

The

FOOD MAGAZINE

Campaigning for safer, healthier food for all

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Sustainability starts at home

In his book on climate change, *The Revenge of Gaia*, scientist James Lovelock suggests a terrifying likely future for humanity unless drastic action is taken to curb greenhouse gas emissions, "...is our civilization doomed, and will this century mark its end with a massive decline in population, leaving an impoverished few survivors in a torrid society ruled by warlords on a hostile and disabled planet?" Whilst Lovelock is surely right to hard press

our attention to the need for action on global warming, his doom laden perspective has been debilitating for more than one reader of *The Food Magazine*.

"I read his book at Christmas and every time I think of my children's future now I feel so hopeless, he made it all this terrible stuff seem so inescapable," said one reader. Another wrote in to wonder why it was worth caring so much about the environment when the future looks so bleak.

However, Lovelock's vision had the effect of further galvanising one climate activist, Rob Hopkins, the inspiration behind the idea of Transition Towns – places where people are starting to, "unleash the collective genius of humanity," to plan creatively for our more climate chaotic future in which fossil fuels are increasingly scarce and very expensive.

Continued on page 9

An Olympic hopeful?

Organisers of London 2012 promise that the Olympic and Paralympic Games will leave a lasting legacy for future generations. But legacies come in all forms, as the eighty or so plot holders at Manor Gardens Allotments in Stratford well know. The bulldozers are scheduled to roll over their carefully tended patches sometime after they are evicted this April to make way for footpaths and a giant TV screen for the 2012 Games.

At that point 80 or so years of local food growing will end on the site and, as relocation plans for the plot holders have now fallen through, another man's dream of a legacy will end too.

"Major Arthur Villiers was a philanthropist friend of Winston Churchill and a bank director, he donated land in this area for allotments and sports facilities because he was concerned about the welfare of poor people," says allotment holder Julie Sumner, "instead of evicting us, this is the perfect chance for the London Development Agency, and the Olympic Delivery Authority (ODA) to make us a showcase project for these Games which, after all, are supposed to be all about sustainability and benefit for local communities."

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A plot holder relaxes at Manor Gardens Allotments, threatened by the Olympic Village development in Stratford, East London. Photograph by Mimi Mollica, www.mimimollica.com

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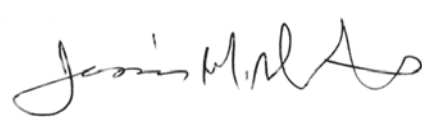
Welcome to *The Food Magazine*

Hello and welcome to another edition of *The Food Magazine*. Thank you to all of the readers who have written to us since the last magazine, we have had many thoughts from you about stories you are concerned about and that you would like us to look into.

One of our chief efforts in this edition has been to provide some of the positive action stories that readers have requested. It has been hard for me in recent months to feel much cheer over the prospects for our planet and our food system, in light of climate change, but I have been shamed out of my gloomy self-pity by speaking to those involved in the work around the Transition Towns movement. Our cover article, Sustainability starts at home, highlights ways for all of us to start making a difference – together. The small orchard being planted in Hackney by a partnership between the Council and residents and the campaign to save the Manor Gardens Allotments (see opposite page) are also clear examples of people fighting for sustainability at a local level.

To facilitate local action, change is often required at governmental level. Check out the action you can take to support the Sustainable Communities Bill, highlighted in the enclosed leaflet; if successful, it will ensure communities and councils are empowered to make changes to support their local areas, including saving shops and post offices. *The Food Magazine* also supports calls for the Government to take a firmer stand over junk food advertising to children (page 2), including the advertising of alcohol before the 9pm watershed (pages 4&5). In a new campaign, we ask why additives banned in food for very young children are still allowed in their medicines (pages 12-14).

One of the best ways for us to keep in touch with what is happening in communities across the UK, and internationally, is from the stories that you tell us. We know our work relies upon your support and interest, so thank you again to all of our readers.



Jessica Mitchell, Editor

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The Olympics and the allotments

Continued from front cover

The campaign to stop the destruction of Manor Gardens Allotments will heat up in the next month before the eviction and campaigners have the support of David Mackay, architect of the Barcelona Olympic Village, who has written to the ODA to ask that they save Manor Gardens.

A recent enquiry into London's allotments¹ by the London Assembly's Environment Committee found that 1,500 plots had been lost in the last decade with over 4,300 people on waiting lists, up around 3,000 from a decade ago.

While Manor Gardens Allotment holders hope for a u-turn, other campaigners are also working to ensure the 2012 Games benefit those most in need in local communities. In the last issue of *The Food Magazine* we reported on the work of London Citizens, an alliance at the forefront of fighting to ensure that employers support the Mayor's recommended living wage of £7.05 per hour. Research shows this wage is essential in helping people to access a healthy diet. After a recent visit to the Olympic site, organisers found security guards paid below this rate.

But, after negotiations with the ODA, its Chief Executive now promises, "For those tenders within London's boundary, we will make it clear that we support the London Living Wage, and we will make it clear in the invitation to tender for ODA contracts that we want to see contractors adopting the best employment practices including trade union recognition, absolute commitment to health and safety and sufficient wage levels. These factors will be considered when we decide which contracts offer best value for money."

London Citizens is delighted that the ODA has promised to use its considerable purchasing power to promote the Living Wage, but will be monitoring the contracts awarded.

■ To support the campaign to save Manor Gardens visit www.lifeisland.org

1) A Lot to Lose: London's disappearing allotments available at www.london.gov.uk/assembly



Allotments at Manor Gardens. Photograph by Mimi Mollica, www.mimimollica.com

Hackney Council yields fruit

A section of Butterfield Green in Hackney, once a BMX bike track and then derelict, has been turned into a community orchard. The joint project, instigated by Shakespeare Neighborhood Residents Association and local social enterprise Growing Communities, received Hackney Council backing and now local people have come together to plant the trees.

The new orchard has some 40 plus fruit trees, including: apples, pears, cherries, medlar, mulberry, plum, hazelnut, herbs and even peach. For the main part, these are 2-3 year old saplings donated by Growing Communities, but the council also donated five older, more established trees as well. 25 local people and organisations have adopted trees and many more are sponsoring the project.

The orchard will be maintained by the residents and overseen by Growing Communities. The whole community benefits as the site is open to the public, so people will eventually even be able to pick apples as they stroll through or picnic. Director of Growing Communities and local resident, Julie Brown, says the orchard is not simply a nice bit of park, but is about local food production. She is particularly pleased that Hackney Council, under the stewardship of Paul Foinette, has agreed to lend assistance with the maintenance, including an agreement to water the trees in the event of

drought. Brown says, "I have been pleasantly surprised by the unanimously positive input we have had from all parties involved in the project."

■ For more information visit the Growing Communities website at www.growingcommunities.org



More than neeps and tatties

Scottish Executive backed schemes to promote fruit, vegetables and other healthy foods in local shops are providing some heartening results.

Shopkeepers, signed up to the 'Neighbourhood Shop Project' launched by the Scottish Grocers' Federation (SGF), have been reporting healthy profits helped by fresh approaches to selling fruit and veg, even in remote areas. Feedback from participants suggests that the quality of conversation at the counter has improved too.

"We've been improving the quality of our fruit and veg," says Andrea Campbell of Castletown Stores in Caithness. "We have needed to be picky and send low quality produce back to the suppliers, but the message has got through! The healthy eating scheme has been good, with new ideas such as weekend promotions and special offers on certain items. This has helped

increase interest and sales. Customers have been very complimentary about the improvements and I myself, on a visit to the local Tesco, was surprised to see how competitive we were on price and quality. I have also contributed some recipe suggestions and we chat with locals about ways to cook (for instance) a butternut squash – I don't think Tesco can offer that kind of service."

Campbell, as described in the SGF's project manual *Healthy living in neighborhood stores*, is the appointed, in store, 'Fresh Champion'. Fresh Champions have been instrumental in increasing sales in participating shops. Ross Kerr, who has set up the project for the SGF says, "Most of the issues are practical ones. For instance, a fruit and veg stand on wheels – a piece of equipment that can be wheeled to locations near the counter or outside the shop in fine weather, has been

an unmitigated success. I should have taken a patent out on it."

The straightforward business approach to increasing profit has proved a welcome incentive to small retailers involved in the SGF project, but another initiative, the Moray Food and Health 'Healthy Shelf' Project, underwritten by NHS Grampian, has produced similar feedback about the viability of selling good quality fruit and veg.

Annette Johnson, Food Access Advisor for NHS Grampian, said, "After initial concerns about waste and surplus, everything sold in the shops, apart from a couple of kiwi fruit. Coming from a community health perspective, there was also added value because it's contact for people." The personal touch, offering recipes and advice, provided customers with a talking point. This is a particular concern for shops in remote locations where the goals may not be all about making money.

A shopkeeper in a remote corner of the Moray Firth region commented, "We are working on such a narrow profit margin that anything that creates an interest is good. We don't make any money on the fruit and veg – it's always been that way. I have sold stuff at cost price because it seems too expensive to me to charge to our customers – we have to pay a premium on our deliveries, but people understand that – it's part of life up here and people have to live here. The scheme benefited us as we're still selling the stuff we were asked to stock."

The projects have now completed the pilot phases and are preparing to disseminate their findings still further, paying particular attention to shops in remote locations and deprived areas. Anita Agarwal, of Community Food and Health Scotland, who will be joining the next phase, says, "There has been an emphasis on profit margins and the business benefits to small grocers who are obviously very interested in making a living. This is a positive sign for the longterm sustainability of the project."

Palm oil producers fight back

As previously reported in *The Food Magazine*, the UK's demand for imported palm oil could threaten the survival of the orang-utan. Their natural habitat, the lowland forests in Malaysia and Indonesia, is rapidly being cleared for palm oil plantations. This cheap fat is added to our food as 'vegetable oil' and turns up in many processed foods, including everyday products like bread, biscuits, chocolate spread and sunflower spread. As it is not always labelled as 'palm oil' you cannot choose to avoid it.

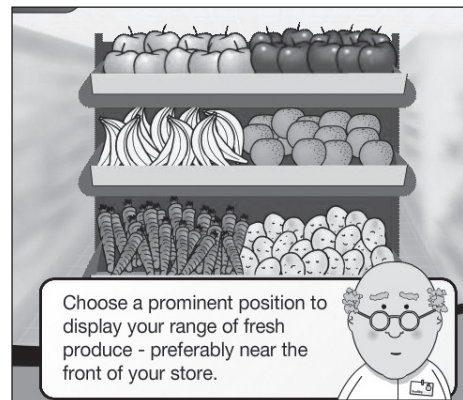
Faced with such criticism and, wary that some food manufacturers are now starting to take corporate responsibility seriously, the palm oil industry is launching a PR fightback. *Marketing* magazine reports that The Malaysian Palm Oil Council (MPOC), which is responsible for a large proportion of the oil's global

production, is intending to spend around £500,000 on a public relations exercise.

As well as stressing its environmental credentials, MPOC denies that consumption of palm oil can increase levels of 'bad' cholesterol and heighten the risk of heart disease. Palm oil is typically composed of almost 47.8% saturated fat – which is four times more than a typical blended vegetable oil. According to the World Health Organization there is 'convincing' evidence that consumption of palmitic acid, the principle saturated fatty acid in palm oil, increases the risk of developing cardiovascular disease.

Palm oil isn't just added to the food we eat. It is frequently used as a frying oil, and is also used in soaps, detergents, cosmetics, plastics and printing inks.

Baby orangutan and mother. © Orangutan Foundation.



The 'Neighbourhood Shop Project' CD handbook is provided to small grocers in Scotland who want advice on stocking fresh fruit and vegetables.

Drinking our way to climate change

Alcohol: a social pleasure for some... and a social headache for others. But, while the papers are full of stories about teenage binge drinkers, scant attention is paid to the fact that alcohol production and consumption – as with many foods and drinks – carries with it both environmental and health burdens.

Consumption of alcohol in the UK – including imports and excluding exports – accounts for at least 1.5% of the UK's total greenhouse gas emissions. Whilst this isn't at the level of meat consumption (contributing a massive 10%), the alcohol industry clearly produces a significant quantity of emissions. The UK is legally bound to reduce such emissions under the terms of the Kyoto Protocol – in order to combat the effects of global climate change

The greenhouse gas emission 'hotspots' in the production life cycle of alcoholic drinks vary according to the type of drink, but, in general, one of the key hotspots is the consumption stage, largely relating to energy use in pubs, clubs and restaurants.

Transport is also an important contributor to life cycle emissions, particularly with alcohol that is imported from overseas (although a short journey by road may not be better than a longer journey by sea). Packaging can be significant too – particularly for small bottles and cans – with bottles ranking slightly worse than cans.

Alcohol miles contribute to climate change



One of the most important factors is the way in which we like to drink our alcohol. The shift towards bottled and canned (instead of draught) beer and for drinking beverages which are supposed to be consumed cold, such as white wine, chilled lager and cider, all have energy implications. As for the growth of global brands, with their concentrated production and distribution structure, the impacts here appear to be mixed. Concentration in the sector means that we now have fewer and larger breweries and distilleries, which are more energy efficient, but it is possible that these efficiency savings do not offset growing transport related carbon emissions.

So what is being done to improve the energy efficiency of the drinks sector? Action is being taken at the malting, brewing and distilling stages, where high energy costs mean it makes commercial sense to reduce energy usage. The industry is also acting in response to its responsibilities as set out in the UK Climate Change Agreements and the EU Emissions Trading Scheme.

Work is also ongoing to reduce packaging related impacts. However, in regard to transport and the pubs, clubs and restaurant sector, very little is being done to address emissions. In the hospitality sector this is perhaps due to ignorance of the problem, as at present there is no single government policy which seeks to influence

energy use in the sector, despite it being one of the main areas of concern.

Of course, while efficiency and technological improvements can do much to reduce emissions from the drinks sector, it is important to think not just about how these drinks are produced and distributed but also about how much we consume. We are, on average, drinking more and more each year, unlike the rest of Europe where, on the whole, drinking levels are falling. Unless efficiency gains can outweigh the growth in absolute consumption, the net result will be more alcohol related greenhouse gas emissions.

Tara Garnett, Food Climate Research Network
www.fcrn.org.uk

Healthy schools and fair trade

School children all over the UK are running their own fair trade co-operatives selling a range of food products. One, called CocoaFair, has ditched their school's vending machines and set up healthy food projects, with all profits going to an educational charity in Sri Lanka.

According to the teacher who helps students to organise the project, "The breaktime tuck shop is now entirely fair trade. The drinks we sell are cartons of fruit juice, and we are also investigating the possibility of selling smoothies in the spring. As we live in a fruit growing area, we promote locally grown fruit at key times of year. On our sponsored walk, we sold home made cakes made with fair trade ingredients. At parents' evenings we sell fair trade tea and coffee."

Many of the fair trade co-operatives have relied on sales of fair trade confectionery to boost profits, but the new school food standards coming into force in September will ban these.

However, a new report by Sustain, the Alliance for Better Food and Farming, shows that co-operatives can promote fair trade and make a profit while taking account of healthy eating. Sustain did the research on behalf of Young Co-operatives, a not-for-profit organisation that helps school students start their own fair trade co-operatives.

In response to the research, Young Cooperatives has already launched initiatives to help schools to deliver the new, healthy, fair trade projects. This includes ideas for sales of fair trade fruit, nuts and seeds.

■ To find out more visit www.sustainweb.org or www.youngcooperatives.org.uk.

A fair trade co-op making smoothies for their classmates



Does TV encourage

Cally Matthews reports

A survey for *The Food Magazine* has taken a look at alcohol in television soap operas. It shows that alcohol – shown in background scenes or being consumed by characters – accounts for considerable screen time in many popular soaps.

Our Table (below) shows that, during the two week survey period, *Hollyoaks* was the leader in total alcohol related references with these accounting for around 18% of screen time. According to its website, *Hollyoaks* is the UK's most watched teenage drama serial; it goes out Monday to Friday at 6.30pm, right after the *Simpsons*.

All of the soaps we surveyed go out before the 9pm watershed and have millions of viewers for each programme segment, including many children and young people. However, alcohol still plays a prominent role in these dramas.

During the survey period, the alcohol scenes in *Hollyoaks* were largely centred on the lives of three friends. One owned and managed a bar-restaurant while the others assisted him. The three were young twenty-somethings, single, carefree and enjoying life to the full. Each looked a picture of health, of average weight and physically fit. The characters used alcohol to help them enjoy dates and to celebrate special occasions. Even when characters were not explicitly drinking, alcohol appeared in the background – on shelves at the bar, on other tables in restaurants.

Similarly, other programmes showed characters that were exemplars of health, yet storylines showed an obvious mismatch with their unhealthy drinking habits. In *Home and Away*, the chief offender was a gym instructor. As you might imagine, he was fit, healthy and

sporty, yet 50% of his scenes saw him drinking beer or wine.

Our survey data is backed up by other studies, including one for Alcohol Concern, the national agency on alcohol misuse. *The Portrayal of Alcohol and Alcohol Consumption in Television News and Drama Programmes* (Hansen 2003) surveyed soap opera content over several weeks and found, on average, seven drinking scenes per hour, with alcohol used primarily for celebrations and as an aid to romance. The study found no explicit portrayal of alcoholism and a tendency to portray potential problem drinkers in a humorous, or light-hearted way.

A problem with over-saturation of images, particularly alcohol, is that it dulls the senses to the point in question – it becomes the 'norm'. Suddenly a daily lunchtime and after work visit to the pub is normal. Two to three glasses of wine each night is normal. We become desensitised to the shock of the image.

Hansen criticises television for this naturalisation of alcohol consumption. Our survey showed that alcohol was the most frequent food group in background scenes, for example, 69% of all food occasions in *Coronation Street* involved alcohol. Our Bar Chart (below right) shows how alcohol dominates the food groups appearing in background scenes of *Hollyoaks*.

Evidence is accumulating about harm to young people from this 'naturalisation'. A recent study in the *British Medical Journal* (2006), *In a lather: do soap operas promote teen drinking?* focused on young people in the Netherlands and found that soaps were linked with alcohol abuse in young people.

Alcohol Concern acknowledges that just because young people drink, they do not



Over two million people tune into each episode of *Hollyoaks*, in which alcohol plays a pivotal role. But what message does this give to the young people who watch the show?

necessarily go on to develop into problem drinkers. However, according to their research, worrying numbers of young people do binge, with, for example, over 50% of 15-16 year olds admitting to having had more than five drinks on a single occasion in the previous month. The effects of alcohol on the bodies of developing young people is hard to predict. The charity is also concerned that accidents while drunk are a big problem; drink does not have to be a long term problem to have serious consequences.

The extent to which television can be expected to promote a 'better' vision of society, or even a truly realistic one, is a problematic question. Certainly, programme makers are required to follow official guidance from Ofcom, the government regulator, for alcohol in programme content. We contacted the BBC, Channels Four and Five and ITV and received official statements confirming that they follow the Ofcom Broadcasting Code, with, for example, Channel 5 asserting, "Representation of alcohol use and/or abuse in Five programming is governed by the guidelines laid down by the Ofcom Broadcasting Code. In accordance with these, alcohol is not featured in programmes made primarily for children unless there is strong editorial justification. In other programmes broadcast before the watershed which are likely to be viewed widely by under-eighteens, alcohol abuse is generally avoided, and in any case not condoned, encouraged or glamourised unless there is editorial justification."

As the soaps we surveyed all have bars or clubs or pubs as significant settings, it is likely that 'editorial justification' is going to allow

Average soap screen time with drinking related references

Television programme (all pre-9pm watershed)	Visual reference to alcohol %	Character drinking alcohol %	Total %
Hollyoaks, C4	10.0	8.2	18.2
Coronation Street, ITV1	4.5	13.1	17.6
EastEnders, BBC1	4.1	12.3	16.4
Emmerdale, ITV1	1.6	14.5	16.1
Home & Away, C5	1.3	5.4	6.7

Data collected in July 2006

teenage drinking?

many scenes with alcohol. The questions of glamourisation and encouragement are perhaps more open to interpretation. The regulator, Ofcom, is charged with enforcing its Code, but day to day programme content is more likely to be monitored, and complained about, by members of the public who object to certain scenes.

While the nation's soaps continue the process of normalisation of alcohol under the watchful gaze of the regulator, campaigners have focused their attention on efforts to get a pre-9pm watershed ban on alcohol advertising on television. The drinks industry spends around £800 million a year promoting its products, against a spend last year by the government of not quite £4 million on safe drinking capaigns. According to Srabani Sen, Chief Executive of Alcohol Concern, "This is way off beam." Campaigners want to make sure young people are protected as much as possible from the power of that spend and believe a total pre-9pm ban is the best way to do this.

A recent study, published in the Archives of Pediatrics and Adolescent Medicine, *Effects of alcohol advertising exposure on drinking among youth* (2006), found that young people aged 15-26 who watched more alcohol adverts tended to drink more too. Nearly 2000 young people were interviewed for the study, which took place in the United States.

Scheduling restrictions on TV advertisements are almost all based on the

Broadcasters Audience Research Board audience index. Programmes attract alcohol advertising restrictions if the proportion of under 18s in the audience is greater than the proportion of under 18s in the population at large.

This still leaves some programmes with many young viewers but not of a high enough percentage to enact a ban; it also means that programmes with very high overall viewing figures need large child audiences to enact a ban. For example, alcohol adverts are allowed during *Home and Away* – a programme full of young characters that goes out on weekdays at noon and 6pm and which has a viewing audience comprised of around 8% under 16 year olds.

The complexities of the current system mean that it is not that easy to find out if advertising is allowed during specific programmes. The Advertising Standards Authority (ASA) was unable to tell *The Food Magazine* whether alcohol adverts were allowed during *Emmerdale*, *Coronation Street*, *Hollyoaks* and *Home and Away*, despite its role as a so-called one-stop-shop for consumers concerned about advertisements. They told us to phone the Broadcast Advertising Clearance Centre (BACC), a specialist body responsible for the pre-transmission examination and clearance of television advertisements.

However, BACC told us, "Our role is to advise broadcasters of the character of the



Broadcast at 7.30 in the evening, Coronation Street attracts around 11 million viewers.

commercial, and in this case, we will inform the broadcaster whether it is a commercial for alcohol. It is up to the broadcaster to apply the scheduling restrictions which apply, and they are therefore better placed to reply to your question, whether the four programmes have a higher share of young among their viewership."

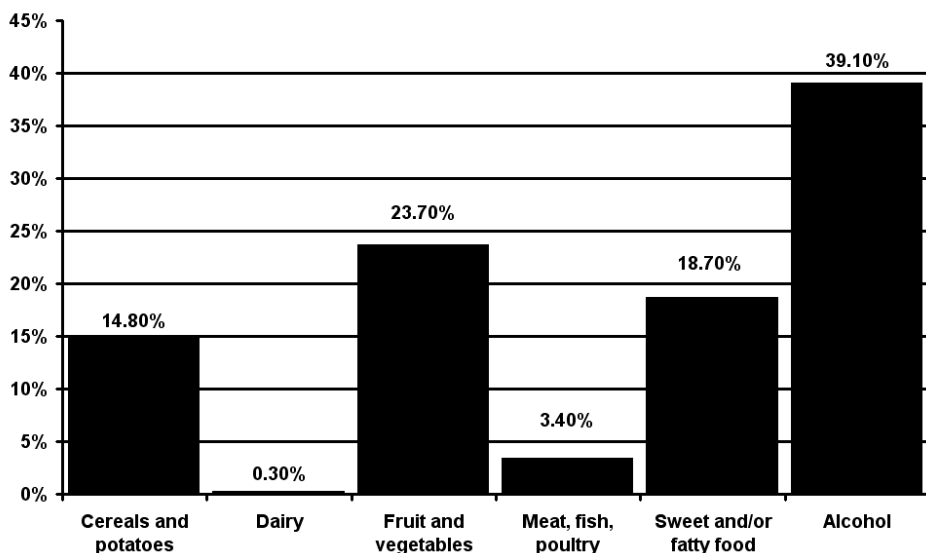
We checked back with the ASA which told us they work on a complaints basis; if we had a complaint about a specific alcohol advert they would then investigate and the broadcasters would have to release audience information to them.

This type of system calls into question the degree of regulation and is not particularly useful to a parent who might not want to sit and watch a programme, but who would prefer to find out if adverts for alcohol were likely to occur during programmes their children would be watching. *The Food Magazine* tried to get in touch with, for example, Channel 4 and were told that it could take up to three weeks for an answer.

According to Jane Landon, Deputy Chief Executive of the National Heart Forum, "A pre-9pm watershed ban is logical, it is easy for people to monitor at home, as all they need to do is look at their watch to see if an advert is on when it shouldn't be. A watershed also offers a higher protection to all children and young people, as we know many young people watch all kinds of programmes which attract a mixed audience. At the moment the viewer at home is left to decide whether to make a complaint, which is then investigated by the Advertising Standards Authority. Even if at a later date the ASA rules against a broadcaster, the consequence is usually the regulatory equivalent of a slap on the wrist."

Cally Matthews is a Public Health Nutritionist

Food groups in background scenes of Hollyoaks



Data collected in July 2006

The slice is

Bread is big business. On a typical day in the UK we spend over £7.4 million on nearly 12 million loaves of bread, 70% of which will be white. But how much do we really know about our daily bread? Ian Tokelove reports.

Who bakes our bread?

Our supermarket shelves appear to be stacked with numerous different brands of bread, but the majority of these loaves are baked by just three companies – Allied Bakeries (owned by Associated British Foods), British Bakeries (owned by RHM – Rank Hovis McDougall) and Warburtons. Together these companies account for almost three quarters of the wrapped, sliced bread market by value.

These companies typically make a wrapped, sliced loaf which is produced in highly mechanised factories known as ‘plant bakeries’. 80% of our bread comes from factories such as these, including supermarket own-label loaves which are baked by the independent plant bakeries before being inserted into the supermarket’s wrappers.

Instore bakeries account for a further 17% of the bread we eat, whilst traditional ‘craft bakeries’ produce a mere 3% of our daily bread. This contrasts sharply with other countries in Europe, where the craft baker is still a respected and valued part of society. Such bakers continue

to represent the bulk of bread production in Europe, but they are under pressure and slowly losing ground to the industrial power of the plant bakeries.

The next best thing?

The major bread manufacturers have a product which is already consumed by almost every British household, so they must rely on ‘product innovation’ if they are to boost the sales of their brands. This can be as simple as producing loaves with ‘thicker slices’ or loaves which are ‘designed for toasting’; but it also panders to fussy children who want ‘crustless loaves’; it gives us bread which claims to aid menopausal health and loaves that contain added omega 3 fish oils. We even have bread which can supposedly help us slim (each slice is half the weight of a ‘normal’ slice of bread).

Best of all, we can now buy ‘premium’ and even ‘super premium’ bread, as if the manufacturers have suddenly realised that their basic product might not be that good after all.

How is bread baked?

Modern bread baking, like much modern food production, has been designed to produce a ‘fast food’ product which is necessarily dependent on additives and other processing aids. Almost all sliced, wrapped bread is now made this way, using a technique known as the Chorleywood Baking Process (CBP).

Invented in 1961, the CBP is a fast, industrial method of bread production. Wheat grains are typically crushed by rollers (the nutritious bran and wheatgerm are removed at this stage) and mixed with water, fat, salt, yeast, chemical improvers (mainly ascorbic acid), enzymes and emulsifiers to produce a dough which is then subjected to intense, high-speed mixing. The bran and wheatgerm are sometimes added back to the mix but are

usually left out of the ubiquitous white bread mixes.

The CBP substantially reduces the long fermentation period needed to make bread rise, saving manufacturers both time and money. The end result is a lighter, puffier, softer textured loaf which seems to appeal to many consumers, but which lacks the depth of flavour produced by slow fermentation. Sugar and artificial flavourings are commonly added to improve the flavour. The final product is then given a light coating of preservative (usually calcium propionate or E282) to ensure it appears ‘fresh’ for longer.

Organic sliced, wrapped breads can be produced using the CBP, as long as the ingredients used are organic.

What is added to our bread?

White bread, the nation’s favourite, is generally made with flour from which most of the goodness has been removed during processing. As bread is such a staple part of the British diet, successive governments have demanded that at least some of the goodness be put back in, for the sake of the public’s health.

By law, two B vitamins (thiamin and niacin) and the minerals calcium and iron must be added to white and brown flours. Wholemeal flour, made from whole grains, naturally contains these vitamins and minerals. As it is the flour which is fortified, not the bread, these added vitamins and minerals are not listed as ‘ingredients’, as they might be on the side of a breakfast cereal box.

What’s been taken out?

The majority of British bread is made from wheat grains which have been mechanically crushed between high speed steel rollers. The rollers allow the miller to separate out the various components of the grain. The outer fibrous layer, known as bran, is removed and so is the ‘germ’ (the embryo from which a new plant would grow). This wheat germ contains most of the oils, some protein and the highest concentration of vitamins and minerals in the grain.

This leaves the innermost layer, the white endosperm, which is mostly carbohydrate and some protein, and this is the basis for most of our bread. During the milling of white flour, over 20 vitamins and minerals present in the original grain are significantly reduced in quantity.

If a brown flour is required, the separated germ (and perhaps some of the bran) is returned to the mix. If a wholemeal flour is required, both the separated bran and the wholesome germ are returned to the flour mix.

What does the label tell us?

Pre-baked, wrapped loaves

Loaves can be sold both with and without any packaging, which means it can be hard to discover what ingredients have gone into your bread. Pre-wrapped bread (baked in a factory before being transported to shops) must display an ingredients list on the wrapper. This will typically show the four basic ingredients of bread – flour, water, yeast and salt, along with the ingredients that are needed to turn the traditional loaf into ‘fast food’. These extra ingredients might include added sugar, fat, emulsifiers,

right?

preservatives, flavourings and flour treatment agents.

The wrapper may also include a 'nutrition panel', but like all foods, it does not have to include this unless the packaging also makes specific claims such as 'low in fat' or 'can help reduce blood cholesterol'.

'Freshly' baked loaves

Loaves which are baked on the premises are usually sold unwrapped, or in simple, clear packaging. Much of this bread will have been produced from dough made in an off-site factory and simply baked off at the point-of-sale. Although it contains many of the additives and hidden extras of pre-wrapped bread it does not have to list them as ingredients – which makes it seem much more 'natural' and appealing.

Such bread only needs to be labelled with the name of the bread (e.g. white bread) and a description of the category of any additives present (e.g. contains flour improvers and preservatives).

If the bread is sold loose and unpackaged this information must be given on a ticket or notice immediately adjacent to the bread, but in practice you won't always find this information. That is all the information available to consumers. If additives are included, you can't tell which ones.

There is also no legal requirement for full ingredients information to be listed with this bread. Whilst such information might be costly for a small craft baker to produce, the cost could easily be assimilated by the factory bakers.

You will also find no nutritional information on the packaging, unless the bread comes with a specific health claim. This can work to the manufacturer's benefit. For instance, a 2005 study by Buckinghamshire Trading Standards found that the salt content of unwrapped, unlabelled bread was roughly 20% higher than similar wrapped breads. Health conscious shoppers might choose to avoid such bread, but without any nutritional labelling they are not given any choice.

What doesn't the label tell us?

Even if you buy bread that is packaged and labelled with a 'full' ingredients list you may still

be consuming hidden ingredients with every slice. These include:

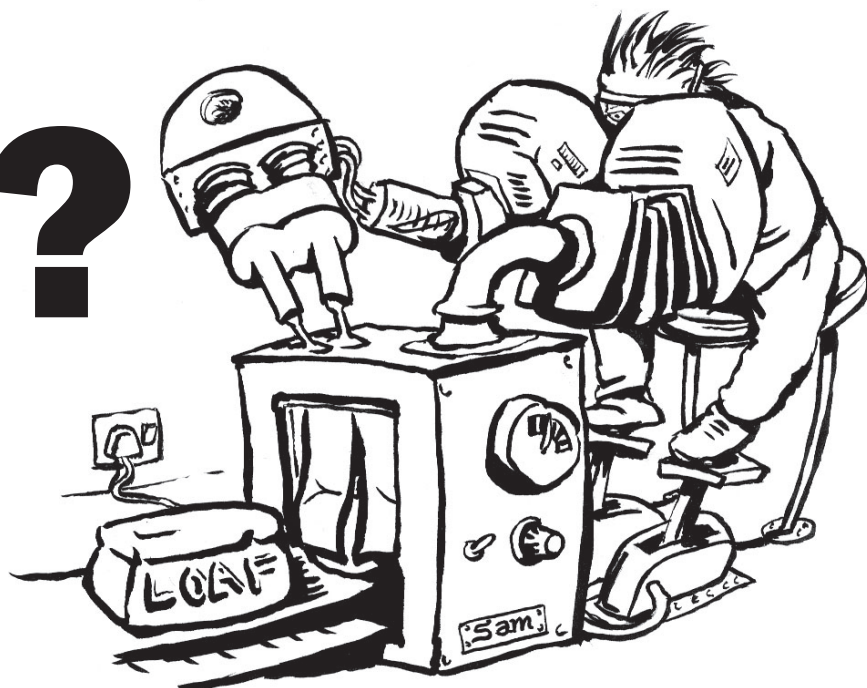
Enzymes: These are used by industrial bakers to control the metabolic reactions within the dough. Bakers have ten enzymes to choose from, including amylase, oxidase, protease and peptidase.

The enzymes are produced from cereal, fungal, or bacterial sources – some of which may have been genetically modified. Enzymes can be used to increase bread volume and to control the softness of doughs. Organic bread can contain 'organic' enzymes. The baking process deactivates the enzymes, so they no longer need to be declared on the label.

Flavourings: The speed at which modern loaves are produced means that there is little time for natural flavour to develop in the bread. Manufacturers can get around this by using flavourings. These food additives do not have to be specified, so whilst the ingredients list will show 'flavouring' we cannot tell what they are or how they were produced.

Bleach: Most bleaches are now banned, but chlorine dioxide gas can still be used to make white flour whiter. You won't see it mentioned on the label as the gas dissipates before the bread is baked.

On March 13th, The Food Standards Agency (FSA) concludes a consultation setting out options to improve the intake of folate for young women with a view to reducing the amount of neural tube defect (NTD) affected pregnancies in the UK. For more information visit www.foodcommission.org.uk and look for our report Folic Acid and Fortification.



A break with tradition

Factory baked, modern bread, pumped full of air, enzymes and additives, is a far cry from traditional bread – and yet manufacturers try very hard to persuade us that their bread is baked according to simple, family recipes.

For instance, take the wrapper of this Warburtons Toastie Sliced White Bread, which tells us that "the ingredients that make this loaf are special – over 125 years of tradition, five generations of heritage, tonnes of quality and a touch of warburtons magic." The 'special' ingredients which Warburtons use include vegetable fat, soya

flour, emulsifiers E472e, E481, E471, preservative E282 and flour treatment agent E300 and E920. Any enzymes are unlabelled. So much for 125 years of tradition!



Meanwhile, Allinson tell us how they, "use loving craftsmanship to bake real bread, that's full of goodness as well as flavour. To us,

it's an art form... We make sure we bake our bread in a time-honoured fashion... (and) pride ourselves on using the traditional craftsmanship that Dr Tom Allinson started, incorporating over 100 years of baking expertise and strict quality control."

The 'finest', 'time-honoured' ingredients which Allinson use include vegetable oils and fats, sugar, soya flour, emulsifiers E471, E472e, preservative E282 and flour treatment agent E300. Again, any enzymes which may have been used are unlabelled.

Living bread

Jessica Mitchell goes in search of 'living bread' – the stuff made from stoneground, wholemeal flour, water, yeast and salt – and plenty of time.

Many years ago, my first ever interview as a journalist was with Dr. Walter Yellowlees, as we sat out in his back garden in Perthshire, he told me about his early days as a GP in the Highlands and how he was surprised to find the illnesses of the cities in the midst of beautiful, agricultural countryside, illnesses he attributed to an over-processed diet based on too much sugar and white flour.

I remember the story he told me about getting the local bakery to produce a whole wheat loaf that, from then on, was known as the Doctor's Loaf. As a leading light of the McCarrison Society for nutrition and health, Yellowlees' famous lecture, *Ill fares the land*, was delivered to the Royal College of General Practitioners nearly thirty years ago. In it he said, "In digressing briefly to ask why industrial peoples substitute in place of whole wheat flour (which is so simple to mill and pleasant to eat) a white, inert, tasteless, constipating powder, robbed by complex processing of most of its fibre and much of its virtue, we learn as much of man's psyche as of his nutritional needs."

These themes arise again, most recently in the book, *Bread Matters*, in which Andrew Whitley wrote, "Bread...represents life because it is the result of an indefinitely renewable cycle involving the birth, production and death of organisms within it...From the derivation of our word 'companion' (someone with whom we share bread) to the words of the Christian Eucharist, the material simplicity of bread as food is constantly suggestive of its involvement in friendship, hope and transformation." As a campaigner for what, in conversation, he called, "living bread," he wants to see bread restored in its ability to be

health giving, but as a baker of many years, he also admits to hoping people simply get deep pleasure out of making and eating it.

Expert bread maker and author Tom Jaine and I once shared a memorable visit to an archaeological site in Bulgaria, in the midst of a Communist-era council estate we were privileged to see the oldest ever ovens in the world, dating back some 7,000 years, where Jaine was truly inspired. He says, "Bread has always been a communal activity, linked to settled agriculture, and cooperative living. Shepherds, pastoralists, rarely had the wherewithal, or indeed the grain, for the complex process of building masonry ovens and creating the wheaten loaf, contenting themselves, until quite near our own times, with oatcakes, girdle scones and the like. We may have severed our link with the actual making of bread – consigned it to the industrial estate, at hours when good people are fast asleep – but the sight of an old oven in a back courtyard of some village still gives rise to those images of community, of sharing."

That link between community and bread is being reformed at the Old Post Office Bakery in South London, where a wide open door and huge window sprout loaves of all types and where friendly staff are happy to take requests from customers for loaves they should bake. The organic bakery focuses on the simple ingredients – water, stoneground flours, salt, sometimes yeast and sometimes a bit of fat – and sells mainly from the shop or at local farmers markets.

Another philosopher of bread is in the bakery just behind the counter, Karl-Heinz Rossbach founded the place back in 1981 and is still baking, with the principle that, "Healthy bodies and healthy minds, they are completely linked."

The bakery has staff from all over, and they call themselves amateurs, but they call on the expertise of Eastern and Central Europeans like Rossbach, and the new German master baker who says the 5.30am starts are like a holiday compared to the 3am start in German bakeries, along with a Polish master baker who does pastries. One of the bakers, South Londoner Richards Scroggs, notes the years of training that these master bakers have had, apprenticed to experts; Scroggs is now an experienced baker himself, but he says, "I actually studied at the National Bakery School, but to tell you



Making the day's loaves at the Old Post Office Bakery

the truth, they mainly taught the Chorleywood Process there, it was nothing like how these guys learned."

But Jaine and Whitley confirm things are changing, with the former noting some new, artisanal bakeries, "In London, if few other places, you can actually buy bread that is better than you can bake yourself. You couldn't say that when I was younger," and the latter even suggesting we might someday hope to apply, to our bread, the notion of 'terroir' – to understand, think our best local cheeses – produced with milk from a local area, with traditional recipes, and all the memories attached. Whitley notes some English wheat growers producing varieties of wheat and spelt derived from seed never subjected to modern hybridisation, including one saving seed from wheat crops in an effort to encourage local adaptation and biodiversity. Whitley himself says he always makes sure he has a story to tell about his breads.

In the meantime, if you are looking to eat bread that is good for your mind and body, Whitley recommends, "Try making it yourself." If you cannot manage that, he suggests asking some questions of the baker: How long has the dough been fermented, have any additives been used, how much yeast has been used and does it contain any added enzymes? If you can't actually find the baker, try trusting your palate, the claggy, flavourless lump stuck to the roof of your mouth is probably not 'living bread'.

For more information about bread, including Andrew Whitley's evolving ideas for a campaign for 'living' bread, to include pressure on the industry to improve standards, visit www.breadmatters.com.



Sustainability starts at home

Continued from front cover

Environmentalism, Rob Hopkins, now lives in Totnes, a Transition Town in the making, where dozens of local people are already working together to plan for what they believe will be a radically altered, but perhaps much enriched society. Locals have plans to make Totnes the nut tree capital of England by ensuring trees are planted all over the area and that existing trees are looked after. A meeting is to be held in a couple of months to include owners of large, landed estates to discuss how these could fit into plans for a more localised, organic agriculture.

Totnes is not the only town in the UK planning this way, nor is Hopkins the only activist, as he notes, "Many of us have faith in humanity, I heard Lovelock talk once and thought he was irresponsible, it doesn't help to think of the future as being one where we have descended to cannibalism or something. We have to make changes, these won't happen overnight and they won't happen automatically, but you can just say oh my god and give up, or say fantastic, let's look for how we can make a better society together."

There are two key challenges at the heart of Hopkins' ideas:

1) Climate change is happening and we need to drastically reduce emissions of greenhouse gases. A 90% cut in CO₂ emissions by 2030 (a figure also proposed by other experts including George Monbiot, author of *Heat: how to stop the planet burning*) is needed. The UK government currently proposes less stringent targets, suggesting European wide cuts of 60% by 2050.

2) Fossil fuel reserves have peaked, and we are now using the last 50% of the earth's supplies¹ while our population grows larger. By around 2030 fossil fuels will cost upwards of \$120 a barrel and this will have drastic consequences for our fossil fuel dependent society. In his report *Eating fossil fuels*, geologist Dale Allen Pfeiffer estimates that it takes approximately ten calories of fossil fuels to produce every one calorie of food eaten in the USA. Food is fuel dependent at manufacturing, storage, agricultural and transport stages. Other systems that produce our medicines, houses and clothing

are similar, as is the whole way we organise our lives and work.

Debate will continue over the accuracy of predictions but no reader of *The Food Magazine* can have failed to note the increasing convergence on these imperatives. In launching the *Stern Review* on climate change in the autumn of 2006, Tony Blair noted that disastrous consequences are set to happen, "not in some science fiction future but in our lifetime."

So, the key thing to ask is, what can we do? For Hopkins, "Our plans in Totnes will take around a year and a half of brainstorming and work on topics like food production, transport, medicines, education, basically everything we will need to do in a new way. All of this will be summed up into one document called an energy descent plan to be called *A Powered Down Totnes*, that will form our guidance for work over the next decades."

For others, like Hopkins, working for this changed future, this means an acceptance of serious events to come, according to John Webber of Transition Town Lewes (in East Sussex), "Things are likely to get very desperate but I think that makes it so important that we work together now. We are at an early stage of our plans, but we are already working on

finding out more about local agricultural land including the number of local allotments, we are making links with local food producers and those who do farmers' markets and large scale composting."

For those involved in the Transition Town movement there is an awareness that some might see them as the doomsayers, but they are keen to dispel this idea and note that those getting involved are from all walks of life. Hopkins gave a presentation at this year's Soil Association conference and Director Patrick Holden found him, "Absolutely inspiring in his ideas."

For Hopkins there is simply not a point to pretending anymore, "We need political action, but in some ways this is just too big, too hard for people to really comprehend. People need to start acting locally and being a part of planning for the changes to come. This is like a crash course in breaking a dangerous addiction, it is so hard to imagine what the world will be like if we have to reduce energy use by so much, so fast, that is why we need to start planning now."

■ If you would like to know more about getting your town or neighbourhood involved, check out the Transition Towns website www.transitiontowns.org

1) Jeremy Leggett The Empty tank: oil, gas, hot air and the coming financial catastrophe.

Local residents involved in the Transition Town process in Totnes



Science of life?



Dr Rafik Taibjee is a junior doctor training to be a GP. He is also an inspector of medical schools for the General Medical Council. He has taken sabbatical leave in order to study Ayurvedic medicine in India.

When we first discussed this article, *The Food Magazine's* Editor asked me, "How can a doctor watch their patients becoming gradually obese?"

I think there are two answers. Patients now only go to a doctor for a pill or treatment and not advice. Doctors feel like hypocrites as we often don't practice what we preach. I've wondered why it took Jamie Oliver to take up the campaign for school meals, when many doctors have been passively allowing their children to eat unnutritious school meals for years. Doctors used to be the drivers for social change, but we now seem cynical. We seem busy enough fighting for our jobs, whilst the NHS remains the play-thing of politicians.

Ayurveda, 'the Science of Life', has its origins some 5,000 years ago. As a Western doctor and trainee GP I wanted to see whether its practice was still relevant today. What I have found during my studies, is a system approaching health, rather than illness, as its central focus – describing diet, medicine and behaviours that are both beneficial and harmful to life.

In this article, I will touch on Ayurveda's basic philosophy, how a daily regimen is important and some of the observations made by its ancient sages.

Ayurveda believes all matter, life and the universe are comprised of five elements: Earth, Water, Fire, Air and Space, in differing proportions. From these arise the three biological humors (doshas) of Vata (made of Air and Space, flowing like the Wind), Pitta (Fire, like the Sun) and Kapha (Earth and Water, being heavy, cold and damp). To regulate our internal environment and keep ourselves healthy, the doshas must be in balance. When they are disturbed, disease ensues.

Of course, we are all unique individuals, but the sages of Ayurveda noticed similarities between groups of people. They defined seven recurring patterns of physical and mental characteristics which they termed Prakriti or Constitution. These are determined by looking for the dominance of one, two or all three of the doshas in a person.

So how is this useful? The answer is self-awareness. Disorders are more likely to affect different constitutions. As foods also contain the doshas, you might make an illness worse by further pushing the doshas out of balance.

For example, a fiery, Pitta constitution would be aggravated by hot spicy foods, which might lead to a stomach ulcer. The idea is that if you know your temperament, you can consider what you eat. We must listen to our bodies. It is important to not overload our digestive system, so we should only eat if hungry and if our bowels have fully digested the last meal.

I will now turn to how Ayurveda is viewed today. In India, fewer people use Ayurveda each year. This is partly due to a belief that Western medicine must be better. My lecturer, Dr Nandan Lele believes, "This was predicted in the yogas (the Kaliyug). Now is an era of self destruction and losing control of our senses – for example – our tongue (taste) leading to obesity." He also agreed with surgeon, Dr Sachin Kubher, who believes, "Ayurveda cannot be followed easily. There is too much junk food. We are losing our extended family so elders can't do what is needed and youngsters are too busy in their working lives. As a result our children won't learn by good example."

So what Ayurvedic concepts are useful for me as a doctor working in the UK? Most importantly, Ayurveda does not treat a specific illness, but the underlying cause, so that other associated illnesses can also be prevented. Western doctors learn about preventative medicine, but have difficulty putting this into practice. This takes both

A patient is bathed in warm steam following a massage



Sample characteristics of the three Ayurvedic body types (doshas)

	Vata	Pitta	Kapha
Body frame	Lean	Moderate, early graying of hair	Large
Appetite	Variable	Good	low
Thirst	Variable	Excessive	less
Tastes Enjoyed	Bitter food and salads	hot and spicy	Sweet and salty
Emotion	Anxious, unpredictable	Aggressive, irritable	calm
Prone to	Arthritis, pain syndromes, dry skin, constipation, gas	Peptic ulcers, inflammation, rashes, liver and eye problems	Congestion, flu, diabetes, asthma, swollen limbs

GPs and dietary advice – get in touch with *The Food Magazine*

time and skill, yet what training do doctors get? How many dietitians are there and do doctors work with them as part of their team? And how is advice possible in an eight minute consultation, which is the average length of a GP consultation? Or when you have ten other patients waiting to be seen?

Many seem surprised that doctors would be interested in complementary therapies. But everyday we see conditions for which we have no cure or answer. Most of my colleagues at medical school would have loved the opportunity to explore complementary therapies as part of their training. Currently, only a minority of students study these in any depth during an optional module.

It worries me how many students may be oblivious to the safety issues of combining various therapies with Western medicine, something every graduate must be aware of, according to the General Medical Council.

Opportunities to learn about complementary therapies are limited because of time pressures on an already crowded curriculum, difficulty in identifying and recruiting good teachers who are bona fide, and a general prejudice against them because of the propagation of the concept of evidence-based medicine (EBM).

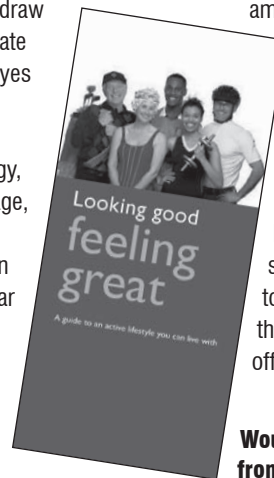
EBM ensures that treatments can be proven to be effective compared to others. Without this evidence, the National Institute for Clinical Excellence (NICE) will not recommend their use. Guided by this advice, local NHS organisations will not be able to justify their provision free of charge within the NHS. The dilemma is that it is difficult to design robust clinical trials for many complementary therapies. It is often the interaction with the therapist which is of paramount importance, including the empowerment of individuals to take back control of their lifestyle.

I have only touched on what Ayurveda has to say, and not even mentioned its specific treatments. Its advice may not be fully practicable in our modern age, but we can certainly learn a lot from it if we open our minds, and more importantly learn to listen to our bodies. As a doctor, it has reminded me that I work for the National *Health* Service and should act to *prevent* as well as treat disease. In doing this, I expect I will have to fight the assumption made by NHS managers that quick consultations are an effective use of time and money. I'll let you know how this goes...

A few readers have been in touch with *The Food Magazine* recently to express concern about the dietary advice on offer at their local GP surgeries. Anna Maria Bedford, of Cambridge, wrote the following:

"I am sending you a leaflet which I found in the waiting room of my local doctor's surgery a few weeks ago. I would like to draw your attention to the Carbohydrate section: I couldn't believe my eyes when I saw sugar, jam, honey and the like listed among the recommended sources of energy, but when I turned to the last page, the small print explained it all. The leaflet was supported by an educational grant from the Sugar Bureau."

State Registered Dietitian (SRD), Jessica Swann, works in surgeries, and got in touch to suggest some key areas that need checking: (1) Did an SRD write the information available in the practice, and was it sponsored by a company or trade group? (2) Did an SRD provide the nutrition training to the practice's medical staff? (3) Does the surgery have a visiting SRD; who can be referred to her, and why?



Readers have also told us about projects they are happy about, including one in Greenwich whereby GPs recommend patients to local food projects.

We would be very grateful if readers get in touch to let us know more about their experiences. We know we have many doctors amongst our readers, and we are keen to hear your points of view.

We have put some brief information on our website at www.foodcomm.org.uk/doctors if any readers want some ideas for questions to ask the GPs or other health professionals at their local surgeries. We intend to follow-up this topic and do more to find out some of the challenges for health professionals in offering this type of advice.

Would you expect dietary advice from The Sugar Bureau to be given out at your local GP surgery? The Sugar Bureau is the face of the UK sugar industry. This leaflet deliberately undermines official health advice by telling us to consume more jam, honey, sugary drinks and soft drinks as part of "a carbohydrate-rich diet."

Badvert

cookies and milk

These Maryland Minis are almost aglow with the comforting, wholesome notion of cookies and milk. A big glass of milk on the packaging makes sure mums think of the nutritional properties of milk, and a large panel tells us, "Each pack contains CALCIUM = 180ml MILK." On the back we are told these cookies are 'Ideal for lunchboxes.'

Now, we've always reckoned that white choc chip cookies are more likely to undermine a healthy diet, not improve it, so we had a quick look at the small print.

The cookies do include added calcium, although much of this comes from the calcium carbonate (chalk) which has been added to the cookies, rather than the added milk powder. The cookies also contain lots of

sugar (30.8%) and lots of fat (26.6%). Over half of this fat is saturated fat, the type we are advised to avoid because it can increase the amount of cholesterol in the blood, which increases the chance of developing heart disease.

Guideline daily amount (GDA) information on the packet makes this product appear healthy, implying that a woman could eat over five packets of cookies and still not achieve her daily 'goal' of consuming 20g of saturated fat.



Needless to say, traffic-light labelling would give this product a red light for sugar, a red light for fat, a red light for saturated fat and an orange light for salt. But, as sectors of the food industry frequently complain, that might give consumers the wrong message!

A spoonful of

Most additives are banned from foods and drinks designed to be consumed by the under threes, and yet medicines for babies and young children frequently contain a cocktail of the very same additives. Ian Tokelove and Annie Seeley report.

One of the first things you learn when you become a parent is that worry and concern can be part and parcel of the job, especially when it comes to meeting your child's basic needs, such as health and nutrition. When a child is ill, many parents will reach for one of the many medicines specifically sold for young children – but how many parents will read through the complicated small print where the ingredients, and sometimes the possible side-effects, are listed?

Having long campaigned against the use of unnecessary additives in food and drink *The Food Magazine* has now investigated the use of additives in infant medicines and has found that a plethora of artificial sweeteners, preservatives and colours are routinely added to medicines for babies and young children – despite such additives being banned from foods designed for the under threes.

Working out what is in your child's medicine is not easy, as a full ingredients list is frequently only available inside the package, rather than listed on the outside. Ingredients listings were not legally required until 1993, when years of campaigning by the Hyperactive Children's Support Group finally forced the disclosure of medical ingredients. We took a look inside the packets and here is what we found.

Survey results

The Food Magazine surveyed 41 medicines designed for consumption by children under three years old. The survey found four azo dye colourings, eight benzoate and two sulphite preservatives, and six sweeteners. All are banned from food and drink specifically designed for consumption by children under three years old.

Azo dyes were found in only a small number of medicines. These were Anbesol teething gel, Buttercup Infant cough syrup, Calpol Paracetamol, Sudafed Children's Syrup and Superdrug Children's Chesty Cough Syrup.

Preservatives were much more common and were present in all but ten of the medicines we surveyed. Where preservatives were present they were invariably benzoates. Tixylix Night Cough

syrup (1yr+) managed to include both benzoate and sulphite preservatives.

Sweeteners were found in all but four of the medicines. Morrisons Junior Paracetamol and Superdrug Junior Paracetamol Suspension (both 3mths+) each contained four different sweeteners.

Artificial colours

Colouring additives are banned from foods and drinks for children aged under thirty six months of age, but we found plenty of unnecessary colourings in everyday infant medicines. Perhaps the most contentious colourings are the azo dyes, which we found in products such as Calpol paracetamol, Anbesol teething gel and Buttercup Infant Cough syrup. We found only one product warning that, "The colouring in this product (E124) may cause allergic reactions, including asthma."

There is an increasingly wide range of natural colourings which food and drink manufacturers can turn to, rather than using these synthetic and questionable azo dyes. If Smarties can clean up their act - why can't these medicines?

Artificial sweeteners

Sweeteners are banned from foods and drinks for children aged under 36 months, but almost every infant medicine we looked at contained artificial sweeteners, often as one of the major ingredients. Like azo dyes, sweeteners are controversial additives which some parents might wish to avoid.

Medicines for children as young as two or three months contain a range of preservatives, sweeteners and colourings. These additives are prohibited from foods and drinks designed for children up to 36 months old, but are routinely added to their medicine.

The sweeteners sorbitol, maltitol and xylitol can have a laxative effect at high doses and some medicines warned of this e.g. "This product contains maltitol liquid which may have a mild laxative effect".

Preservatives

We found a wide range of preservatives in infant medicines which are not allowed in foods and drinks for children aged under 36 months. Benzoate preservatives (E210 through to E219) were the most common. Many medicines warned in the small print that such preservatives could have unpleasant side effects e.g., "... contains sodium benzoate, which may irritate the skin, eyes and mucosal surfaces, and methyl hydroxybenzoate, which may cause skin reactions such as contact dermatitis and more rarely wheezing."

Some, but not all products, also warned that reactions to benzoates can be delayed and thus harder to link to the consumption of the medicine e.g., "Methyl hydroxybenzoate may cause allergic reactions such as skin rash; this may occur after a few days."

We also found sulphite preservatives in one product, which did at least warn (in the small print) that, "Sulphites may rarely cause hypersensitivity reactions and bronchospasms (contraction of the airways)."

Although banned from foodstuffs for those under three years old, sulphites are very widely used across all processed foods and drinks (including alcohol) but it is rare to find any warning of the possible side effects caused by their consumption.



sugar?

Artificial flavours

Many of the children's medicines we looked at contained flavourings, which in themselves are additives. There is no specific legislation regarding the use of flavourings in food for the under threes, and the issue was last addressed in 1992 when the Food Advisory Committee advised the Ministry of Agriculture, Fisheries and Food that only natural flavourings should be used in foods for young infants. Thus natural vanilla should be used rather than synthetic vanillin, and orange oil used instead of orange flavouring. Foods and drinks aimed at young children tend to stick to this guidance, but clearly some medicine manufacturers think it is okay for babies to be exposed to artificial flavourings.

In our table, we have indicated which medicines contain flavourings, but with only very limited information it is often impossible to differentiate between a natural plant extract or more cryptic flavourings such as Custard 570514E, Raspberry 500251E and Blackberry 50225E.

Chloroform

We found chloroform on the list of ingredients in Meltus Dry Coughs syrup. It is not included as an 'active' ingredient but rather as an 'inactive' ingredient, so one has to wonder what it is doing there. The Chloroform in Food Regulations of

1980 make it an offence to sell or import food containing added chloroform, but here it is in a child's cough medicine.



Additives and hyperactivity

In government-sponsored tests, parents reported significant changes in behaviour when young children were given a dose of azo dyes combined with the preservative sodium benzoate (E211). The research has since been questioned by the Food Standards Agency, who have commissioned a similar, ongoing study. Research by the Hyperactive Children's Support Group suggested that 89% of children diagnosed with attention deficit hyperactivity disorder (ADHD) showed an improvement in symptoms when artificial colours were removed from their diet.

Sally Bunday, of The Hyperactive Children's Support Group, told us, "The Support Group

has for 30 years been concerned about the additive content of medicines and some nutritional supplements for infants and young children. It would appear that the situation has not really changed. Parents who contact the HACSG are disappointed to find so few suitable products for their children."

You can contact HACSG at Dept W, The Hyperactive Children's Support Group, 71 Whyke Lane, Chichester, West Sussex PO19 7PD (do enclose a stamped addressed envelope to facilitate their reply) or email hacsg@hacsg.org.uk Website: www.hacsg.org.uk

Regulation

In the UK, the regulation of medical products is the responsibility of the Medicines and Healthcare products Regulatory Agency (MHRA). We asked the MHRA why the additives found in our survey are permitted in medicines for babies and young children when they are specifically banned in foods and drinks for infants under 36 months old. We also inquired why pharmaceutical companies use artificial flavours rather than natural flavours and inquired as to the MHRA's position on the use of chloroform in children's cough medicine.

The MHRA failed to respond fully to our questions, but stated that, "In accordance with European Legislation, the Medicines and Healthcare products Regulatory Agency permits the use of additives, including colorants, such as those with E- numbers, which have been approved for use in foods and in pharmaceuticals."

The MHRA also told us that, "The function and usefulness of all additives in medicines must be justified by the manufacturer before they can get a licence to market the particular medicine. The evaluation takes into account the quantity of additives, the frequency with which the medicine will be used and the medical condition to be treated. Most medicines cannot be manufactured, stored and administered without some additional

formulation ingredients. Unnecessary additives are discouraged and the manufacturer may be required to re-formulate the medicine before it can be approved."

Additives can be reduced

Contrary to the MHRA statement that, "... unnecessary additives are discouraged," our survey shows that artificial additives are widely used when there is no technological requirement for them to be there at all.

For instance, it is quite possible to flavour medicines with natural oils or extracts, and natural colourings such as beetroot and beta-carotene can be used instead of azo dyes. If parents were advised to give these medicinal products at mealtimes the manufacturers could also add a little sugar to sweeten their products, rather than relying on artificial sweeteners.

Preservatives are used to increase shelf life, as well as prevent any risk of the product becoming dangerous to health. But let us not forget that none of the preservatives which we list in the table would be permitted in foodstuffs for the under threes. Preservatives are highly active chemical compounds, designed to kill living organisms. As such the use of preservatives needs to be tightly controlled. Providing medicines in sealed sterile sachet format, or advising refrigeration after opening a product, would help to negate the need to use preservatives. We noted that some medicines found in the survey contain no preservatives at all, whilst similar products contain two or three.

This coughs and cold syrup for children aged two or older is made by William Ransom & Son Plc. Their website explains their mission statement 'to become the UK's leading natural product based consumer healthcare business.' This product contains such 'natural' ingredients as azo dyes E110 and E122, preservatives E217 and E219, and sweetener E954. The packet warns that E110, E122, E217 and E219 may cause allergic reactions (possibly delayed).

Continued on page 14

What needs to be done?

Giving one's baby or young child a medicine that contains artificial additives, which are banned from the food they eat, can cause concern to a parent. But with little or no medical alternative and a baby in pain and discomfort, parents are frequently left with no choice.

It is time for the pharmaceutical industry to clean up its act and stop using questionable additives in their products, particularly those aimed at growing, developing infants. Legislation clearly prohibits the use of most additives in foods and drinks for the under threes. We urge the MHRA to take steps to ensure that in future, all medicines aimed at babies and young children are free of such additives.



Charles Hendry MP has told us he intends to take up the issue of additives in children's medicines with the Secretary of State for Health, Patricia Hewitt MP and intends to table a question regarding the unnecessary use of additives in medicines.

If you want to write to the MHRA about the use of additives in medicines, please write to The Information Centre, MHRA, 10-2 Market Towers, 1 Nine Elms Lane, London, SW8 5NQ or email info@mhra.gsi.gov.uk

Additives in medicines for children under three years old

Medicine	Colours (azo dyes)	Preservatives	Sweeteners	Flavourings
Anbesol teething gel	E124		E954	no
Beechams Veno's for kids chesty cough syrup 2 +			E420, E952, E954	yes
Benadryl Allergy oral solution 2yrs+		E216, E218	E420, E954	yes
Benylin children's tickly coughs 3 mths+		E211	E965	yes
Benylin children's coughs and colds (1-12 years)		E211, E218	E954, E965	yes
Benylin children's Chesty coughs (1-12)		E211	E420, E954	yes
Benylin children's Dry coughs (1-12)		E211	E950, E965	yes
Benylin children's night coughs (1-12)		E211	E420, E954	no
Boots Dry Cough Syrup 1yr+		E211	E950, E965	yes
Boots Night Time Cough Syrup 1yr+			E950, E965	yes
Boots Pain Relief 3mths+		E218	E420, E950	yes
Boots Paracetamol 3mths+		E217, E219	E950, E954, E965	yes
Bonjela teething gel			E952	yes
Buttercup Infant cough syrup 2yrs +	E110, E122	E217, E219	E954	no
Calgel Teething Gel 3mths +			E420, E954, E967	yes
Calpol Paracetamol 2mths+	E122	E214, E216, E218	E420, E965	yes
Calprofen Ibuprofen 6mths+		E216, E218	E954, E965	yes
Cuprofen for children (Ibuprofen) 6mths+		E211, E216, E218	E420, E954, E965	yes
Dentinox teething gel			E420, E954, E967	yes
Disprol Paracetamol Suspension 3mths+		E216, E218	E954	yes
Infacol colic treatment, from birth		E216, E218	E954	yes
Medinol Under 6 paracetamol 3mths +		E216, E218	E952, E954	yes
Medised pain and fever relief 3mths+		E210, E214, E216, E218	E420, E952, E954, E965	yes
Meltus Chesty Coughs 1yr+			E420, E952, E954	yes
Meltus Cough linctus 3mths+		E216, E218	E420, E954	yes
Meltus Dry Coughs 2yrs +		E216, E218	E420, E952, E954	yes
Morrisons Junior Paracetamol 3mths +			E420, E950, E954, E965	yes
Nurofen (for children) 3mths +			E954, E965	yes
Piriton allergy syrup 1yr+		yes (no E number)		yes
Sudafed Children's Syrup 2yrs+	E124	E211, E218		yes
Superdrug Children's Chesty Cough Syrup 1yr+	E123	E214, E216, E218		no
Superdrug Children's Dry Cough Syrup 1yr+				yes
Superdrug Junior Ibuprofene Suspension 6mths +		E211, E217, E219	E954, E965	yes
Superdrug Junior Paracetamol Suspension 3mths +		E217, E219	E420, E950, E954, E965	yes
Tesco Children's Ibuprofen 6mths +		E216, E218	E954, E965	yes
Tixylix Baby Syrup 3mths +		E211	E965	yes
Tixylix Cough & Cold 1yr+		E211	E420, E950, E954	yes
Tixylix chesty cough syrup 1yr +		E211	E420, E950, E954	yes
Tixylix Dry Cough syrup 1yr +		E211	E950, E965	yes
Tixylix Night Cough syrup 1yr+		E211, E221, E223	E950, E954, E965	yes
Unichem Junior Ibuprofen Suspension 6mths +		E211, E217, E219	E954	yes

Data based on products purchased in February 2007. More information at www.foodcomm.org.uk/latest_medicines_Mar07.htm

5 a day the seaweed way



Dr Duika Burges-Watson's recently designed 'seaweed tour' of Ireland hopes to remind us all that seaweeds and Westerners have a long history as tablemates. She finds signs that old traditions are being revitalised.

S seaweed, like spinach for toddlers, is one of those healthy foods that can rival castor oil for its ability to send a shiver down the spine! However, things could be changing; *Observer Food Monthly's* recent 'A to Z of tastes to come' claimed, the future may well include delicacies like hot langoustine jelly (made with seaweed extracts) served with chervil cream, and that seaweed is recognised as a source of umami, increasingly referred to as the fifth taste sensation along with bitter, salty, sweet and sour. The popularity of nori (seaweed) wrapped sushi amongst trendy, urban populations is now established. But, it is important to note that, in these examples, seaweed is being recommended for its functional properties or for its novelty value as a food from elsewhere; not as a food from here. The British and the Irish do consume vast seaweed resources, but largely as a food additives or as fertiliser.

The wonderful thing about creating a 'seaweed tour' is that it has been great to find evidence of a thriving seaweed food culture right on our doorstep. A recent visit included stops at spa centers, brew-pubs, seaweed farms, festivals and restaurants. Dulse (also known as dilisk/creathnach) is one of several varieties of seaweed most commonly consumed in Ireland. In the north of Ireland, dulse is very popular dried as a salty snack to have with beer, or cooked in a variety of ways. Dulse features as a star attraction of the annual 'Ould Lammas Fair' in Ballycastle each August. Others include laver, also wonderfully known as Black butter or slouk and carragheen also called Irish or Dorset Moss.

My co-traveller on the tour was Prannie Rhattigan, a General Practitioner from Sligo, who grew up using seaweeds for many purposes, including food. She is author of a cookery book, *Cooking up a storm with*

seaweeds from Irish Shores that will be published in autumn 2007, with recipes such as baked lemon carragheen cheesecake, sea spaghetti and carrot salad and gingerbread with Nori.

In County Cork, we spent part of our tour visiting members of the Roaring Bay Seaweed Co-operative near Skibbereen, in a dramatically rugged bay overlooked by Jeremy Irons' giant, peach-pink castle of a home. Last year, the Co-operative had their first successful and bountiful harvest of *Alaria* seaweed, known in Japan as *ainu-wakame* and used more or less interchangeably like the better known *wakame* seaweed (it just requires more cooking). In the wild *Alaria* does not grow in dense populations and, in the countries where it is regarded as food, it is generally harvested in small quantities.



Although Roaring Bay has demonstrated that the farming of *alaria* can be done successfully, they are still to develop a local market for it as food.

But this should not be a problem according to Rhattigan, "It is one of my favorite species – a fabulous seaweed because it is versatile, delicious and packed full of healthy goodies that rival those of land-based plants." She has a rich store of recipes for *alaria* and it is always one of the species collected (when in season) and cooked by participants in her increasingly popular wild-food gathering 'cooking with seaweed' courses usually held at The Organic Centre in County Leitrim.

Organic certification is achievable but only for seaweed farms, otherwise seaweed is regarded as wild harvested. At Roaring Bay seaweed spores are attached to lines of coiled rope and placed in a tank, in what is known as the hatchery. When ready, these seeded lines are then unwound and transferred for growth out into the sea.

Prannie Rhattigan has contributed information on a variety of Irish seaweeds that have a history of food use such as 'carrageen moss' and 'dulse' to the Slow Food Arc – a kind of biodiversity register of local, significant and sometimes forgotten foods. It is her hope that in her role as Slow Food Ireland Presidium Co-ordinator some Irish seaweeds will become *Presidia* items in the very near future.

If seaweed is to have a future, in the West, as a foodstuff, it will require not just the development of the resource itself, but a change in cultural attitudes about where it is from. Ireland may be the key to 're-locating' and developing seaweed as a truly Western and valued product.

Gus Heath, the proprietor of Dolphin Sea Vegetables in Belfast, has been working on a project with the Centre for Marine Resources and Mariculture (C-Mar) at Queens University to develop the aquaculture of Strangford Loch. He says the local market, "will take whatever I can produce." The recent announcement that C-Mar has been funded to establish a seaweed hatchery is an important first step, building on a long history of its use as a food in Ireland. That history of acceptance may contribute to the development of an industry in mainland UK.

The moral panic over childhood obesity will not work



Dr Wendy Wills, a Registered Public Health Nutritionist, thinks recent guidelines for tackling obesity are letting down young people.

No reader of *The Food Magazine* can fail to have noticed the increasing attention that government and the media are giving to the rise in childhood obesity in the UK. Sixteen percent of boys and girls aged 2 to 10 are obese according to Health Survey for England data and one in four 11 to 15 year olds. These rates have risen considerably since 1995, especially for older children, where a rise of 10% was seen by 2004.

Does this rise matter? Well, not all obese children are ill or at risk of becoming ill. Nor do all obese children suffer bullying and low self-esteem. Furthermore, not all obese children will become obese adults, which is when health problems can really kick in. All children and young people, do, however, have the right to help make informed decisions about their own health and health care needs (even if adults do not like the decisions that children and young people subsequently make), regardless of their weight.

Obesity is commonly determined using body mass index (BMI) thresholds. For adults, a BMI of 30+ classifies them as obese. This threshold is based on the increased risk to health of being too heavy, in relation to height. In children, the immediate health risks associated with obesity are unknown.

The National Institute for Health and Clinical Excellence (NICE) recently published its clinical guidance for the prevention, identification, assessment and management of obesity in adults and children (NICE, 2006). NICE advises that children with a BMI at or above 91% of the known distribution of weights/height for their age and sex should be considered for treatment for obesity.

Using national growth charts is useful for the monitoring of children's growth, for public health surveillance purposes, for example. BMI thresholds determined by growth charts are not, however, useful for determining which children or

young people under the age of 18 are at risk of poorer health.

Some obese children are in poor health. Some obese children will go on to be obese adults and may have poorer health outcomes when older. The current urgency to 'solve' childhood obesity risks identifying all obese children as being in need of treatment and the new NICE guidelines do little to counter this. They add further fuel to the fire which has led to the current moral panic – that there is an urgent need to save all our children from their fat bodies. This is an irrational approach that is, at best, unhelpful and at worst, hugely damaging to children's self-esteem.

Socio-economic factors and ethnicity are likely to influence rates of obesity and these are barely mentioned in the NICE guidance. Obesity is narrowly defined by NICE as a medical condition when in fact social definitions of obesity have more salience with the general public. Health in adulthood is not something that most young people worry about. Most young people do not feel ill because their BMI defines them as obese. They do, however, base their perceptions about their current well-being on how they look and they compare themselves with their peers to determine if they are, amongst other things, 'too fat'. Many obese young teenagers and their parents do not perceive that their bodies are overweight or obese. What is more, many overweight teenagers like their bodies and like the way they look. Teenagers of all shapes and sizes report more worries about becoming too thin; excessive or obsessive dieting and 'going anorexic' than they do about becoming obese.

Parents and carers are advised by NICE to create a sociable atmosphere for mealtimes with children, which, they recommend, should include all the family. There is very little evidence that eating together prevents obesity or weight gain and many families find it impossible to eat together. Some do not have a table to eat at, others have a myriad of work and leisure schedules to account for – a particular issue when children are different ages, when extended family members are resident and when one or both parents work, especially shift work. In some families with teenagers, creating a sociable eating atmosphere is likely to be a pretty low priority compared with getting 'fussy' children to eat at all, especially when compared with the perceived risks associated with teenage drinking, smoking and sexual activity.



"No Ice Cream until you've eaten your Broccoli!"

Idhood

There is just one, very basic, paragraph in the NICE patient's booklet about feeding children, with advice such as, "...avoid sweets and sugary drinks." How are parents expected to do this on behalf of their children? Without practical advice about what to replace sweets and sugary drinks with, this advice is totally meaningless and ineffective for families where processed foods and drinks are the norm.

And why aren't older children addressed directly in this booklet? Children over the age of 12 are considered by NICE to be old enough to take some responsibility for their food choices and weight, so why are there no specific guidelines available for this group?

It is easy to stigmatise children and young people about their weight at a time when, often, they have issues about puberty, body image and self esteem. Without a considered approach, a GP or nurse is likely to do more harm than good when asking a teenage patient if they wish to be weighed and measured. The guidelines assert that health professionals must use their clinical judgement when assessing when to raise the issue of weight, if this is not the reason the person has requested to see their GP or practice nurse. As children get older and become less likely to suffer from 'childhood' ailments they are also less likely to visit their GP. Therefore is obesity likely to be picked up by a routine visit anyway?

The guide suggests parents persuade older children to see their GP to set goals for weight management with him or her. This worries me – it is highly likely that goals set in this context will be adult, not child, driven, and only the most articulate and confident child or teenager is likely to discuss and negotiate their needs to avoid leaving the surgery demoralised and feeling they are responsible for everything they eat. They aren't – the food industry currently promotes high fat, salt and sugar foods at them and there are many social and economic factors prevailing against them taking control of what they eat.

Bariatric surgery (e.g. stomach stapling) is only recommended by NICE for young people who have additional complications because of their obesity and who have reached, or are about to reach, puberty. There are, no doubt, teenagers whose lives are in danger if they do not lose weight. However, it would be morally wrong for surgery to become the norm for treating morbidly obese teens – once the diets have failed and

parents and GPs are at a loss as to what to do. Such drastic action fails young people and puts them on a medicalised health trajectory that they are unlikely to reverse as they get older. Eating after bariatric surgery is far from a normalised, sociable experience – is that what we want for young people who should be beginning to explore the world outside their family environment, trying new foods and having new experiences?

The NICE guidelines are intended as a 'first step' and do not claim to offer all the solutions. Whether 'second steps', i.e. appropriate and targeted guidance and support for families and young people within primary and community care settings, are actually in place remains to be seen. The NICE guidance has, however, missed the mark on all counts in terms of actively promoting a healthy, enjoyable lifestyle for all

young people regardless of their weight or their social circumstances. And I doubt very much that young people themselves were consulted about what they consider to be effective prevention and treatment approaches to obesity.

Backett-Milburn, K., Wills, W. J., Gregory, S. and Lawton, J. (2006). Making sense of eating, weight and risk in the early teenage years: views and concerns of parents in poorer socio-economic circumstances. *Social Science & Medicine* 63(3): 624-635.

Wills, W. J., Backett-Milburn, K., Gregory, S. and Lawton, J. (2006). Young teenagers' perceptions of their own and others' bodies: A qualitative study of obese, overweight and 'normal' weight young people in Scotland. *Social Science & Medicine* 62(2): 396-406.

9pm watershed for junk food ads?

Pressure is mounting on the government to introduce a 9pm watershed for junk food adverts.

The campaign is gathering momentum following Ofcom's announcement of their weak final proposals to restrict food adverts aimed at children.

Ofcom have ruled that adverts will be restricted in programmes where children aged under 16 form a disproportionately high part of the audience. They have further watered down these already-weak proposals by introducing a long lead-in period before the rules come into full effect.

Research by *Which?* underlined just how inadequate these new rules will be. They will not affect advertising during the top 26 programmes most watched by children. Neither will they cover the times that most children are watching television.

The Ofcom proposals will stop significantly less than half of children's exposure to junk food adverts. Given the scale of the problems with children's diets, this response is hardly adequate.

Ofcom's failure results from their efforts to try to balance the physical health of children against the economic health of broadcasters.

However, Ofcom have weakened under the pressure piled on by the Children's Food Campaign (CFC) and other organisations and accepted the Food Standard Agency's Nutrient

Profiling model as a way of defining which food should be advertised.

Given the inadequacy of Ofcom's response, the CFC has worked with Baroness Thornton to introduce the 'Advertising on Television of Food Bill' into Parliament. The Bill will stop advertising of junk food before 9pm and will also seek to restrict advertising of brands associated with junk food.

The Bill has already received the support of over 150 MPs, and a wide range of health, children's and consumer groups. It will be debated in Parliament Further in May 2007.

In November, Gordon Brown spoke of his support for a voluntary 9pm watershed for junk food adverts. Given it is widely expected he will become Prime Minister this year, the CFC remains confident that the momentum it has generated will change Government policy soon.



"Mummy, the telly isn't making me hungry any more"

Legal, decent, honest and true?

Food and drink companies have been keeping the Advertising Standards Authority (ASA) busy over the last few months, with several companies pushing their advertising claims too far.

X Redbush tea misleads mums

An advert for Rooibos (or Redbush) tea, appeared in *Pregnancy & birth* magazine and was headlined "Give your health a boost." Alongside an image of a mother bottle-feeding a baby, the advert made half a dozen claims and statements which the ASA considered misleading, irresponsible, dishonest or untrue.

The claims included statements that, "Rooibos tea has been helping soothe digestive disorders for years... Redbush has fantastic skin healing properties... (Redbush is) naturally infused with anti-inflammatory properties... (Redbush) can help overcome the symptoms of nausea and headaches commonly found from drinking coffee."

The advert also implied that adding Redbush tea to a baby's formula could treat colic and nausea and encouraged an irresponsible practice for suggesting to mothers that, "If bottle feeding your baby, add Redbush to the formula instead of water."

In its defence, The Redbush Tea Company blamed *Pregnancy & birth* magazine for producing the advert on their behalf, whilst the magazine said that such adverts were written from briefs supplied by clients

and that the final version was signed off by the client, who they relied on to check and hold substantiation for all claims made.

The tea company has promised that the ad will not appear again.

X Feeding kids meat is child abuse

Never ones to pull their punches, PETA (People for the Ethical Treatment of Animals) racked up a large number of complaints for a poster which showed a photograph of an overweight child eating a burger. The poster's text stated "Feeding kids meat is child abuse – FIGHT THE FAT – GO VEG".



Despite heavyweight protests from industry groups such as the National Farmers' Union and the International Meat Trade Association, as well as public complaints, the ASA ruled that the ad was legal, decent, honest and true. The principle complaint, that the ad could encourage parents to withdraw meat from their children's diet without replacing the

nutrients meat provided, was dismissed out-of-hand, as the advert clearly suggests going 'veg'

instead. As PETA pointed out, the fact that there are millions of healthy vegetarians is proof that the vegetarian diet provides all necessary nutrition.

Many of the public complainants also felt that the ad trivialised child abuse. Alongside ample evidence that meat consumption can increase the incidence of disease, PETA pointed out that the National Society for the Prevention of Cruelty to Children states that physical abuse includes giving children harmful substances such as drugs, alcohol or poison and that, if a parent or carer deliberately caused illness to a child, that was a form of physical abuse. They believed it was therefore rational that feeding a child a diet likely to provoke severe health effects was tantamount to abuse.

The ASA ruled that PETA was entitled to hold this opinion and, that whilst some viewers would find the text used in the ad inappropriate, the ad did not, in its context, trivialise child abuse.

X Pomegreat isn't so great

The ASA agreed with a complaint from a doctor that an advertising feature for Pomegreat pomegranate juice, headlined "HEALTHY HAPPY HEART" made illegal medicinal claims. The claims made in the advertising feature suggested that the product could improve heart health or reduce the hardening of arteries. The ASA ruled that the claims were medicinal and therefore unacceptable for a food product and illegal.

X Flora doesn't make vegetables 'healthier'

As we reported in *FM74*, The Food Commission asked the ASA to investigate a Unilever advertising campaign which showed two corn cobs, one of which had a knob of Flora on it. Text under the first cob stated "Healthy." Text under the second cob, which had the Flora on it, stated "Healthier." Text at the foot of the ad stated "It's true, not all fats are bad. Adding a knob of Flora to your food* really is healthier, because it's rich in heart healthy oils Omega 3 and 6 and low in bad saturated fats." Only in the smallprint did the advert state "As part of a healthy diet."

The ASA shared our opinion that the advertising was misleading, as it implied that adding additional fat to a plain vegetable was better for health than eating the vegetable on its own. So Unilever received a slight rap on the knuckles and was told not to repeat the approach, but only after the advertising campaign had already spread the misleading (but highly lucrative) message across the UK that adding Flora to vegetables is good for your health.

Whilst the ASA can be useful in highlighting the tricks that advertisers get up to, food and drink companies can happily run misleading ads in the knowledge that the ASA will take months to examine the evidence and issue an adjudication – giving them plenty of time to get their marketing message across.

X Dr Gillian McKeith PhD quack quack

Facing a humiliating and damning ASA draft adjudication that, "the claim 'Dr' was likely to mislead" the public, McKeith has voluntarily agreed not to call herself a "doctor" in her advertising any more. Her voluntary agreement means that no final adjudication will be made public, which is just as well for her, as *The Guardian* has revealed that her advert allegedly breached two clauses of the Committee of Advertising Practice code for "substantiation" and "truthfulness" – which are hardly the qualities one looks for in a 'doctor'. McKeith reckoned she could call herself "doctor" on the basis of a qualification gained by correspondence course from a non-accredited American college – the ASA clearly disagreed.

Gillian McKeith has become a multi-millionaire selling expensive nutritional supplements and 'eat yourself fitter' books based on pseudo-science and quackery. Doctor or not, she will doubtlessly continue to thrive thanks to the support of Channel Four and other media outlets who regard her as a sacred cash cow, churning out both cash and dubious 'scientific' advice in copious quantities.

For more on Gillian McKeith take a look at Ben Goldacre's Bad Science website at www.badscience.net, where he explains, amongst other things, how his own cat (deceased) managed to become a certified professional member of the American Association of Nutritional Consultants, just like McKeith, simply by paying \$60!

Encyclopedia of Junk Food and Fast Food

Andrew F. Smith, Greenwood Press, 2006, ISBN: 0-313-33527-3

This detailed reference source might more accurately be titled *Encyclopedia of American Junk Food and Fast Food*. Nevertheless, what happens in the US so often presages a global invasion that we in Britain would be wise to read it with careful attention rather than amused complacency. In fact, much of it may be like reading our own future through a time warp.

Although there is a lot of historical detail that older American readers will recognise, this is not merely a stroll down memory lane. There are dozens of detailed entries for old and new American brands, including the dates and circumstances of their origin. Their history reveals how many of them, especially the breakfast cereals, were invented as alternatives to the commercially depleted (or even poisoned) foods of the 19th century. They then became targets for takeovers by larger companies who gradually replaced the beneficial fibre with the more seductive sugar and salt. Smith documents each successive company buyout, so that the reader can observe the massive centralisation, ownership and control to which our food supply chain is increasingly subjugated.

Amongst the detailed histories of individual foods and manufacturers are concise overviews of fast food favourites. A four-page entry on hamburgers sweeps us from the dawn of human history to the

supersized double arch. With the invention of the meat grinder in the mid 19th century, they became popular with both producers and consumers: not only could they be cheaply produced from scraps and extended with vegetable fillers and adulterants (both deliberate and accidental), but they required little chewing: "...dentistry was in its infancy and many people lacked teeth." They were popularized late in the century by pushcart street vendors; the first printed reference is in the Los Angeles Times in 1894.

From the beginning, hamburgers were regarded as unhealthy; with *The Jungle*, Upton Sinclair's novel on the Chicago meatpacking industry, journalistic muckraking became literal as well as figurative. Smith also reveals that the Wimpy, one of Britain's contributions to anti-gastronomy, was actually launched in America in 1934 by Wimpy Grills, the first US fast food corporation to expand abroad.

There is a long bibliography, together with a resource guide to audiovisual sources, websites and organisations. Each entry ends with suggested further reading. In addition to the usual alphabetical index at the end, there is a list of entries at the front, so that the



reader can get a quick idea of the subject matter. Even more useful is a list of entries by topic, which comes as close as you can get in hard copy to a computer search facility.

This book is full of facts rather than exhortations – it is written with the voice of a historian, not a campaigner – but it is no less impassioned in its intrinsic message. Smith's researches have led him to the same conclusion as another conscientious scholar, George Santayana: Those who cannot remember the past are condemned to repeat it.

Alas, this important reference source would have reached an even higher standard if the author had been given editorial control over the final product. The publisher's typographical layout of headings and subheadings is confusing. Incredibly, the author was not sent the final edited text before the first run was printed. As a result, the book is full of misspellings and grammatical errors – a defect not typical of the author's many previous books.

Nevertheless, this reference work is full of hard-to-get historical information about our increasingly commercialised diet. Andy Smith may not have cleansed the Augean stables, but he has done an excellent job of cataloguing the ordure.

John Whiting

West Country Cheesemakers Michael Raffael, Birlinn, 2006, 217pp, hardback.

and **British Regional Food** Mark Hix and Jason Lowe, Quadrille, 2006, 240pp, hardback. Both £25.00.

The recent publishing season has added some important arrows to the quiver of the literature of British food, not least these two books.

Michael Raffael opens the batting for a new regional presence in the publishing world: Birlinn. Hitherto, this publishing house has restricted its attentions to north of the border, but now extends its brief into the South West. Their book accords cheesemakers more gloss and sheen than they are wont to receive; you might think they were serious Frenchmen, of world repute, of historical renown. But, Cheddar apart, these are firms that barely existed a decade ago, that have instead taken lessons from their historical masters on the Continent and transplanted timeworn agricultural practices from southern Italy, central France and other climes, to start a new tradition here in Britain.

Presumably it is the low capital-intensity and light labour demands of cheesemaking that makes the craft a bell-wether of renaissance gastronomy. America, a country historically bereft of fine cheese, now boasts an after-dinner platter of almost world ranking; ditto Australia, and to a lesser extent New Zealand.

One cannot ignore the apparent disdain for tradition and agricultural heritage that is expressed by the production in Somerset of buffalo cheese produced from animals imported from Romania.

The cheeses Frances Wood produces include a semi-hard Cascaval; a matured unpasteurised Junas (a little like Manchego); Lambors, which is a brined cheese like Feta; and Kaimak, which is Turkish clotted cream. She lit upon this venture having watched Antonio Carluccio on television. Buffalo had, Raffael says, been tried in England in the Middle Ages. They failed. But nowadays technology (and climate change?) have ensured the success of the experiment. This may not be traditional as we know it, but it is entirely sustainable, and give it fifty years and we will be claiming it for our grandmothers'.

Raffael produces countless teasing examples of our flying in the face of tradition – grasping, if you will, tradition by the vitals – and doing thoroughly good work with pride and enthusiasm. If you add into his mix some fine photographs, a level of Sunday-supplement personal detail, and some useful technical information for those anxious to start making goat's cheese in their back garden, you have a worthy book.

Worthy is the word too for Mark Hix's survey of British regional food. This is more recipe-centred than Raffael's, but is still replete with useful details, handsome photographs, and thought-provoking argument. One of the problems of course is when is a food regional and when is it not? If you go to Sillfield Farm in Cumbria, you will find Peter Gott breeding a

wild boar and Tamworth cross for sale, no doubt, in London's Borough Market. There's nothing regional about this breed, it just happens Mr Gott lives in Cumbria and one thinks of the word 'regional' being deployed by writers much as the League of Gentlemen used so brilliantly the term 'local'.

But, cavils apart, this is a nice run-down of some of our truly regional and really traditional foodstuffs and modern interpretations of how they might best be cooked – with a tip of the hat, of course, to the original instructions.

One might ask whether this concentration on British cookery is going to yield dividends at the table. My feeling is that many dishes, such as tripe and cowheel, are more honoured by lip-service than stomach-feel. But it will have an effect on our shopping baskets (at least so I hope), even if we then rush home and cook southern Italian fare à la Jamie Oliver.

Tom Jaine, Prospect Books, www.prospectbooks.co.uk



Mum was always cooking...

"I mean, tinned soup, I would never hae it in the hoose unless it wis maybe Karen [daughter] comin' in an' I wis gaun away in a hurry...we were nae brought up like that, we wis brought up to get a' thing oot o' the groun' and intae a pot..."

This interview with a Scottish grandmother was conducted in the 1970s for a health study called *Mothers and Daughters* (Blaxter and Patterson, 1982). Her interview, along with 45 others, is archived at the Economic and Social Data Service (ESDS) Qualidata-UK Archive housed at the University of Essex. It is just one of around two hundred collections containing a rich store of historical information about food and meals.

The collection at Essex is unusual in that it contains an archive of qualitative research data, with interviews about people's life experiences. More usually, archiving has focused upon quantitative data, numbers and scientific information. Most of the studies at Essex date from the 1950s but there are some oral histories from the 1800s. The collection provides the opportunity for researchers to re-examine old studies in the belief that the past can enlighten the present.

One of the oldest studies is *The Edwardians* (Thompson, 1975), with 444 interviews with residents of Great Britain born between 1870 and 1908. These interviews were done in about 1970 when respondents were elderly and recalling their earlier years. Many questions were asked about what foods were eaten on what occasions, about special foods for holidays, cooking methods, home processing (i.e., jam making) and behaviour at meal times (i.e., who was served first). In contrast to the idea, prevalent today, that children choose their foods, choice was not common in Edwardian times. When asked if he got to choose what to eat, one interviewee replied, "If at teatime I wanted jam and there was no jam on the table, or something else to go on bread, fish paste or something, I had to eat what was there. I wasn't given in to because I fancied something else."

A third study, *100 Families*, has some similar questions to *The Edwardians*, permitting comparisons across time. These respondents were born in the middle of the 20th century.

The central group is a 'middle generation' of men and women aged 30 to 55 and married with children. Where possible, an older or younger member of the family was also interviewed. Interviewees were asked about who did the family cooking, whether the family did any baking or preserving, if they grew any fruit or vegetables, and who sat together at meals. More modern themes emerged in these interviews, as in the one below:

"I didn't like vegetables much as a child, so that was a problem area. Brought me into conflict with my mother quite a lot. I think the only green vegetables I would willingly eat was peas."

So what happened when these other vegetables appeared on your plate?

"Used to get shoved to one side and I might just pick away at it to show I'd had a go. But basically it used to get shelved and I wouldn't eat it."

You were allowed to do that?

"My mother would say it was good for me and I wouldn't get colds and you need green vegetables, and can't survive on peas. But she wouldn't actually force me to sit at the table until I'd eaten it all. She would let me get up."

There is also one very exciting recent acquisition, interviews about cooking and cooking skills done by Frances Short for her book *Kitchen Secrets* (Berg, 2006). There are diverse questions about cooking methods, influences of food magazines and TV shows, and detailed questions about the use of pre-prepared foods:



An urban shop selling fresh and packaged produce to the local area. Local shops such as this offered a one-to-one service with most goods such as sugar, tea and biscuits being weighed out and packaged by hand. This slower rate of service fitted in with the slower pace of life generally.

What about prepared and semi-prepared foods?

"It's funny because this same Grandmother... if she knew the extent to which we buy ready prepared foods...she'd be absolutely horrified because of the war-time mentality...of everything must be...cooked...[edits]...I cannot think how they [mother and mother-in-law] managed it... but then I think our lives are different because we have a much bigger social life and...we're more house proud...[now] we want to get our houses looking nice and...I always remember our house being the same for years and years...but my Mum was always cooking our food."

■ **More information about these studies and many others can be found at: www.esds.ac.uk/qualidata/**

Article by Libby Bishop, Manager of ESDS Qualidata.



Orange oil and apple juice concentrate

I recently bought some Organix FingerFoods for my 10 month old baby, as they appeared to be free from sugar, salt and flavouring additives. When I got home I looked at the ingredients and saw that the rice cakes contained orange oil, which I thought was a little strange as it is used in household products (amongst other things) to impart aroma. When I queried this with the company they told me the orange oil was purely used to give a natural orange flavour. I feel the labelling is misleading as the packet states this product has 'no added flavouring'.

S Stefanidis, London

Food labelling can be a tricky business, with different companies interpreting legislation and guidelines in different ways. This Organix product clearly states there is 'No Added Flavouring' as part of its 'No Junk Promise' – and yet, as the company freely admits, the orange oil is added to these rice cakes to impart flavour. The orange oil is organically sourced and many would prefer it to artificial flavouring compounds, but it is still a 'flavouring' with very little nutritional value of its own.



The Organix 'No Junk Promise' also claims there is 'No Added Sugar' in this product – but it contains 20% 'apple juice concentrate', which can be very high in sugar. Normal

apple juice contains just under 10% sugar, but once the juice is concentrated the sugar content can increase to 70% or higher. This fruit sugar is just as harmful as cane or beet sugar, but it sounds much healthier. These rice cakes contain 12.4% sugar, making them a 'high' sugar food based on Food Standards Agency guidelines. However, this still makes them a much healthier choice than similar products such as Farleys Rusks (29% sugar) and Hipp Organic Growing Up Biscuits (24.8% sugar).

Organix do tend to produce healthier products than many of their rivals, but it seems the claims of 'no added flavouring' and 'no added sugar' may not be as straight forward as they seem.

McDonald's bury GDA information under burger boxes

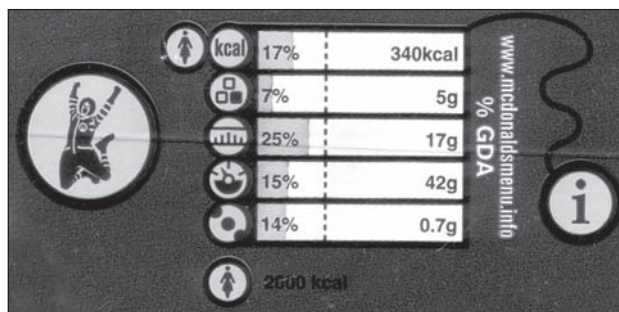
Having been a subscriber to your magazine for a number of years now, I consider myself fairly well informed on the subject of labelling.

However, on a recent trip to McDonald's (a treat for my 10 year old!) I was astounded to discover I had no idea how to interpret their information panel (shown right). I finally found the 'key' to it underneath the bottom of a burger box (not obvious at all).

I wonder what you make of it in your office?

Julie Harvey, London

The McDonald's Guideline Daily Amount (GDA) labelling shows how far some food companies will go to confuse the public with so-called nutritional guidance. By putting lots of logos, measurements and percentage figures on their packaging the company provides apparent reassurance to the consumer. It all looks very scientific but, as shown in this example, it is totally incomprehensible.



We welcome letters from our readers but we do sometimes have to shorten them so that we can include as many as possible (our apologies to the authors). Write to The Editor, *The Food Magazine*, 94 White Lion Street, London N1 9PF or email to letters@foodcomm.org.uk

Perhaps this is a deliberate attempt to confuse the consumer – making simple nutritional guidelines appear so complex that the bemused shopper simply gives up attempting to decipher them. Perhaps we should just accept our own ignorance and stop worrying about the fat content of our burger and fries.

Egg miles and extremists

If you're unable to buy your eggs from a local farm shop, how can you select eggs that have been produced locally? *Food Magazine* reader Roy Benford has been trying to find out, as we report here.

It should be easy to trace where an egg has come from, as each and every egg we buy is stamped with a special code which tells us how the egg was produced and where it's from. A typical code might look like this: 1UK5962. Based on the codes shown in the box below, we can tell that this would be a free range egg from the UK, from the producer or farm coded as 5962.

But how do we find out where farm 5962 is located? Roy wanted to find out, so he contacted the Department for Environment, Food and Rural Affairs (Defra). Defra has a regularly updated list of egg producers and their respective codes, but it refused to let Roy see the list as it considered the addresses of the egg producers to be covered by the Data Protection Act. Defra said, "...it was possible that disclosure of the list would, or would be likely to, endanger the health or safety of individuals" – implying that animal rights

extremists could use such a list to target farmers and producers.

Roy wasn't happy with Defra's response, reckoning that any extremists would be able to track down egg producers fairly easily using other publically available sources, so he took his case to the Information Commissioner's Office, arguing that Defra had a duty to respond to his request under the Freedom of Information Act. The Information Commissioner sympathised, but agreed with Defra that "...the real risk to the health and safety of those producers" outweighed the public's right to the information, under the terms of the Freedom of Information Act.

So we have a situation where egg producers using intensive, battery farming methods can conceal their location from the public, whilst consumers seeking to purchase locally produced eggs are unable to check where the eggs have actually come from. Defra did say that it could arrange for a list of producers' and packers' code numbers, and the county in which they were located, to be released to Roy, but they have failed to do this. We think Defra should make the list available on its website – so we can all see where our eggs come from.

The egg stamping code: 0 = Organic, 1 = Free Range, 2 = Barn, 3 = Caged, XX = Country of Origin, 123 = Producer/Farm ID

Is Special K encouraging us to skip fruit 'n' veg?

For the fourth year on the trot, Kellogg's is once again telling dieters that they can 'drop a jeans size' by following a simple diet plan based around eating Special K or Crunchy Nut.

With up to a quarter of British adults actively wanting to lose weight, Kellogg's has hit on a lucrative strategy which has turned Special K into a brand worth £118 million.

The diet plan is simplicity itself – you eat a bowl of Special K or Crunchy Nut for breakfast and again for lunch or dinner, along with a 'well-balanced' third meal each day. The cereal contains high levels of salt and sugar, but last time we looked it was definitely devoid of fruit and vegetables, so where, we

wonder, are those who follow Kellogg's diet plan supposed to get their recommended 'five a day'?

Kellogg's do tell us to eat a 'well-balanced' third meal each day, but how many of us honestly eat five portions of fruit and vegetables in a single meal?

In VERY small print on the Special K packet we eventually found the advice that dieters should 'make sure you eat plenty of fruit and vegetables' along with 'foods like Kellogg's cereals' but that is the limit of the advice that the packet gives regarding healthy consumption of fruit 'n' veg.

We think the company is undermining the clear guidance that we should all eat 'five a day' and encouraging a poor diet. The small print also warned that the Special K diet should only be followed for two weeks, but it is doubtful whether many people would notice or follow such advice. After all, if the diet works as well as it promises, many will be tempted to stick with it.

The Special K diet was apparently tested at a 'leading university' where Kellogg's tell us 75% of the test group significantly reduced their waist and hip measurements. We called Kellogg's PR company and asked if we could look at the test data – which to the best of our knowledge has never been published or subjected to peer review – and were told that the report is an 'internal' one which could not be released to us until we told Kellogg's what we intended to do with it. We told them of our concerns, and unsurprisingly, they didn't send us the report.

Kellogg's is happy to use the study results in public advertising, but the study itself remains hidden from the public. One has to wonder why.

Coke with half the sugar?

This 500ml bottle of Coca-Cola (the sort sold in corner shops and garages) contains 53g of sugar (ten and a half teaspoons) but a quick glance at the label tells us that this is 29% of our GDA, so that doesn't seem so bad.

However, a closer look reveals that Coca-Cola think that a 'serving' size is only 250ml, or half a bottle (the full bottle actually provides 58% of our GDA)

This is patently ridiculous. When we buy a 500ml bottle we drink a 500ml bottle, we don't throw half of it away, or keep it for another day so we can savour the taste of fizz-free cola.



Packaging goes bananas

How about this for overpackaging? Supermarket chain Morrisons has taken the humble banana, the fruit with its own built-in, compostable packaging, and wrapped it up in cardboard and plastic. Morrisons tell us the tray is "recyclable" but that's hardly the point. The supermarket got a rather poor "E" rating in the *Greening Supermarkets* report recently published by the National Consumer Council.



Beware the food police

Yes, here at *The Food Magazine* we care about what you eat, but we don't think that makes us the food police. Ready Brek's recent TV ad campaign showed futuristic robot food police invading people's homes to stamp out unhealthy eating, with the message that a bowl of their mush would pass muster. What's the point of saying you're selling a healthy product while at the same

time suggesting those who care about good food might invade your house if they suspect you might be scoffing a jelly bean?

