

Working Group 5 Update Paper

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Contents

1. Summary	1
2. Introduction	2
3. Progress	2
4. Discussion	3
Annex 1: Working Group 5 Terms of Reference (ToR) and Original Workplan	4
Annex 2: WG5 Interim Report	5
Annex 3: Priority Setting Exercise 15 Questions	5
Annex 4: Priority Research questions identified in the Research Priority Setting Exercise (WG5.2)	6

1. Summary

- 1.1 This paper outlines progress since the 7th Science Council open meeting (24 June 2020) against the work plan for Working Group 5 on food hypersensitivity as agreed by the Science Council in December 2019, as well as mitigations to manage delays due to COVID-19.
- 1.2 The Science Council is requested to comment on current progress and the future workplan for Working Group 5 on food hypersensitivity.

This includes:

- Work Package 5.1 and 5.3 - Research programme review and best practice review including case studies.
- Work Package 5.2 - Priority Setting Exercise
- Work Package 5.4 - Literature review of the Top 10 priority areas identified from the Priority Setting Exercise (PSE)

- Work Package 5.5 - Horizon Scanning.

2. Introduction

- 2.1 The Science Council agreed the Terms of Reference and workplan for the working group in December 2019 (Annex 1).
- 2.2 This paper outlines progress against the workplan as well as highlighting any further mitigations due to COVID-19.

3. Progress

- 3.1 Since the last update to the Council at the 7th Science Council open meeting in June 2020, progress against each work-package is as follows:

- **WG5.1 and 5.3** – Completed, a report (Annex 2) was presented to the FSA Board on 16 September.
- **WG5.2** – Completed, report pending. Analysis of the Priority Setting Exercise (PSE) survey was completed externally and a shortlist of 15 questions (Annex 3) were drawn up for prioritisation at the PSE workshop. A Priority Setting Exercise (PSE) workshop was held on 7 and 8 September, and a final list of 10 prioritised questions formulated (Annex 4). These will feed into both the external literature review (WG5.4) and the horizon scanning work (WG5.5).
- **WG5.4** – Tender call for an external desk study to assess the existing evidence base for the 10 prioritised questions (and highlight gaps in the evidence) was issued on 21 October 2020 (Annex 4). This review is expected to be completed end April 2021 with an interim assessment to be delivered end January 2021. Tenders were evaluated by FSA internal appraisers and external experts in November 2020.
- **WG5.5** – The horizon scanning workshop has been rescheduled to March 2021 (from 19 October, due to COVID-19). The workshop aims to identify potential future challenges in the provision of safe foods for consumers with food hypersensitivity, over the next 5-15 years. This will be a closed workshop, split over 2 days, including talks from experts and facilitated horizon scanning activities.

- The final report from the Working Group will be presented at the FSA Board in June 2021 (originally March 2021).
- Dr Paul Turner also gave a presentation on Food Hypersensitivity and an introduction to the Science Council's review, as part of the FSA's Food for Thought Seminar series. This was attended by over 70 people (primarily FSA staff), and a recording was shared with wider stakeholders including members of the Board.

3.2 The Actions that have been taken to mitigate the impact of COVID-19 on the working group are as follows:

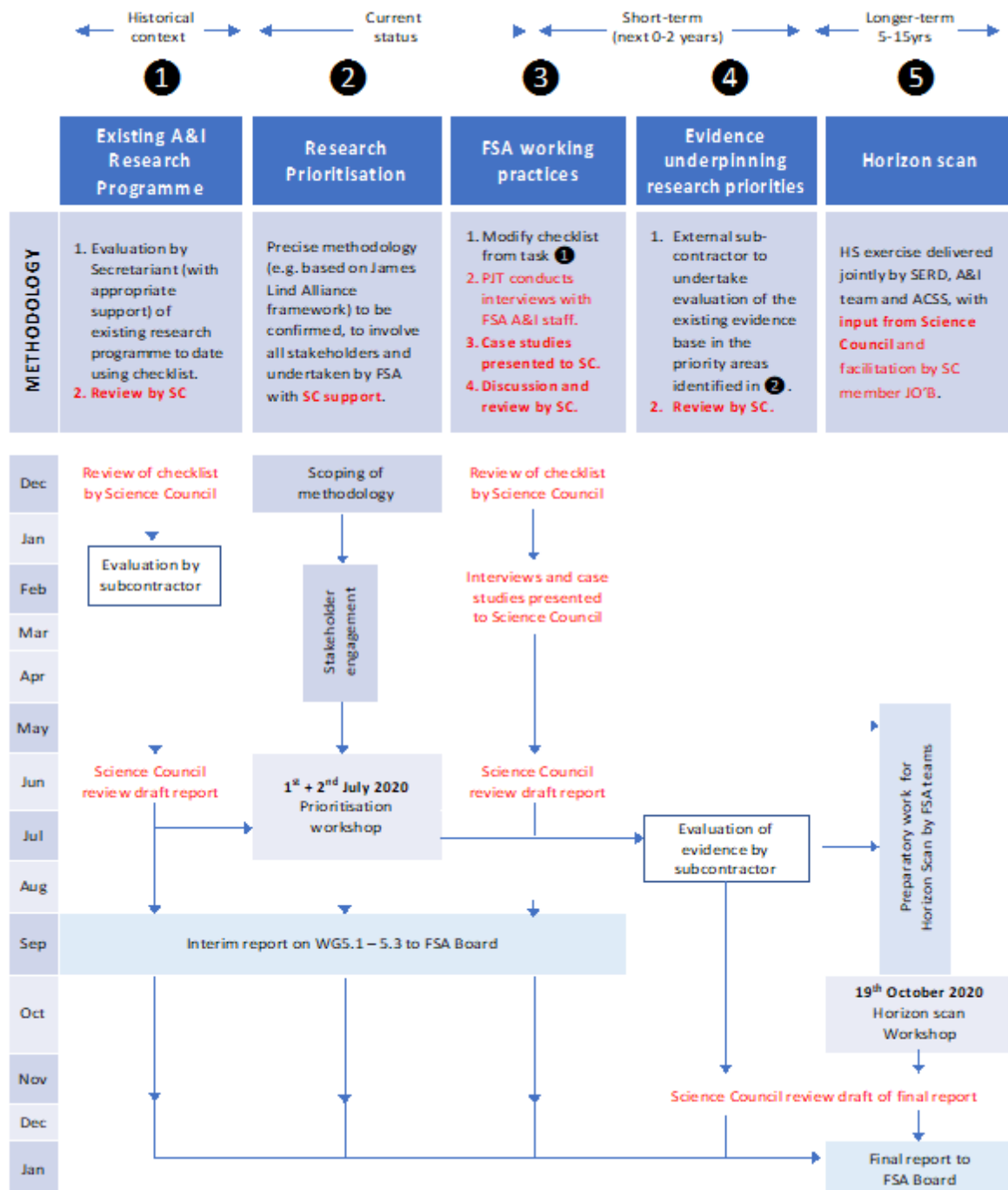
- WG5.1& WG5.3 – Work completed without significant changes.
- WG5.2 – Workshop held virtually in September (postponed from July) due to COVID.
- WG5.4 – Literature review delayed until WG5.2 completed.
- WG5.5 – A cross-stakeholder horizon scanning workshop set for 19th October has been postponed to March 2021 to take place virtually.
- Overall – Delivery of the interim report to the FSA board occurred as planned in September 2020. The final WG5 paper will be presented at June 2021 Board.

4. Discussion

Members may be interested to learn how the priorities identified in WG5.2 Research Priority Setting Exercise map to the FSA's areas of research interest. These are shown in Annex 4.

Annex 1: Working Group 5 Terms of Reference (ToR) and Original Workplan

See the Science Council website for WG5 [Terms of Reference](#).



NB: The horizon scan workshop has been postponed to March 2021 as a virtual workshop. The final report to the FSA Board is now planned for June 2021.

Annex 2: WG5 Interim Report

See [FSA 20-09-06](#) and [Annexes](#).

Annex 3: Priority Setting Exercise 15 Questions

- A. What are the risks posed to consumers with food hypersensitivity by ingredients "derived" from allergens, such as plant oils/fats, starches (other than those foods for which legal exemptions currently exist)?
- B. What risk is posed to people with food hypersensitivity by new/novel foods and/or processes (including packaging and other food contact materials)?
- C. How can food business owners improve traceability of allergens in the food supply chain?
- D. What are the best ways for consumers to be confident that the food they are provided with is safe with regard to food hypersensitivity?
- E. What is the best way to alert the Food Standards Agency as to incidents involving food hypersensitivity (and increase awareness of how to do this amongst the general public)?
- F. What are the best ways to communicate risk and appropriate mitigating actions to consumers and food business operators (including, but not limited to, online food business operators/street vendors / food banks)?
- G. What are the risks posed due to shared production (e.g. cooking) of foods to individuals with food hypersensitivity, and how can these be mitigated?
- H. What is the risk to latex-sensitive consumers from latex cross-contact (both via packaging and during food handling)?
- I. What do consumers want from allergen labelling, including Precautionary Allergen (e.g. "may contain") Labelling?
- J. What is the most effective way to alert consumers as to changes in ingredients?
- K. Are there economic benefits to providing for individuals with food hypersensitivity, which can be used to encourage food business operators to go beyond the letter-of-the-law?
- L. How do socio-economic factors impact on individuals with food hypersensitivity?
- M. What co-factors (other than exercise and sleep deprivation) increase the risk of a severe allergic reaction?
- N. What are the environmental exposures which increase the risk of developing food hypersensitivity?
- O. What is the current level of existing knowledge of food hypersensitivity in the general public (including consumers and food business operators), and how can this be improved?

Annex 4: Priority Research questions identified in the Research Priority Setting Exercise (WG5.2) with respect to Food Hypersensitivity (FHS), and how these map to the FSA’s areas of research interest (ARIs)

Indicative uncertainty	Research Question	Notes	Overlap with FHS ARIs
<p>Risks posed to people with FHS by new/novel foods and/or processes</p>	<p>In patients with FHS, what measures are needed to monitor for FHS reactions due to:</p> <ul style="list-style-type: none"> • new uses of known allergens? • novel proteins which might induce sensitisation and thus clinical reactivity? <p>What protocols should the FSA have when assessing the risk to consumers with FHS posed by novel foods/processes/packaging?</p> <p>What data exist as to the likelihood of allergenic proteins in biobased food contact materials migrating into foods?</p>	<p>e.g. the use of pea protein in protein concentrates, which is often declared only as “vegetable protein” in ingredients listing.</p> <p>e.g. wheat-based starch in packaging, or latex-based binders in packaging and sustainable cutlery. Does not refer to risk of occupational allergy due to biobased food contact materials.</p>	<p>What existing or new analytical methodologies can identify potential new food allergens and their characterisation from novel and GM foods for risk assessment and management and how can they be used?</p> <p>What is the allergen risk associated with biologically-based food contact materials?</p>
<p>Improving traceability of allergens in the food supply chain</p>	<p>How should allergen information be communicated to consumers with FHS, in order to:</p> <ul style="list-style-type: none"> • improve consumer confidence in terms of possible allergen content? • Reduce the incidence of unintended allergen exposure? 		<p>How can advanced approaches for food labelling be used to protect UK consumers with FHS?</p> <p>How can the FSA enhance the quality of life for consumers with FHS and help them manage the risks that come with it?</p>

<p>Risks posed due to shared production of foods, and how can these be mitigated</p>	<p>What are the health risks to consumers with FHS due to allergen cross-contact during food production?</p> <p>How effective are different control options in reducing these health risks?</p>	<p>e.g. shared production in small kitchens. Use of shared ovens (e.g. gluten-free foods cooked in the same oven as gluten-containing foods)</p> <p>e.g. different cleaning strategies</p>	<p>How can the FSA enhance the quality of life for consumers with FHS and help them manage the risks that come with it?</p> <p>What are the best allergen cleaning methods and how can their effectiveness to protect the allergy sufferers be validated?</p> <p>How can allergy threshold doses be defined most effectively and applied?</p>
<p>Communicating risk, so that consumers with FHS can be confident that the food they are provided is safe</p>	<p>What are the most effective ways for FBOs to communicate a level of competence (with respect to allergen risk management) to consumers?</p>		<p>How can advanced approaches for food labelling be used to protect UK consumers with FHS?</p> <p>How can the FSA enhance the quality of life for consumers with FHS and help them manage the risks that come with it?</p>
<p>Allergen labelling, including Precautionary Allergen (“may contain”) labels.</p>	<p>What forms of allergen labelling are effective in order for consumers to make informed decisions as to whether a food is “safe” for purchase/consumption?</p>	<p>Labelling to inform both what is present, what might be present (through cross-contact), and what is not present (whether or not a “free-from” claim is made).</p>	<p>How can advanced approaches for food labelling be used to protect UK consumers with FHS?</p> <p>How can the FSA enhance the quality of life for consumers with FHS and help them manage the risks that come with it?</p>

			<p>How can allergy threshold doses be defined most effectively and applied?</p> <p>What are the emerging allergens beyond the top 14 covered by current EU legislation?</p>
<p>Informing the FSA as to incidents involving food hypersensitivity.</p>	<p>What evidence is there for different reporting systems (e.g. mandatory hospital reporting, reporting by FBOs) to deliver useful data to regulators that can impact on reducing the risk of unintended allergen consumption?</p> <p>What are the barriers that prevent reporting of near misses and other incidents to official bodies?</p>	<p>Reporting systems might include:</p> <ul style="list-style-type: none"> • Mandatory/voluntary reporting by healthcare professionals. • Direct reporting by food businesses • Strategies to overcome fear of enforcement such as no-blame approaches to increase reporting • Direct reporting by members of the public (and how to mitigate against the risk of “noise” in the signal) • Surveillance of serious incidents e.g. coronial system 	
<p>Impact of co-factors on reaction severity</p>	<p>In consumers with FHS, what are the factors which can increase the risk of a severe reaction?</p> <p>How should risk posed by co-factors be communicated to those affected by FHS?</p>	<p>Incorporates both general advice to all FHS consumers, and individualised advice with respect to patient-specific co-factors.</p>	<p>How can the FSA enhance the quality of life for consumers with FHS and help them manage the risks that come with it?</p> <p>How can allergy threshold doses be defined most effectively and applied?</p>

<p>Impact of socioeconomic factors (including race/ethnicity) on FHS</p>	<p>What are the socioeconomic factors which impact on risk in consumers with FHS?</p> <p>How do cultural attitudes impact on the management of FHS?</p>	<p>Includes:</p> <ul style="list-style-type: none"> • understanding the impact of ethnicity/ race as a potential confounder • language difficulties in getting effective advice and communicating consumer needs • impact on affordability/accessibility/ availability to appropriate foods for those with FHS 	<p>How can the FSA enhance the quality of life for consumers with FHS and help them manage the risks that come with it?</p>
<p>Impact of environmental exposures on the risk of developing FHS</p>	<p>What are the factors that drive a loss of immune-tolerance to food allergens?</p>	<p>Applies to both adults and children A priority question once FSA better understands how common loss of prior tolerance is as a presenting symptom.</p>	<p>What are the mechanisms that affect the development of and tolerance to FHS?</p>
<p>Current knowledge of FHS amongst the general public</p>	<p>What are the current gaps/inaccuracies in knowledge with respect to FHS amongst the general public?</p>	<p>Focus on general public, but also applies to specific stakeholders e.g. FBOs, healthcare</p>	<p>How can the FSA enhance the quality of life for consumers with FHS and help them manage the risks that come with it?</p> <p>What are the statistics on food hypersensitivity prevalence (in the UK)?</p> <p>What are the emerging allergens beyond the top 14 covered by current EU legislation?</p>