



British Association for the Study of Community Dentistry

Position statement on recommended actions
to reduce the consumption of free sugars
and improve oral health

We support the recommendation of the Scientific Advisory Committee on Nutrition that the average population intake of free sugars should not exceed 5% of total dietary energy for age groups from 2 years upwards.

Why BASCD has produced this statement

Consuming too much sugar in food and drink is bad for people's health, increasing their risk of obesity, which is associated with greater risks of developing, type 2 diabetes, hypertension, coronary artery disease and cancer. It is also a risk factor for tooth decay.

Concerted action to reduce sugar consumption is recommended by the Scientific Advisory Committee on Nutrition (SACN), ¹the World Health Organization (WHO), ²Public Health England (PHE)³ and the UK Public Health Forum.⁴

In this position statement BASCD supports a broad range of actions that have been proposed by these expert bodies, including

- * lowering the amount of free sugars in food and drinks;
- * restricting the marketing and promotion of sugar-containing products;
- * reducing the amount of sugar-containing food and drinks sold;
- * advising, educating and helping people to consume less sugar;
- * reducing the amount of sugar produced.

Oral health, the harm done by sugar, and the link between high sugar consumption, high rates of tooth decay and social deprivation

Good oral health is important to people's general health and well-being. It allows them to eat, speak and socialise. Poor oral health inhibits all of these essential daily functions.

The prevalence of tooth decay increases as deprivation increases. There is evidence that sugar consumption is higher among people from more deprived communities in the UK. Reducing sugar consumption therefore has a key part to play in reducing oral health inequalities between different communities and population groups. Healthy food choices for those in food poverty are often restricted due to their higher cost and large number of promotions on high sugar foods. This leads to greater price differences between healthy and high sugar foods.

In July 2015, SACN published a comprehensive review of the scientific evidence on carbohydrates and health which recommended that the average population intake of free sugars should not exceed 5% of total dietary energy for age groups from 2 years upwards.

Importantly, the emphasis in the report was on the need to reduce total consumption of 'free sugars', which include not only monosaccharides and disaccharides added to foods and drinks by the manufacturer, cook or consumer but also sugars naturally present in honey, syrups, fruit juices and fruit concentrates.

BASCD support for a broad programme of measures

BASCD supports SACN's recommendation because it is evidence-based and will, if implemented effectively, lead to an improvement in people's oral and general health.

To achieve the aims behind the recommendation, BASCD agrees with a set of actions put forward by the UK Public Health Forum in its 2014 discussion paper and by Public Health England in its 2015 report "Sugar reduction: the evidence for action". No single action will succeed on its own. There is a clear need for a comprehensive programme of mutually reinforcing actions:

Action 1. Lowering the amount of free sugars in food and drinks

We support the *introduction of a broad, structured and transparently monitored programme of gradual reduction in the sugar content of everyday food and drink products*, combined with reductions in portion size.

Products with the biggest market share should be a major target for the programme. Manufacturers, retailers and caterers all need to be involved.

Action 2. Restricting the marketing of sugar-containing products

We support a *reduction in the number and type of price promotions of sugar-containing products in all retail outlets*, including supermarkets and convenience stores, restaurants, cafes and takeaways;

We also support a *significant reduction of opportunities to market and advertise high sugar food and drink products to children and adults* across all media including digital platforms and through sponsorship.

It is estimated that 8.7% of the sugar brought into the home is a direct result of the extra food and drink bought on promotion. Around 6% of total sugar purchased comes from higher sugar foods and drinks specifically and could potentially be prevented if promotions on higher sugar products did not occur.

We support a *tightening of Ofcom's current advertising restrictions*⁵ which, whilst having stopped products with the highest levels of fat, salt and sugar from being advertised to children on television, still allow those with relatively high levels of one of these three nutrients to be promoted.

A revision of Ofcom's definitions and criteria would help to stop children from being exposed to such promotions.

Action 3. Reducing the amount of sugar-containing food and drinks sold

We support a *price increase of at least 20% on high sugar products, including sugar-sweetened soft drinks*, through a tax or levy which may need to increase in time to further reduce sugar intake.

It is worth noting that the lower threshold of 5g/100ml (or 50g/litre which is 12 teaspoons of sugar), which is tax free can cause tooth decay, which is why water is the best option and why free water should be offered to families eating out.

Emerging evidence of the impact of such measures in other countries indicates that there have been reductions in sales, particularly in response to the highest increases in cost.

We welcome the news that from 2018 the government will introduce a levy on soft drinks with added sugar. This may provide a much-needed incentive to consumers to drink water or to buy alternatives that are lower in sugar or sugar-free and for manufacturers to reduce the sugar content of their products.

We also support the **introduction of government buying standards across the public sector**, including the NHS and local government, to ensure provision of healthier food and drinks in hospital, leisure centres and other facilities.

Action 4. Advising, educating and helping people to consume less sugar

We support steps to ensure that:

* **accredited training in diet and health** is routinely delivered to all those who have opportunity to influence food choices in catering, fitness and leisure sectors and others within local authorities;

* **appropriate training is provided to health professionals**, including the dental team, so that they understand the links between free sugar, obesity, diabetes and tooth decay;

* the **public, health professionals, employers and the food industry are made fully aware of the harmful effects of high sugar levels** in the diet;

* **people are encouraged to take action and are advised on practical steps** that will help them to lower their own and their family's sugar intake (including downloading PHE's *Sugar Smart* app that gives useful tips on the amounts of sugar in the food and drinks they buy, the PHE Change4Life 'sugar swaps' campaign, and providing people with practical cooking skills.

We also support:

* use of front of pack **health warnings** on foods and drinks high in sugar;

* putting **'spoons of sugar'** on the front of pack labels to indicate the amount of sugar in the product;

* restaurants, takeaways and other food outlets **displaying the amount of sugar in their products, both on menus and on display labels.**

Action 5. Reducing the amount of sugar produced

Whilst sugar production is subsidised, there will be no incentive to reduce its use in food. We support a broader approach to European farming subsidies to encourage the farming of crops that will contribute to a healthier diet. 4

The next steps

BASCD will work with other agencies across the health sector to help reduce the consumption of free sugars and improve oral and general health.

References

1. SACN (2015). Carbohydrates and Health at:
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/445503/SACN_Carbohydrates_and_Health.pdf
2. World Health Organization (2015). Guideline: sugars intake for adults and children
3. Public Health England (2015). Sugar Reduction: The evidence for action at:
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/470179/Sugar_reduction_The_evidence_for_action.pdf
4. Options for action to support the reduction of sugar intakes in the UK: a discussion paper produced by the UK Health Forum for Public Health England (2014).at:
<http://nhfshare.heartforum.org.uk/RMAssets/UKHFreports/UK%20Health%20Forum%20Discussion%20document%20-%20prepared%20for%20PHE%20June%202014.pdf>
5. Ofcom (2010). *HFSS advertising restrictions: final review*. Available from:
<http://stakeholders.ofcom.org.uk/binaries/research/tv-research/hfss-review-final.pdf>