EFSA Panel on Dietetic Products, Nutrition and Allergies (NDA); Scientific Opinion on the substantiation of health claims related to a combination of Propionibacterium freudenreichii SI 41 and Propionibacterium freudenreichii SI 26 and increasing numbers of gastro-intestinal microorganisms (ID 941, further assessment) pursuant to Article 13(1) of Regulation (EC) No 1924/2006.

EFSA-Q-2012-00132

EFSA Publication; Tetens, Inge

Link to article, DOI: 10.2903/j.efsa.2012.2721

Publication date: 2012

Document Version Publisher's PDF, also known as Version of record

Link back to DTU Orbit

Citation (APA): EFSA Publication (2012). EFSA Panel on Dietetic Products, Nutrition and Allergies (NDA); Scientific Opinion on the substantiation of health claims related to a combination of Propionibacterium freudenreichii SI 41 and Propionibacterium freudenreichii SI 26 and increasing numbers of gastro-intestinal microorganisms (ID 941, further assessment) pursuant to Article 13(1) of Regulation (EC) No 1924/2006.: EFSA-Q-2012-00132 . Parma, Italy: European Food Safety Authority. (The EFSA Journal; No. 2721, Vol. 10(6)). DOI: 10.2903/j.efsa.2012.2721
SCIENTIFIC OPINION

Scientific Opinion on the substantiation of health claims related to a combination of Propionibacterium freudenreichii SI 41 and Propionibacterium freudenreichii SI 26 and increasing numbers of gastro-intestinal microorganisms (ID 941, further assessment) pursuant to Article 13(1) of Regulation (EC) No 1924/2006

EFSA Panel on Dietetic Products, Nutrition and Allergies (NDA)

European Food Safety Authority (EFSA), Parma, Italy

ABSTRACT

Following a request from the European Commission, the Panel on Dietetic Products, Nutrition and Allergies was asked to provide a scientific opinion on a health claim pursuant to Article 13 of Regulation (EC) No 1924/2006 in the framework of further assessment related to a combination of Propionibacterium freudenreichii SI 41 and Propionibacterium freudenreichii SI 26 and increasing numbers of gastro-intestinal microorganisms. The food constituent that is the subject of the health claim, a combination of Propionibacterium freudenreichii SI 41 and Propionibacterium freudenreichii SI 26, is sufficiently characterised. The claimed effect proposed for further assessment is “beneficially affects the intestinal flora by increasing bifidobacteria”. The proposed target population is the general population. The evidence provided does not establish that the proposed claimed effect, increasing numbers of gastro-intestinal microorganisms, is a beneficial physiological effect. The Panel concludes that a cause and effect relationship has not been established between the consumption of a combination of Propionibacterium freudenreichii SI 41 and Propionibacterium freudenreichii SI 26 and a beneficial physiological effect related to increasing numbers of gastro-intestinal microorganisms.

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KEY WORDS

Propionibacterium freudenreichii, SI 41, SI 26, gastro-intestinal, microorganisms, health claims.

1 On request from the European Commission, Question No EFSA-Q-2012-00132, adopted on 26 April 2012.
2 Panel members: Carlo Agostoni, Jean-Louis Bresson, Susan Fairweather-Tait, Albert Flynn, Ines Golly, Hannu Korhonen, Pagona Lagiou, Martinus Löwik, Rosangela Marchelli, Ambroise Martin, Bevan Moseley, Monika Neuhäuser-Berthold, Hildegard Przyrembel, Seppo Salminen, Yolanda Sanz, Sean (J.J.) Strain, Stephan Strobel, Inge Tetens, Daniel Tomé, Hendrik van Loveren and Hans Verhagen. Correspondence: nda@efsa.europa.eu
3 Acknowledgement: The Panel wishes to thank the members of the Working Group on Claims for the preparatory work on this scientific opinion: Carlo Agostoni, Jean-Louis Bresson, Susan Fairweather-Tait, Albert Flynn, Ines Golly, Marina Heinonen, Hannu Korhonen, Martinus Löwik, Ambroise Martin, Hildegard Przyrembel, Seppo Salminen, Yolanda Sanz, Sean (J.J.) Strain, Inge Tetens, Hendrik van Loveren and Hans Verhagen.

A combination of *P. freudenreichii* SI 41 and *P. freudenreichii* SI 26 and increasing numbers of gastro-intestinal microorganisms (further assessment)

**SUMMARY**

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. The Commission has agreed with EU Member States that a certain number of Article 13 health claims would be eligible for further assessment by EFSA in order to be able to take a final decision on whether or not to include these claims in the list of permitted health claims. This opinion addresses the scientific substantiation of health claims in relation to a combination of *Propionibacterium freudenreichii* SI 41 and *Propionibacterium freudenreichii* SI 26 and increasing numbers of gastro-intestinal microorganisms. The scientific substantiation is based on the information provided by the competent Authority of Germany for further assessment of this claim.

The food constituent that is the subject of the health claim is a combination of *Propionibacterium freudenreichii* SI 41 and *Propionibacterium freudenreichii* SI 26. The Panel considers that the combination of *Propionibacterium freudenreichii* SI 41 and *Propionibacterium freudenreichii* SI 26 is sufficiently characterised.

The claimed effect, which is proposed for further assessment, is “beneficially affects the intestinal flora by increasing bifidobacteria”. The proposed target population is the general population. The Panel considers that the evidence provided does not establish that increasing numbers of gastro-intestinal microorganisms is a beneficial physiological effect.

On the basis of the data presented, the Panel concludes that a cause and effect relationship has not been established between the consumption of a combination of *Propionibacterium freudenreichii* SI 41 and *Propionibacterium freudenreichii* SI 26 and a beneficial physiological effect related to increasing numbers of gastro-intestinal microorganisms.
A combination of *P. freudenreichii* SI 41 and *P. freudenreichii* SI 26 and increasing numbers of gastro-intestinal microorganisms (further assessment)
A combination of *P. freudenreichii* SI 41 and *P. freudenreichii* SI 26 and increasing numbers of gastro-intestinal microorganisms (further assessment)

**BACKGROUND AS PROVIDED BY THE EUROPEAN COMMISSION**

See Appendix A

**TERMS OF REFERENCE AS PROVIDED BY THE EUROPEAN COMMISSION**

See Appendix A

**EFSA DISCLAIMER**

See Appendix B
INTRODUCTION

The Commission has agreed with EU Member States that a certain number of Article 13 health claims would be eligible for further assessment by EFSA in order to be able to take a final decision on whether or not to include these claims in the list of permitted health claims. These claims include already assessed claims related to microorganisms which the Panel considered to be not sufficiently characterised and claims for which the NDA Panel concluded that there was insufficient evidence to establish a cause and effect relationship between the consumption of the food and the claimed effect.

Following an opinion of the NDA Panel on a health claim pursuant to Article 13 of Regulation (EC) No 1924/2006 in which the Panel concluded that the data available were not sufficient to characterise Propionibacterium freudenreichii SI 41 and Propionibacterium freudenreichii SI 26 (EFSA Panel on Dietetic Products Nutrition and Allergies (NDA), 2009), EFSA received additional information from the competent Authority of Germany for further assessment of this claim. The information provided in the framework of further assessment for the health claims which are the subject of this opinion is tabulated in Appendix C.

ASSESSMENT

The approach used in the evaluation of Article 13(1) health claims is explained in the general guidance for stakeholders on the evaluation of Article 13.1, 13.5 and 14 health claims.

In assessing each specific food/health relationship that forms the basis of a health claim the NDA Panel considers the extent to which:

1. the food/constituent is defined and characterised;

2. the claimed effect is defined and is a beneficial physiological effect (“beneficial to human health”);

3. a cause and effect relationship is established between the consumption of the food/constituent and the claimed effect (for the target group under the proposed conditions of use).

Substantiation of the claim is dependent on a favourable outcome of the assessment of 1, 2 and 3 above. Thus, a cause and effect relationship is considered not to be established if the outcome of any one of these assessments is unfavourable.

For a claim, each relationship between a food/constituent and a claimed effect is assessed separately, and individual assessments are combined, as appropriate, to form coherent opinions.

1. Characterisation of the food/constituent (ID 941)

The food constituent that is the subject of the health claim is a combination of Propionibacterium freudenreichii SI 41 and Propionibacterium freudenreichii SI 26.

Propionibacterium freudenreichii SI41 (hereafter P. freudenreichii SI41) is also known as P. freudenreichii TL162. No indication of the deposit of the strain in an internationally recognised culture collection was found in the information provided. Data on the identification and characterisation of P. freudenreichii SI41 at species and strain level using genotypic methods

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A combination of *P. freudenreichii* SI 41 and *P. freudenreichii* SI 26 and increasing numbers of gastro-intestinal microorganisms (further assessment)

(DNA-DNA hybridisation, 16S rRNA gene sequence analysis, species-specific PCR and PFGE) were provided in the application and accompanying references (Hervé et al., 2007; Jan et al., 2002). The Panel considers that *Propionibacterium freudenreichii* SI41 is sufficiently characterised.

*Propionibacterium freudenreichii* SI26 (hereafter *P. freudenreichii* SI26) is also known as *P. freudenreichii* TL166. No indication of the deposit of the strain in an internationally recognised culture collection was found in the information provided. Data on the identification and characterisation of *P. freudenreichii* SI26 at species and strain level using genotypic methods (DNA-DNA hybridisation, 16S rRNA gene sequence analysis, species-specific PCR and PFGE) were provided in the application and the accompanying reference (Hervé et al., 2007). The Panel considers that *Propionibacterium freudenreichii* SI26 is sufficiently characterised.

The Panel considers that the food constituent, a combination of *Propionibacterium freudenreichii* SI41 and *Propionibacterium freudenreichii* SI26, which is the subject of the health claim, is sufficiently characterised.

2. Relevance of the claimed effect to human health (ID 941)

The claimed effect, which is proposed for further assessment, is “beneficially affects the intestinal flora by increasing bifidobacteria”. The proposed target population is the general population.

The Panel notes that increasing the number of any groups of microorganisms, including lactobacilli and/or bifidobacteria, is not considered to be a beneficial physiological effect in itself, but needs to be linked to a beneficial physiological effect.

The references cited in relation to this claim included one human study, which addressed the effects of *P. freudenreichii* SI 41 and *P. freudenreichii* SI 26 on faecal propionibacteria and bifidobacteria concentrations, and on segmental colonic transit time (Bouglé et al., 1999), and two human studies on the effect of *P. freudenreichii* SI41 alone (and not the combination of the strains that is the subject of the claim) in different matrices (e.g. fermented milk, and classical or acid-resistant capsules) on, for example, propionibacterium populations in faeces, survival capacity/viability of the strain, or the metabolic activity of the strain in the gut (Hervé et al., 2007; Jan et al., 2002). The Panel considers that the evidence provided does not establish that increasing numbers of gastro-intestinal microorganisms is a beneficial physiological effect.

The Panel concludes that a cause and effect relationship has not been established between the consumption of a combination of *Propionibacterium freudenreichii* SI 41 and *Propionibacterium freudenreichii* SI 26 and a beneficial physiological effect related to increasing numbers of gastro-intestinal microorganisms.

CONCLUSIONS

On the basis of the data presented, the Panel concludes that:

- The food constituent, a combination of *Propionibacterium freudenreichii* SI 41 and *Propionibacterium freudenreichii* SI 26, which is the subject of the health claim, is sufficiently characterised.
- The claimed effect proposed for further assessment is “beneficially affects the intestinal flora by increasing bifidobacteria”. The proposed target population is the general population. The evidence provided does not establish that increasing numbers of gastro-intestinal microorganisms is a beneficial physiological effect.
A combination of *Propionibacterium freudenreichii* SI 41 and *Propionibacterium freudenreichii* SI 26 and increasing numbers of gastro-intestinal microorganisms (further assessment)

- A cause and effect relationship has not been established between the consumption of a combination of *Propionibacterium freudenreichii* SI 41 and *Propionibacterium freudenreichii* SI 26 and a beneficial physiological effect related to increasing numbers of gastro-intestinal microorganisms.

**DOCUMENTATION PROVIDED TO EFSA**

Health claims pursuant to Article 13 of Regulation (EC) No 1924/2006 for further assessment (No: EFSA-Q-2012-00132). The scientific substantiation is based on the information provided by the competent Authority of Germany for further assessment of this claim (available on: http://www.efsa.europa.eu/en/topics/topic/article13.htm).

**REFERENCES**


APPENDICES

APPENDIX A

BACKGROUND AND TERMS OF REFERENCE AS PROVIDED BY THE EUROPEAN COMMISSION

The Regulation 1924/2006 on nutrition and health claims made on foods6 (hereinafter "the Regulation") entered into force on 19th January 2007.

Article 13 of the Regulation foresees that the Commission shall adopt a Community list of permitted health claims other than those referring to the reduction of disease risk and to children's development and health. This Community list shall be adopted through the Regulatory Committee procedure and following consultation of the European Food Safety Authority (EFSA).

Health claims are defined as "any claim that states, suggests or implies that a relationship exists between a food category, a food or one of its constituents and health".

In accordance with Article 13 (1) health claims other than those referring to the reduction of disease risk and to children's development and health are health claims describing or referring to:

a) the role of a nutrient or other substance in growth, development and the functions of the body; or
b) psychological and behavioural functions; or
c) without prejudice to Directive 96/8/EC, slimming or weight-control or a reduction in the sense of hunger or an increase in the sense of satiety or to the reduction of the available energy from the diet.

To be included in the Community list of permitted health claims, the claims shall be:

(i) based on generally accepted scientific evidence; and
(ii) well understood by the average consumer.

Member States provided the Commission with lists of claims as referred to in Article 13 (1) by 31 January 2008 accompanied by the conditions applying to them and by references to the relevant scientific justification. These lists have been consolidated into the list which forms the basis for the EFSA consultation in accordance with Article 13 (3).

ISSUES THAT NEED TO BE CONSIDERED

IMPORTANCE AND PERTINENCE OF THE FOOD7

Foods are commonly involved in many different functions8 of the body, and for one single food many health claims may therefore be scientifically true. Therefore, the relative importance of food e.g. nutrients in relation to other nutrients for the expressed beneficial effect should be considered: for functions affected by a large number of dietary factors it should be considered whether a reference to a single food is scientifically pertinent.

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6 OJ L12, 18/01/2007
7 The term 'food' when used in this Terms of Reference refers to a food constituent, the food or the food category.
8 The term 'function' when used in this Terms of Reference refers to health claims in Article 13(1)(a), (b) and (c).
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It should also be considered if the information on the characteristics of the food contains aspects pertinent to the beneficial effect.

**SUBSTANTIATION OF CLAIMS BY GENERALLY ACCEPTABLE SCIENTIFIC EVIDENCE**

Scientific substantiation is the main aspect to be taken into account to authorise health claims. Claims should be scientifically substantiated by taking into account the totality of the available scientific data, and by weighing the evidence, and shall demonstrate the extent to which:

(a) the claimed effect of the food is beneficial for human health,

(b) a cause and effect relationship is established between consumption of the food and the claimed effect in humans (such as: the strength, consistency, specificity, dose-response, and biological plausibility of the relationship),

(c) the quantity of the food and pattern of consumption required to obtain the claimed effect could reasonably be achieved as part of a balanced diet,

(d) the specific study group(s) in which the evidence was obtained is representative of the target population for which the claim is intended.

EFSA has mentioned in its scientific and technical guidance for the preparation and presentation of the application for authorisation of health claims consistent criteria for the potential sources of scientific data. Such sources may not be available for all health claims. Nevertheless it will be relevant and important that EFSA comments on the availability and quality of such data in order to allow the regulator to judge and make a risk management decision about the acceptability of health claims included in the submitted list.

The scientific evidence about the role of a food on a nutritional or physiological function is not enough to justify the claim. The beneficial effect of the dietary intake has also to be demonstrated. Moreover, the beneficial effect should be significant i.e. satisfactorily demonstrate to beneficially affect identified functions in the body in a way which is relevant to health. Although an appreciation of the beneficial effect in relation to the nutritional status of the European population may be of interest, the presence or absence of the actual need for a nutrient or other substance with nutritional or physiological effect for that population should not, however, condition such considerations.

Different types of effects can be claimed. Claims referring to the maintenance of a function may be distinct from claims referring to the improvement of a function. EFSA may wish to comment whether such different claims comply with the criteria laid down in the Regulation.

**WORDING OF HEALTH CLAIMS**

Scientific substantiation of health claims is the main aspect on which EFSA's opinion is requested. However, the wording of health claims should also be commented by EFSA in its opinion.

There is potentially a plethora of expressions that may be used to convey the relationship between the food and the function. This may be due to commercial practices, consumer perception and linguistic or cultural differences across the EU. Nevertheless, the wording used to make health claims should be truthful, clear, reliable and useful to the consumer in choosing a healthy diet.

In addition to fulfilling the general principles and conditions of the Regulation laid down in Article 3 and 5, Article 13(1)(a) stipulates that health claims shall describe or refer to "the role of a nutrient or other substance in growth, development and the functions of the body". Therefore, the
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requirement to describe or refer to the 'role' of a nutrient or substance in growth, development and the functions of the body should be carefully considered.

The specificity of the wording is very important. Health claims such as "Substance X supports the function of the joints" may not sufficiently do so, whereas a claim such as "Substance X helps maintain the flexibility of the joints" would. In the first example of a claim it is unclear which of the various functions of the joints is described or referred to contrary to the latter example which specifies this by using the word "flexibility".

The clarity of the wording is very important. The guiding principle should be that the description or reference to the role of the nutrient or other substance shall be clear and unambiguous and therefore be specified to the extent possible i.e. descriptive words/ terms which can have multiple meanings should be avoided. To this end, wordings like "strengthens your natural defences" or "contain antioxidants" should be considered as well as "may" or "might" as opposed to words like "contributes", "aids" or "helps".

In addition, for functions affected by a large number of dietary factors it should be considered whether wordings such as "indispensable", "necessary", "essential" and "important" reflects the strength of the scientific evidence.

Similar alternative wordings as mentioned above are used for claims relating to different relationships between the various foods and health. It is not the intention of the regulator to adopt a detailed and rigid list of claims where all possible wordings for the different claims are approved. Therefore, it is not required that EFSA comments on each individual wording for each claim unless the wording is strictly pertinent to a specific claim. It would be appreciated though that EFSA may consider and comment generally on such elements relating to wording to ensure the compliance with the criteria laid down in the Regulation.

In doing so the explanation provided for in recital 16 of the Regulation on the notion of the average consumer should be recalled. In addition, such assessment should take into account the particular perspective and/or knowledge in the target group of the claim, if such is indicated or implied.

**TERMS OF REFERENCE**

**HEALTH CLAIMS OTHER THAN THOSE REFERRING TO THE REDUCTION OF DISEASE RISK AND TO CHILDREN’S DEVELOPMENT AND HEALTH**

EFSA should in particular consider, and provide advice on the following aspects:

- Whether adequate information is provided on the characteristics of the food pertinent to the beneficial effect.
- Whether the beneficial effect of the food on the function is substantiated by generally accepted scientific evidence by taking into account the totality of the available scientific data, and by weighing the evidence. In this context EFSA is invited to comment on the nature and quality of the totality of the evidence provided according to consistent criteria.
- The specific importance of the food for the claimed effect. For functions affected by a large number of dietary factors whether a reference to a single food is scientifically pertinent.

In addition, EFSA should consider the claimed effect on the function, and provide advice on the extent to which:

- the claimed effect of the food in the identified function is beneficial.
- a cause and effect relationship has been established between consumption of the food and the claimed effect in humans and whether the magnitude of the effect is related to the
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quantity consumed.

- where appropriate, the effect on the function is significant in relation to the quantity of the food proposed to be consumed and if this quantity could reasonably be consumed as part of a balanced diet.
- the specific study group(s) in which the evidence was obtained is representative of the target population for which the claim is intended.
- the wordings used to express the claimed effect reflect the scientific evidence and complies with the criteria laid down in the Regulation.

When considering these elements EFSA should also provide advice, when appropriate:

- on the appropriate application of Article 10 (2) (c) and (d) in the Regulation, which provides for additional labelling requirements addressed to persons who should avoid using the food; and/or warnings for products that are likely to present a health risk if consumed to excess.
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**APPENDIX C**

**Table 1.** Health claims related to a combination of *Propionibacterium freudenreichii* SI 41 and *Propionibacterium freudenreichii* SI 26, including conditions of use, as proposed in the framework of further assessment.

<table>
<thead>
<tr>
<th>ID</th>
<th>Food or Food constituent</th>
<th>Health Relationship</th>
<th>Proposed wording</th>
</tr>
</thead>
<tbody>
<tr>
<td>941</td>
<td>“<em>Propionibacterium freudenreichii</em> SI 41 and <em>Propionibacterium freudenreichii</em> SI 26”</td>
<td>beneficially affects the intestinal flora by increasing bifidobacteria</td>
<td>the two strains are viable and active during intestinal transit, and beneficially affect the intestinal flora by increasing bifidobacteria.</td>
</tr>
</tbody>
</table>

**Conditions of use**

The proposed target population is the general population. A daily intake between $10^{10}$ and $10^{11}$ cfu. This quantity could easily be incorporated in food supplements, dairy products and other foods and reasonably be consumed as part of a balanced diet.
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**GLOSSARY AND ABBREVIATIONS**

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>DNA</td>
<td>Deoxyribonucleic acid</td>
</tr>
<tr>
<td>PCR</td>
<td>Polymerase chain reaction</td>
</tr>
<tr>
<td>PFGE</td>
<td>Pulsed field gel electrophoresis</td>
</tr>
<tr>
<td>rRNA</td>
<td>Ribosomal ribonucleic acid</td>
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</tbody>
</table>