EFSA Panel on Dietetic Products, Nutrition and Allergies (NDA); Scientific Opinion on the substantiation of health claims related to arabinoxylan produced from wheat endosperm and reduction of post-prandial glycaemic responses (ID 830) pursuant to Article 13(1) of Regulation (EC) No 1924/2006

Following a request from the European Commission, the Panel on Dietetic Products, Nutrition and Allergies was asked to provide a scientific opinion on a list of health claims pursuant to Article 13 of Regulation (EC) No 1924/2006. This opinion addresses the scientific substantiation of a health claim in relation to arabinoxylan produced from wheat endosperm and reduction of post-prandial glycaemic responses. The scientific substantiation is based on the information provided by the Member States in the consolidated list of Article 13 health claims and references that EFSA has received from Member States or directly from stakeholders. The food constituent that is the subject of the health claim is “wheat grain fibre”. From the references and information provided, the Panel assumes that the food constituent that is responsible for the claimed effect is arabinoxylan from wheat endosperm. The Panel considers that arabinoxylan produced from wheat endosperm is sufficiently characterised in relation to the claimed effect. The claimed effect is “carbohydrate metabolism and insulin sensitivity”. The target population is assumed to be individuals who wish to reduce their post-prandial glycaemic responses. The Panel considers that the reduction of post-prandial glycaemic responses (as long as post-prandial insulinaemic responses are not disproportionally increased) may be a beneficial physiological effect. In weighing the evidence, the Panel took into account that one well-designed intervention study in healthy subjects showed a dose-response relationship between the intake of AX produced from wheat endosperm and reduction in post-prandial glycaemic and insulinaemic responses, that the results obtained in a longer term intervention study, which did not measure directly post-prandial glycaemic responses, were consistent with this finding, and that the mechanism by which AX produced from wheat endosperm could exert the claimed effect is well established. On the basis of the data presented, the Panel concludes that a cause and effect relationship has been established between the consumption of arabinoxylan produced from wheat endosperm and reduction of post-prandial glycaemic responses. The Panel considers that in order to obtain the claimed effect, 8 g of arabinoxylan-rich fibre produced from wheat endosperm (at least 60 % arabinoxylan by weight) per 100 g of available carbohydrates should be consumed. The target population is individuals who wish to reduce their post-prandial glycaemic responses.

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