Attachment 11

New Zealand *Dietary Supplements Regulations 1985*

The NZDSR were made under the New Zealand *Food Act 1981*, and commenced in August 1985. In contrast to Australia, these regulations created a separate regulatory category for dietary supplements in addition to those for foods and medicines/therapeutic goods.

Details of the permissions for vitamins and minerals contained in the NZDSR are outlined below.

Vitamins	**Maximum Daily Dose (for adult) – if specified**	**Minerals**	**Maximum Daily Dose (for adult) – if specified**
Vitamin A or retinol	3000 µg	Calcium	
Vitamin B1 or thiamin		Chlorine	
Vitamin B2 or riboflavin		Chromium	
Niacin or nicotinic acid	100 mg	Copper	5 mg
Pantothenic acid		Fluorine	
Vitamin B_6 or pyridoxine		Iodine	
Vitamin B_{12} or cyanocobalamin or hydroxycobalamin	50 µg	Iron	24 mg
Vitamin C or ascorbic acid		Magnesium	
Vitamin D or calciferol	25 µg	Manganese	
Vitamin D or cholecalciferol	25 µg	Molybdenum	
Vitamin E		Phosphorus	
Biotin		Potassium	
Vitamin K		Selenium	150 µg
Vitamin K1 or phytomenadione		Sodium	
Vitamin K or menaphthone		Zinc	15 mg
Folic acid	300 µg		

Attachment 12

Consumer Research on Food-Type Dietary Supplements
Summary of Findings

A total of 10 focus groups were conducted. The sample was skewed to include more people who are health conscious or who have special health needs compared to less health conscious people. The research demonstrated that participants were unable to distinguish between general-purpose foods carrying nutrition content claims and food-type dietary supplements labelled 'dietary supplement', because they are almost exclusively influenced by content claims and because manufacturers display the term 'dietary supplement' in a way which renders it difficult to discern.

Awareness and use of food-type dietary supplements was low. There were very few concerns about over-consumption of supplements (in terms of vitamins, minerals, non-culinary herbs and botanicals) and therefore participants were very open to the concept of supplementation of foods in almost all processed food categories. They did, however, want labels that distinguish between foods that intrinsically contain particular nutrients and foods that contain extrinsic or 'added' nutrients. They also wanted claims to be more quantified through the use of comparative percentages or exact amounts. Content claims such as 'source' and 'good source' were viewed as advertorial in nature and imprecise, which therefore meant they were treated with scepticism, even though they were considered to be truthful. There was no awareness that such terms are regulated.

The term 'dietary supplement' was described in both positive and negative terms because consumers were confused as to whether the intent was to caution consumers or to market the product. The addition of a trigger statement directing consumers to the Nutrition Information Panel (NIP) was not well supported, nor was a cautionary statement about food-type dietary supplements or a percentage daily intake column in the NIP, because none of them were seen as being necessary.

The report highlighted the need to inform and educate consumers about labels relating to food-type dietary supplements as consumers' current understanding of supplementation and nutritional information is such that informed choices cannot be made. The addition of more information on labels to reflect supplementation will not be meaningful to consumers unless accompanied by education.