

# FINE News



Folate Information Network

December 2009



We wish our readers a happy holiday season and a wonderful New Year. The Spina Bifida Foundation of Victoria continues to welcome new members. If you would like further information or wish to join please email [finz@sbfv.org.au](mailto:finz@sbfv.org.au) or call (03) 9663 0075 for a confidential chat.



## Introduction of Folic Acid Fortification

Mandatory folic acid fortification of bread flour commenced this year following many years of discussion, debate and consultation. It has been put into flour in quite small doses, but every little bit helps and it is expected to prevent about 14 percent of new cases of neural tube defects each year.

A website produced by the food industry explains clearly the reasons for fortifying flour and an extract from the website is included below:

([http://foodindustry.org.au/index.php?option=com\\_content&task=view&id=341&Itemid=60](http://foodindustry.org.au/index.php?option=com_content&task=view&id=341&Itemid=60))

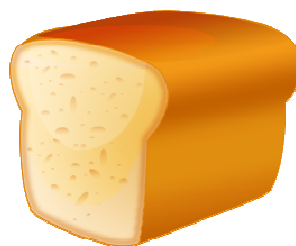
### **Mandatory Fortification**

From Sunday 13<sup>th</sup> September 2009, bread-making flour in Australia was required to have folic acid, a form of the B vitamin folate, added to it to reduce the risk of babies being born with birth defects such as spina bifida.

According to Dr Paul Brent, Chief Scientist with Food Standards Australia and New Zealand (FSANZ), "We have permitted the food industry to voluntarily add folic acid to foods such as bread, fruit juices, yeast extracts and breakfast cereal for more than 10 years. There have also been many education campaigns to encourage women to take folic acid supplements.

"While this has increased women's intake of folic acid they are still not reaching the required daily level of 400 micrograms," he said.

"Mandatory fortification is intended to 'boost' the folic acid intake women already get from voluntarily fortified foods and supplements.



More than 80 percent of women of child-bearing age in Australia eat bread and on average, these women eat about two slices per day.

"As it isn't possible for women to consume enough folic acid from a well balanced diet, we have now made the addition of folic acid compulsory for bread-making flour. The only exception is organic flour which is not required to contain folic acid because of the rules about organic food.

"FSANZ has spent many years looking at all the folic acid scientific studies available in consultation with our expert groups that included Australian and international health experts.

"We have concluded that the mandatory addition of low levels of folic acid to bread will greatly reduce the risk of babies being born with spina bifida and that it is safe for the whole community.

“Mandatory folic acid addition to flour has been used safely in the United States and Canada for over 10 years where rates of spina bifida have significantly decreased.

“Australian health authorities will be monitoring the effects of the increased levels of folic acid in the food supply,” Dr Brent concluded.

The folic acid mandatory fortification standard was developed by FSANZ at the request of the Australia and New Zealand Food Regulation Ministerial Council that consists of health and food ministers from the Australian Federal, State and Territory Governments. There is more information about folic acid for consumers and health professionals, including a web seminar, on the FSANZ website.

**Monitoring the effectiveness of folic acid fortification**

The Australian Institute of Health and Welfare’s (AIHW) website summarises folic acid (and iodine) fortification monitoring - [http://www.aihw.gov.au/pophealth/foilate\\_iodine.cfm](http://www.aihw.gov.au/pophealth/foilate_iodine.cfm)

The headings of this one page document are:

1. What are folic acid and iodine?

2. Why do we need to fortify the food supply?
3. How will we know if fortification is effective?
4. What will the monitoring program cover?
5. What is the AIHW role?

The last two questions (above) will help in determining whether or not:

- the level of folic acid in the food supply has increased
- the food industry is being compliant with mandatory fortification
- folic acid intakes have increased in women of child-bearing age
- the folate status of women of child-bearing age has improved (as measured by blood tests: serum and red cell folate levels)
- neural tube defects (NTDs) have decreased
- there are any adverse health effects of fortification.

It is expected that a change in the number of babies with NTDs will be able to be measured using data from three Australian states (WA, SA and Vic) where excellent quality collections have developed over many years.

The SBFV will keep you updated through this newsletter of any future developments in relation to fortification, and feel free to ask us any questions.

**Celebrations at the Immigration Museum**

The Atrium at the Immigration Museum was a lovely setting for this year’s Annual General Meeting and Night of Celebration of the Spina Bifida Foundation of Victoria (SBFV).

The formalities of the evening started with SBFV President, John Simmons, discussing various items of interest including the introduction of mandatory fortification of bread flour with folic acid.



During supper guest mingled and had the opportunity to look at a display of some SBFV items including the Independent Living Skills manuals and the Healthy Futures journals.

Many of the guests had been eagerly awaiting the post-supper entertainment by the Gowri - Dances of India (seen above) and this group of seven colourfully dressed women didn’t disappoint.

It was great to see everyone taking up the challenge to do some Bollywood dancing in the Museum's courtyard.

Three Certificates of Appreciation were presented to active volunteers and two SBFV members received Malcolm Menelaus Achievement awards, namely Helen Houghton and Gary Robinson, for significant personal and professional milestones.

Everyone enjoyed the night and left with smiles on their faces!

### **Spina Bifida: From a Child's Perspective**

The children of a parent with spina bifida have their own challenges to face. For example, the hereditary nature of the condition means they need to take extra care to ensure that their own children are as healthy as possible.

Genetic counselling, a higher dose of folate, and lots of discussion about possible outcomes should be part of pregnancy planning.

Here we learn from Patrick, a 29-year-old man, whose mother has spina bifida, about what having a family history of the condition has meant to him as a child and now as an adult.

*"I have always been aware of spina bifida – it was part of our life for as long as I can remember. It was an explanation, and part of the family history. I suppose there was some childhood curiosity – certainly a feeling or gratitude towards the doctor, who in saving my mother, allowed me to be born at all.*

*The news that spina bifida was hereditary came as a shock. I had always considered myself to be very paternal despite the fact that my lifestyle precludes raising children.*

*In some ways, learning that I could potentially be a carrier was the final straw in deciding against children. It wasn't the major factor – that came from sexuality and career – but it was a factor.*

*That being said, I have no doubt that if I were in a different situation and looking to raise children I would not have been deterred by the possibility of passing on the condition. I have read widely on folate and the genetic risks involved and certainly discussed the matter with my partner. Practical precautions would be followed.*

*(For example, the female partners of male carriers should take the higher dose of folate/folic acid. Ed)*

*On the other side of the coin however, the possibility of being a carrier is enough to dissuade me from ever acting as a sperm donor.*

*While there are practical precautions and risks for me to endure, it is not something I would consider passing on to others.*

*I can't say I understand everything about the condition – who does? I have an understanding that there was too much fluid and parts of my mothers spine were missing, or not in place.*

*I understand that children with this condition were usually left to die.*

*(This was in the 1950s; fortunately it is very different today. Ed)*

*I also understand that the condition must have been passed from my grandmother and that, while we were lucky not to pick up the hemophilia that also runs through our family that we struck out here. But why my mother and not my aunts?*

*With kids not on the agenda, I suppose the only lasting impression that Mum's spina bifida makes is that I'm lucky she's alive, and therefore damn lucky I am too."*