

codex alimentarius commission



FOOD AND AGRICULTURE
ORGANIZATION
OF THE UNITED NATIONS

WORLD
HEALTH
ORGANIZATION



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Agenda Item 3

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JOINT FAO/WHO FOOD STANDARDS PROGRAMME CODEX COMMITTEE ON FOOD LABELLING

Thirty-fifth Session
Ottawa, Canada, 30 April - 4 May 2007

CONSIDERATION OF LABELLING PROVISIONS IN DRAFT CODEX STANDARDS (Codex Committee on Food Hygiene)

DRAFT CODE OF HYGIENIC PRACTICE FOR EGGS AND EGG PRODUCTS (AT STEP 8) (ALINORM 07/30/13, APPENDIX II)

9 PRODUCT INFORMATION AND CONSUMER AWARENESS

These principles and guidelines are supplemental to those contained in Section 9 of the *Recommended International Code of Practice - General Principles of Food Hygiene* (CAC/RCP 1-1969).

9.1 LOT IDENTIFICATION

Refer to the *Recommended International Code of Practice- General Principles of Food Hygiene* (CAC/RCP 1-1969).

Documentation can enhance the credibility and effectiveness of the food safety control system, especially when it includes measures that permit a client to refer to their supplier on the history of a product. Labelling and record keeping also aid in the implementation of other emergency and corrective actions.

Where appropriate and practicable, a system should be in place that allows the identification of the egg layer establishment, transporter, grading/packing premises and processor where eggs and egg products were produced..

The system should be easy to audit. Records should be kept for a period of time sufficient to permit efficient traceback investigations of the eggs and/or egg products. It is important to ensure that all parties involved in this system are adequately informed and trained in its implementation.

9.2 PRODUCT INFORMATION

Refer to the *Recommended International Code of Practice-General Principles of Food Hygiene* (CAC/RCP 1-1969).

9.3 LABELLING

Egg and egg products should be labelled in accordance with the *Codex General Standard for the Labelling of Prepackaged Foods* (CODEX STAN 1-1985).

Processors and food manufacturers awareness

Processors and food manufacturers that use egg products should follow labelling instructions.

9.4 CONSUMER EDUCATION

Where appropriate, advice should be made available to consumers on the safe handling, use, preparation and consumption of eggs.

DRAFT GUIDELINES ON THE APPLICATION OF GENERAL PRINCIPLES OF FOOD HYGIENE TO THE CONTROL OF *LISTERIA MONOCYTOGENES* IN FOODS (AT STEP 8) (ALINORM 07/30/13, APPENDIX III)

SECTION IX - PRODUCT INFORMATION AND CONSUMER AWARENESS

Objectives:

Consumers should have enough knowledge of *L. monocytogenes* and food hygiene such that they:

- understand the importance of shelf-life, sell-by or use-by dates written on food label;
- can make informed choices appropriate to the individual's health status and concomitant risk of acquiring foodborne listeriosis;
- prevent contamination and growth or survival of *L. monocytogenes* by adequately storing and preparing ready-to-eat foods.

Health care providers should have appropriate information on *L. monocytogenes* in foods and listeriosis to give advice to consumers and in particular susceptible populations

Rationale:

Consumers (in particular, the susceptible populations), health care providers, need to be informed about ready-to-eat foods supporting growth of *L. monocytogenes*, food handling, preparation practices and avoidance of certain foods by susceptible populations.

9.1 LOT IDENTIFICATION

Refer to the Recommended International Code of Practice - General Principles of Food Hygiene (CAC/RCP 1-1969).

9.2 PRODUCT INFORMATION

Refer to the Recommended International Code of Practice - General Principles of Food Hygiene (CAC/RCP 1-1969).

9.3 LABELLING

Countries should give consideration to labelling of certain ready-to-eat foods so that consumers can make an informed choice with regard to these products. Where appropriate, product labels should include information on safe handling practices and/or advice on the time frames in which the product should be eaten.

9.4 CONSUMER EDUCATION

Since each country has specific consumption habits, communication programs pertaining to *L. monocytogenes* are most effective when established by individual governments.

Programs for consumer information should be directed:

- at consumers with increased susceptibility to contracting listeriosis, such as pregnant women, the elderly and immunocompromised persons;
to help consumers make informed choices about purchase, storage, shelf-life labelling and appropriate consumption of certain ready-to-eat foods that have been identified in relevant risk assessment and other studies, taking into consideration the specific regional conditions and consumption habits;
- to consumers to educate them on household practices and behaviours that would specifically keep the numbers of *L. monocytogenes* that may be present in foods, to as low a level as possible by

- setting refrigerator temperatures so that product temperatures should not exceed 6°C (preferably 2°C - 4°C) since the growth of *L. monocytogenes* is considerably reduced at temperatures below 6°C;
- frequently washing and disinfecting the household refrigerator since *L. monocytogenes* can be present in many foods and grow at refrigerator temperatures, and thus contribute to cross-contamination;
- respecting the shelf-life dates written on ready-to-eat foods;
- using of thermometers inside home refrigerators.

Programs for health care providers should, in addition to information provided to consumers, be designed to provide them with guidance that

- facilitates rapid diagnosis of foodborne listeriosis;
- provides means to rapidly communicate information on preventing listeriosis to their patients, particularly those with increased susceptibility.