

## **Reports on meetings of expert committees and study groups<sup>1</sup>**

### **Report by the Secretariat**

#### **EVALUATION OF CERTAIN FOOD ADDITIVES**

##### **Seventy-first Joint FAO/WHO Expert Committee on Food Additives Geneva, 16–24 June 2009<sup>2</sup>**

##### **Main recommendations**

1. The Expert Committee made recommendations on the safety of 13 food additives. Specifications were prepared or reviewed for several additional food additives. The report also contains general recommendations, in particular on the principles of exposure assessment for food additives when using food frequency questionnaires, and on guidance for the safety evaluation of enzymes produced by genetically modified microorganisms.
2. The Expert Committee evaluated several food additives, some of them for specifications only. Acceptable daily intakes or other safety advice were given for 12 food additives.
3. WHO has published summaries of the toxicological and related information upon which the safety assessments of the compounds were made,<sup>3</sup> and FAO has published summaries of the identity and purity of food additives and flavours.<sup>4</sup>

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<sup>1</sup> The Regulations for Expert Advisory Panels and Committees provide that the Director-General shall submit to the Executive Board a report of expert committees containing observations on the implications of the expert committee reports and recommendations on the follow-up action to be taken.

<sup>2</sup> WHO Technical Report Series, No. 956, 2010.

<sup>3</sup> WHO Food Additives Series No. 62, 2010.

<sup>4</sup> Food and Agriculture Organization of the United Nations. *Compendium of food additive specifications*. Joint FAO/WHO Expert Committee on Food Additives, 71st meeting, 2009. FAO JECFA Monograph 7, Rome, FAO, 2009.

## **Significance for public health policies**

4. The Expert Committee's work identifies and, if possible, quantifies the public health significance of food additives through a scientific risk assessment based on international consensus. Clear recommendations are given if a health concern is identified for action by national governments or through the FAO/WHO Food Standards Programme (i.e. Codex Alimentarius Commission and its subsidiary bodies).

5. Although all Member States face the problem of assessing potential risks of chemicals in food, only a few scientific institutions, on a national or regional basis, systematically assess all relevant toxicological and related data. Therefore it is important to provide Member States with valid information on both the general aspects of risk assessment and specific evaluations on food additives covered in this report. The Expert Committee's work in its complexity and in reaching an international consensus in the evaluation of these compounds is unique in its importance and impact on global public-health decisions related to food safety.

6. The Expert Committee's recommendations are used by the Codex Alimentarius Commission for setting international food standards. Such standards are established only for substances that have been evaluated by the Committee, thereby ensuring that food commodities in international trade meet strict safety standards.

7. The advice provided by the Expert Committee is also considered by Member States directly when setting national and/or regional food safety standards.

## **Implications for the Organization's programmes**

8. The evaluation of chemicals in food by the Expert Committee is a continuing activity. Three meetings of the Joint FAO/WHO Expert Committee on Food Additives, two on food additives and flavours and one on residues of veterinary drugs in food, were held in 2008–2009.

9. WHO is a partner in the Joint FAO/WHO Food Standards Programme, the principal organ of which is the Codex Alimentarius Commission. The Committee's work is crucial for the work of the Codex Alimentarius Commission. International standards and recommendations on food additives and contaminants in food developed by that Commission are based directly on the work of Joint FAO/WHO Expert Committee on Food Additives, taking into account other considerations as appropriate.

10. Regional offices and WHO Representatives also make use of the Expert Committee's evaluations when advising Member States on regulatory programmes for food safety.

## CONTROL OF THE LEISHMANIASES

### Report of the WHO Expert Committee on the Control of the Leishmaniases Geneva, 22–26 March 2010<sup>1</sup>

#### Main recommendations

11. In response to the request in the landmark resolution WHA60.13, adopted by the Health Assembly in 2007, the Expert Committee met to review and update the guidelines on the control of leishmaniasis issued in 1990.<sup>2</sup> The Committee recommended, as a first priority, the establishment of control programmes for leishmaniasis in affected areas, and strongly encouraged WHO to take the lead in empowering and supporting government programmes that were unable to control leishmaniasis adequately. Financial and technical support should be mobilized where necessary.
12. The Expert Committee also recognized the initiative and vital role of donors in the control of leishmaniasis, drawing attention to the continuing need for maintaining and expanding programmes.
13. The Expert Committee made recommendations on new therapeutic regimens for visceral and cutaneous leishmaniasis, the use of rapid diagnostic tests, the management of *Leishmania*–HIV coinfection, and consideration of social factors and climate change as risk factors for increased spread of the leishmaniasis.
14. Recommendations for research include the furtherance of epidemiological knowledge of the disease and clinical studies to redress the lack of evidence-based therapeutic regimens for cutaneous, mucocutaneous and post-kala-azar dermal leishmaniasis.

#### Significance for public health policies

15. This report not only provides clear guidance on implementation of prevention and control programmes but should also raise awareness about the global burden of leishmaniasis and the neglect of the disease. It puts forward directions for formulation of national control programmes and elaborates the strategic approaches in the fight against the leishmaniasis.
16. The Expert Committee's work reflects the latest scientific and other relevant developments in the field of leishmaniasis that may be considered by Member States in setting national programmes and making public-health decisions.
17. The most important conclusion is that adequate control of leishmaniasis worldwide is feasible with the medicines and diagnostic tools currently available. However, it was recognized that there is a crucial lack of funding, political commitment and national and international cooperation. The report should contribute to better resource mobilization, collaboration and coordination at all levels.

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<sup>1</sup> WHO Technical Report Series, 2010, No. 949.

<sup>2</sup> WHO Technical Report Series, 1990, No. 793.

### **Implications for the Organization's programmes**

18. The report enables the Secretariat to take a leading role in providing updated technical assistance for the initiation, maintenance and expansion of leishmaniasis control programmes.

19. It also provides strong encouragement to the Secretariat to establish effective regional and national control programmes in affected areas, where they are most urgently needed.

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