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## What's happening internationally?

- One of the world specialist producers of milk and whey fractions is launching a new web site, <u>www.vital-news.com</u>, focusing on nutritional benefits of milk proteins.
- Visit this journal website at <u>http://www.pjbs.org/pjnonline/index.htm</u>
- ITANA2002 website at <u>www.itana2002.org</u>

The University of Uppsala, with the financial support of the Swedish International Co-operation Agency (SIDA), last year trained 26 health care professionals in the field of nutrition from 17 African countries on 'Use of information technology (IT) in nutrition training'. As a way of sharing the benefits of and skills acquired from this training with other professionals on the Continent and advancing the idea of IT use into the 21st century, these health care professionals are planning to hold the ITANA 2002 conference in collaboration with Uppsala University and the Swedish University of Agricultural Sciences. The Applied Nutrition Programme of Nairobi University, Kenyatta University and Egerton University has been mandated to organise the conference under the auspices of ITANA2002.org.

## Notice to media, dietitians, nutritionists and food scientists

Subject: Response to misleading information currently circulating about monosodium glutamate (MSG). Here are the actual facts about MSG.

#### Date: Pretoria, 28 January 2002

Recent media reports have implied that monosodium glutamate (MSG) is in some way 'unsafe' and can trigger allergic reactions in some people and may cause attention deficit disorder or hyperactivity in children. These reports may be misleading and are not supported by scientific evidence. MSG has been used to enhance food flavours for many years, and has been thoroughly researched. However, primarily due to non-scientific reporting, it is a commonly misunderstood flavour enhancer.

Although allergic reactions to environmental allergens such as pollen are common, occurrence of an allergic reaction to food and food ingredients is less common. Research (*Journal of the American Medical Association*, 1993) indicates that although up to 30% of adults believe they have a food allergy, in reality less than 2% of the adult population is allergic to foods or food additives. Reactions to MSG are uncommon and have not been proven to be due to an allergy, but to result from food intolerances. However, in a few individuals with allergies, especially asthma, their illness could be triggered or exacerbated by MSG.

MSG is the sodium salt of glutamate, and is produced through a natural fermentation process in sugarcane molasses, sugarbeet, starch or corn sugar. Its natural component, glutamate, is found in virtually all protein-containing foods such as milk (including breast milk), meat, fish and certain vegetables. The body makes no distinction between 'free' and 'bound' glutamate. Glutamate exists in the 'bound' form when linked with other amino acids to form proteins. It is also found in nature in the 'free' form, not linked to protein but present in plant and animal tissues. It is 'free' glutamate that plays a role in palatability and acceptability of foods. Foods that contain high levels of glutamate include cheese, ripe tomatoes and mushrooms. The average person consumes between 10 and 20 g of bound glutamate and 1 g of free glutamate daily, while the human body itself also manufactures free glutamate continuously. Glutamate is also the precursor of the important amino acid glutamine, which plays an essential role in the immune system as well as for maintenance of the health of the small intestine.

Glutamate, in the form of MSG added to food, is metabolised by the body in the same way as glutamate that exists naturally in food. Once digested the body does not differentiate between the origins of the glutamate. For example, the body is not capable of distinguishing between glutamate naturally occurring in tomatoes and MSG, which may be added to tomato sauce.

For food manufacturers to label products 'No MSG Added' is misleading as it implies that there is a distinction between 'free' glutamate and 'bound' glutamate and that the added form is in some way 'unsafe'. This misleading information leads to wrong perceptions among consumers.

This view is endorsed by the American Food and Drug Administration (FDA) which disallows the labelling of foods 'No MSG' or 'No Added MSG' because it is misleading, if the foods contain ingredients that are sources of free glutamates (FDA Report, August 1995). In South Africa legislation requires that all foods with added MSG must list the ingredient as monosodium glutamate. However, additional labelling legislation is desirable which will prohibit manufacturers of foods that contain free glutamate to include misleading information on their labels, influencing consumers negatively.

Since 1958, the US FDA has designated MSG as a Generally Regarded as Safe (GRAS) ingredient along with many other



foodstuffs such as salt, vinegar and baking powder, confirming MSG's safety for the general population, including pregnant and lactating women, and children.

### Ingrid van Heerden

Chairman of the Professional Panel of the Glutamate Advisory Council of South Africa

## Jobs?

 Saad Specialist Hospital, Saudi Arabia. Of particular interest to would-be dietitians with specialist training or experience in paediatrics and renal, cardiac and/or critical care. If you would like more information regarding positions available, the hospital, conditions, etc. please do not hesitate to contact Rhonda Anderson either by e-mail or telephone 966 3 8826666 ext. 2635 or pager 105. E-mail: <u>RAnderson@saad.com.sa</u>

 Dietetics positions in Ireland are available through a recruitment company called 'a-Team Health Recruitment'. website: <u>www.ateamhealthrecruitment.com</u>

#### Megan Pentz-Kluyts

ADSA Executive Portfolio: Publications

# How are dietitians allowed to make their services known? (continued)

### Notifications and Employment by Independent Organisations (Dr N P Steyn: on behalf of the Professional Board for Dietetics): Part II\_

#### Practice names:

Certain important regulations govern the use of practice names. These include:

The practice may not use the words 'hospital', 'clinic' or 'institute' or any other term that creates the impression that a practice forms part of, or is in association with, a hospital or similar institution. The term 'health centre' may only be used for the name of a building if more than one type of health care professional are practising there. Should only one type of professional practice be conducted in the same building and the name refers to that profession, e.g. Optometry Centre, the impression may be created that that single practice is more important than other individual practices.

Section 54A companies and partnerships falling in the same category may be indicated as 'practising as' or 'trading as' for purposes of identification by the Board of Health Care Funders of South Africa (BHF), provided that 'practising as' or 'trading as' is followed by a descriptive name of the company or partnership which is limited to the nature of the practice and its geographical location; and provided further that such descriptive name does not form part of the name of the company (or partnership) as registered with the Registrar of Companies and is also not included in any way on letterheads or other stationery of the company. This concession is only aimed at facilitating the allocation of the BHF of practice numbers to such companies/partnerships

32

and is not in any way intended to make it possible for practitioners to practise under special names or titles.

#### Health care practitioners as authors:

A dietitian who is the author or co-author of books or articles may indicate his/her professional standing as this promotes the profession's duty to disseminate information about advances in medical and dental science. Dietitians may participate in the presentation and discussion of health topics by means of public addresses or through the printed or electronic media to lay audiences, provided that no information about their standing is given, which may imply that a dietitian is the only or the most experienced in his/her particular field. Dietitians should not divulge details of their practice when participating in presentations or discussions as this may be construed as touting or canvassing for patients.

All health care professionals are expected to remain anonymous or to use a pseudonym when participating in radio, television or Internet programmes. A professional who is acting as a spokesperson for an organisation may be named; however, it should be stated explicitly that this person/s cannot offer individual advice or see patients who heard or read the programme or article.

#### General:

In the case of uncertainty about the application of these guidelines or in the case of notifications that are not covered by these guidelines, dietitians should consult ADSA or the Professional Board for Dietetics. The term 'health care professional' as used in the context of these guidelines refers to dietitians as well.

The information in Part 2 has been summarised from: DTB/8 March, 'Guidelines for making professional services known'.