fat and also have a limited impact on amounts of naturally occurring trans fats.

The recommendations thus focus primarily on the elimination of industrially produced trans fats but are expressed as limits on the total amount of trans fats in foods. An advantage of this approach is that it is consistent with that used for the Canadian nutrition labelling regulations, which apply to both industrially produced and naturally occurring trans fats.

*The Task Force recommends that:*

**For all vegetable oils and soft, spreadable (tub-type) margarines sold to consumers or for use as an ingredient in the preparation of foods on site by retailers or food service establishments, the total trans fat content be limited by regulation to 2% of total fat content.**

**For all other foods purchased by a retail or food service establishment for sale to consumers or for use as an ingredient in the preparation of foods on site, the total trans fat content be limited by regulation to 5% of total fat content. This limit does not apply to food products for which the fat originates exclusively from ruminant meat or dairy products.**

The modelling carried out for the Task Force indicates that, with an upper limit of 5% on the trans fat content of all foods that are significant sources of industrially produced trans fats, the average trans fat intake of Canadians should decrease by at least 55%. In addition, most of the industrially produced trans fats would be removed from the Canadian diet, and about half of the remaining trans fat intake would be of naturally

*Staff report for action for The Regulation of Trans Fat in the Canadian Food Supply*
occuring trans fats. At this level, the average daily intake of trans fats for all age groups would represent less than 1% of energy intake, consistent with current dietary recommendations. A lower limit would not provide a significant additional decrease in average trans fat intake, but it would increase the effort and challenge for industry.

The Task Force felt the implementation of its recommendations should be staged to reflect the challenges to the food industry and to optimize public health benefits. For example, for certain oil uses (especially frying) adjustments can be made quickly. However, small businesses and certain baking applications may need more time to adjust.

_The Task Force therefore recommends a “2 + 2” approach, allowing up to two years to develop regulations and up to two years for implementation such that:_

- **Regulations be finalized by June 2008.**
- **A basic phase-in period be set at one year from the date of entry into force of the final regulations.**
- **Extended phase-in periods be specified for certain applications (e.g. baking) and for small and medium-sized firms, recognizing that in most cases the transition could be made within two years of the date of entry into force of the final regulations.**

Size, complexity of the operation, number of products and availability of alternatives should be factored in when deciding timelines and any extensions. These can best be determined through the business impact test, which is a normal government procedure when regulations are drafted.

_To maximize the health benefit to Canadians, the Task Force further recommends that:_

- **The Government of Canada and all concerned food industry associations urge companies affected to use the most healthful oils for their food applications.** (A list of more healthful alternatives for a variety of food applications can be found in appendix 14 of the report.)

The Task Force also recommends a number of incentives for industry and other key players to meet the following objectives:

- Facilitate the reformulation of food products with healthier trans fat alternatives;
- Help the food industry communicate the healthier nature of its products to consumers;
- Help small and medium-sized enterprises prepare for compliance; and
- Enhance the capacity of the Canadian agri-food industry to take a leadership role in this area.
Further, the Task Force recommends that the Government of Canada, in consultation and cooperation with public health experts and appropriate voluntary agencies, explore a number of measures to enhance public understanding of the new food labels, raise awareness of the health effects of the various types of fatty acids, ensure that fat consumption is properly understood in the context of a more healthful diet.

Finally, the Task Force recommends that, in order to expand the availability of evidence and fill identified research gaps, the Government of Canada encourage the relevant federal granting councils and/or federal departments to support research on trans fats in the areas of clinical nutrition, food and agriculture, and population and public health, beginning with the issues set out in this report. The Government should help ensure that the research results are transferred to relevant decision-makers.

**Anticipated Impact**
The proposed regulations, broad-based industry incentives and research will:

- Significantly improve the heart health of Canadians and save lives;
- Reduce the average daily intake of trans fats by Canadians of all age groups to less than 1% of energy intake, consistent with current dietary recommendations;
- Ensure that all Canadians, particularly those at the highest consumption levels, benefit from the virtual elimination of industrially produced trans fats;
- Provide an approach that is feasible and consistent with Canada’s approach to nutrition labelling;
- Promote the development of alternative supplies of more healthful alternatives to trans fats; and
- Help level the playing field for all players in the food industry that must effectively eliminate industrially produced trans fats from their products.
References


Staff report for action for The Regulation of Trans Fat in the Canadian Food Supply