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Evaluating the $\leq 10:1$ wholegrain criterion in identifying nutrient quality and health implications of UK breads and breakfast cereals

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1 Abstract

2

- Objective: To evaluate the nutrient quality of breads and breakfast cereals identified using the
 wholegrain definition of ≤10:1 carbohydrate:fibre ratio.
- 5
- 6 Design: Following a cross-sectional study design, nutritional information was systematically
- 7 gathered from food labels of breads and breakfast cereals that met the $\leq 10:1$
- 8 carbohydrate:fibre criterion. The median nutrient content was compared with the UK Food
- 9 Standards Agency nutrient profiling standards and the association between carbohydrate:fibre
- 10 ratio and other nutrients were analysed. Subgroup analyses were undertaken for products with
- 11 and without fruit, nuts and/or seeds.
- 12
- 13 Setting: Products from four major supermarket stores in the UK.
- 14

15 Subjects: 162 breads and 266 breakfast cereals.

16

17 Results: Breads which met the $\leq 10:1$ criterion typically contained medium fat, low saturated fat, low sugar and medium sodium. Breakfast cereals typically contained medium fat, low 18 19 saturated fat, high sugar and low sodium. In both groups, as the carbohydrate:fibre ratio 20 decreased, fat content increased (bread: p=0.029, r=-0.171; breakfast cereal: p=0.033, r=-0.131) and, in breakfast cereals, as the ratio increased, sugar content increased (p<0.0005, 21 22 r=0.381). Breakfast cereals with fruit, nuts and/or seeds contained, per 100 g, more energy (p=0.002), fat, saturated fat and sugar (all p<0.0005) while seeded breads had more energy, 23 24 fat and saturated fat (all p<0.0005).

25

Conclusions: Overall, breads and breakfast cereals meeting the ≤10:1 criterion have good
nutritional quality, suggesting that the criterion could be useful in public health and/or food
labelling. The utility of applying the 10:1 criterion to products containing fruit, nuts and/or
seeds is less clear and requires further research.

30 Introduction

31

The term "whole grain" typically refers to the entire edible grain from cereals and related 32 plants ⁽¹⁾. Food containing whole grains can include the full grain or be reconstituted so the 33 components of the grain are recombined to a similar proportion to that of the original grain 34 ⁽²⁾. Many studies suggest that foods high in wholegrain ingredients may reduce the risk of 35 chronic diseases such as cardiovascular disease (CVD), type 2 and gestational diabetes and 36 some cancers, including gastrointestinal and breast cancer ^(2,3,4,5,6). Foods high in whole grains 37 can replace more processed, higher glycaemic index cereals such as white bread and hence 38 maintain satiation and prolong gastric emptying which may reduce obesity risk ⁽⁷⁾. These 39 effects are potentially due to substances in the germ and bran of the grain, which work 40 synergistically, including insoluble and soluble fibre, phytosterols and antioxidants such as 41 lignans, polyphenols and flavonoids ⁽⁸⁾. However, some of the health benefits of whole grains 42 may also be attributed to their role as a proxy for a diet high in other nutrients. For example, 43 Venn and Mann⁽⁹⁾ demonstrated uncertainty about whether the impact of unrefined grain 44 intake on reducing diabetes-related mortality is due to wholegrain foods or other lifestyle 45 factors. Thus, the mechanism by which whole grains are beneficial is still partially unclear. 46 47 Furthermore, much of the research into whole grains is sponsored by companies that manufacture cereal-based products ^(2,10,11). Whilst not all of these companies are interested in 48 wholegrain goods, this funding may influence both the focus of cereal-based studies and the 49 findings that are published. In addition, there is little consistency in how authors define 50 wholegrain foods ⁽¹²⁾. These factors influence conclusions that can be drawn from the 51 literature ^(12,13). Despite this, there is a general consensus from authoritative organisations that 52 increasing intake of whole grains can reduce the risk of many important public health 53 problems (14,15,16). 54

55

Unlike the US, Australia, Denmark and Canada, the UK does not have a quantified
recommendation for intake of whole grains ⁽¹⁷⁾. The only recommendation is in The Eatwell
Guide which advises that "starchy food should make up about a third of the food" eaten in a
day and wherever possible, wholegrain options should be chosen ⁽¹⁴⁾. However, intake of
whole grains remains low. Comparison of data from the UK National Diet and Nutrition
Survey (NDNS) with the US recommendation of at least three 16 g servings of whole grains

62 per day shows that 45% of UK adults ate less than one serving and 18% consumed no whole

63 grains during the 4-day collection period ⁽¹⁷⁾. With obesity and diabetes increasing ⁽¹⁸⁾ and

64 low intakes of whole grains, a public health initiative to substitute foods containing whole

- 65 grains for those containing significant amounts of refined grains might improve health, save
- resources and reduce total and CVD-related mortality $^{(19)}$.
- 67

However, it is difficult to promote whole grains when there is little standardisation in 68 defining "wholegrain" foods. In Europe, a food must have $\geq 51\%$ wholegrain ingredients by 69 wet weight in order to make a health claim ⁽²⁰⁾. However, other nutrients are not specified in 70 71 relation to this which means that products making this claim can also have very high levels of sugar or fat. The UK Institute of Grocery Delivery⁽¹⁾ recommend that a food should have at 72 least 8 g of wholegrain ingredients per serving to be called whole grain. However, as with the 73 USA and Canadian Whole Grain Stamps⁽²¹⁾, this recommendation is non-binding. Non-74 statutory labelling is predominately decided by industry representatives ⁽¹⁾ which raises the 75 concern that they may focus on commercial rather than health purposes and thus may be 76 potentially misleading (22, 23). 77

78

In 2015 the UK Scientific Advisory Committee on Nutrition (SACN) recommended that a 79 standardised definition of "whole grain" and wholegrain foods should be developed as this 80 would facilitate recommended portion sizes for wholegrain foods and support public health 81 messages about the importance of dietary fibre ⁽²⁴⁾. Similarly, the US Dietary Guidelines 82 Technical Advisory Committee have declared "a call to action" to develop a definition of 83 wholegrain foods that can be internationally implemented ^{(12).} This would benefit public 84 health directly by providing consumers with consistent and useful information and indirectly 85 by facilitating research into whole grains ^(12,25). 86

87

Mozaffarian *et al.* recently compared five different criteria to see which represented the healthiest
 American wholegrain-based foods ⁽²³⁾. They found that foods with a ≤10:1 carbohydrate:fibre ratio
 contained the least sugar, sodium and trans-fats. No similar studies have been undertaken outside
 the USA but this criterion could be considered in other countries.

92

The ≤10:1 criterion is based on the recommendation of the American Heart Association ⁽²⁶⁾ as it is
approximately the carbohydrate:fibre ratio in whole-wheat flour ⁽²³⁾. This ratio acts as a benchmark
to represent the "balance of whole grain versus sugars and refined grains", hence indicating overall
carbohydrate quality ⁽²³⁾. However, there is no clarification that the fibre content must come from
wholegrain ingredients.

98

99 The aim of this cross-sectional study was to evaluate *the nutritional quality of breads and*100 *breakfast cereals identified using the wholegrain definition of ≤10:1 carbohydrate:fibre ratio*101 *and, therefore, to* examine the utility of this criterion by considering the health implications
102 of foods that it defines.

103

The term "utility" in this context is used to describe a variety of factors. These include, but are not limited to: how easily the criterion can be used; how healthy the foods that meet it are; whether it can be used to promote healthier choices; and whether it is representative of wholegrain foods. Even though the word "healthy" is used in this article, the authors acknowledge that it is subjective and can have various meanings; this is discussed further in the paper's limitations.

110 Method

111 Data collection

The NDNS was used to establish which cereal-based foods are most commonly eaten in the 112 UK. It was determined that breads and breakfast cereals constitute 49% of UK cereal intake 113 ⁽²⁷⁾. Using these foods to evaluate the use of the criterion was appropriate as they make a 114 major contribution to cereal intake. The remaining 51% included foods like pasta, rice and 115 sweet items. However, other commonly consumed foods containing whole grains, such as 116 pasta, varied considerably in the form of products available, e.g. being sold dry or fresh, 117 which confounded analysis so they were not included in this study. Hence, all the products in 118 this research were breads or breakfast cereals with a carbohydrate: fibre ratio $\leq 10:1$. Products 119 with a ratio >10:1 were not studied. Sweet breads (e.g. malt loaf), gluten-free foods and 120 foods marketed for infants and toddlers were excluded due to typically having a different 121 122 composition.

123

Nutritional information was obtained online from four major supermarkets to make the 124 results generalizable as 79% of the UK buy food from one or more of these shops ⁽²⁸⁾. Their 125 websites were accessed in order of their market share: Tesco, Asda, Sainsbury's and 126 Morrison's ⁽²⁸⁾. A generic search was made using the terms "bread" and "breakfast cereal" 127 and then searches were conducted for more unusual products that the NDNS included such as 128 "roti" or "English muffins". Out of all the breads and breakfast cereals across the 129 130 supermarkets that met the search terms, a total of 162 breads and 266 breakfast cereals met the criterion and were included in the study. The nutritional information for each product was 131 documented as g/100 g and kJ/100 g for comparison. Data included portion size, 132 carbohydrate, fibre, energy, fat, saturated fat, sugar, sodium and ingredients. These nutrients 133 were included because they were used to assess a food's nutrient quality ⁽²⁹⁾. Carbohydrate to 134 fibre ratio was calculated. 135

136

137 Data analysis

138 Nutritional data were assessed for statistical distribution and, as the data were non-

139 parametric, the median and quartiles of energy and each nutrient were calculated for breads,

140 breakfast cereals and subgroups (listed below). The data for fat, saturated fat, sugar and

sodium were categorised according to the Food Standards Agency (FSA) definitions of
"high", "medium" and "low" levels of each nutrient per 100 g as used in UK nutrient
profiling ⁽²⁹⁾ (Table 1). Therefore, conclusions were drawn about amounts of nutrients in the
foods meeting the criterion. Sodium is referred to throughout this paper but was multiplied by
2.5 for conversion to salt (based on 1 g of salt containing 390 mg sodium) for comparison

146 with the FSA definitions $^{(30)}$.

147

The association between the carbohydrate:fibre ratio and the amount of energy, fat, saturated
fat, sugar and sodium was examined in breads and breakfast cereals using a Spearman rank
correlation.

151

Subgroup analyses were undertaken using independent samples median tests as it was observed that some of the products containing fruit, nuts and/or seeds also contained substantial quantities of refined carbohydrate and fewer wholegrain ingredients. The analyses compared breads containing seeds with breads that did not and breakfast cereals containing fruit, nuts and/or seeds with those that did not.

157

Most of the analyses for breakfast cereals were based on the dry products. However, it was 158 recognised that breakfast cereals are often consumed with milk. As milk contains 159 carbohydrate but negligible fibre ⁽³¹⁾, a separate analysis was completed in which the 160 carbohydrate in a portion of semi-skimmed milk (125 ml)^(31,32) was added to the 161 carbohydrate content of a portion of each breakfast cereal (specified by the manufacturer) to 162 assess how milk affects the carbohydrate:fibre ratio. This was conducted for breakfast cereals 163 containing fruit, nuts and/ or seeds and those that did not. The breakfast cereals that exceeded 164 this ratio once milk was added were still included in the research as the carbohydrate:fibre 165 ratio of the dry product was the main focus. 166

167

All tests were completed using SPSS version 22.0 (IBM Corporation, New York USA) and
 p<0.05 was accepted as statistically significant.

171 **Results**

172 Comparisons of nutrient content with FSA categories

173 The nutrient content per 100 g for 162 breads and 266 breakfast cereals with $\leq 10:1$

174 carbohydrate:fibre ratio classified using the FSA ⁽²⁹⁾ high, medium or low categories are

175 presented in Table 2. For bread, the content of saturated fat, sugar and sodium based on

176 median values were consistent enough for generalisations to be made, i.e. that typically they

177 contained low saturated fat, low sugar and medium sodium. There was more variation in the

178 fat content, but, based on median values, they contained a medium amount of fat.

179 For breakfast cereals, the median values indicated medium fat, low saturated fat, high sugar

and low sodium content. However, for all the nutrients, the values at the 25th, median and/or

181 75th quartiles corresponded to different FSA categories, indicating that the amounts of

nutrients in breakfast cereals are more widely distributed (Table 2).

183

184 *Relationships between carbohydrate: fibre ratio and energy and nutrient content*

185 A significant positive correlation was found between the ratio and sugar content for breakfast

186 cereals (p < 0.0005, r = 0.381) indicating that as carbohydrate increases and/or fibre decreases,

187 sugar content increases. A significant negative correlation was found for both breads and

breakfast cereals between the ratio and fat (breads: p=0.029, r=-0.171; breakfast cereals:

189 p=0.033, r=-0.131). This indicates that as carbohydrate decreases and/or fibre increases, fat

190 content increases.

191 For breads, there were no significant relationships between the ratio and the content of

192 energy, saturated fat, sugar or sodium. For breakfast cereals there were no significant

193 relationships between the ratio and energy, saturated fat or sodium.

194

195 *Subgroup analyses*

196 There were significant differences in the median amounts of nutrients in breads with and

197 without seeds (Table 3). Most importantly, seeded breads have significantly higher energy,

198 fat and saturated fat (all p < 0.0005).

There were also significant differences in the median amounts of nutrients in the breakfastcereals containing fruit, nuts and/or seeds and those without (Table 3). The products

- 201 containing fruit, nuts and/or seeds had significantly higher energy (p=0.002) and fat,
- saturated fat and sugar (all p<0.0005).
- 203 Without distinguishing between breakfast cereals that did and did not contain fruit, nuts
- and/or seeds, when the nutritional information of a portion of semi-skimmed milk was added
- to each breakfast cereal portion, 90 (34%) exceeded the $\leq 10:1$ ratio.

207 Discussion

208This study aimed to evaluate the nutritional quality of breads and breakfast cereals identified209using the wholegrain definition of $\leq 10:1$ carbohydrate:fibre ratio in order to contribute to

- 210 understanding of the utility of the criterion in promoting nutritional health. The FSA
- 211 categories for fat, saturated fat, sugar and salt were chosen for comparison as they are an
- accepted method of nutrient profiling in the UK $^{(33)}$ and highly relevant to public health.
- 213

214 Evaluation of the criterion in relation to breads meeting the $\leq 10:1$ ratio

The median nutrient content for wholegrain breads identified using the $\leq 10:1$ ratio suggests 215 they have good nutritional quality, an important indication of the utility of this criterion. The 216 low saturated fat and sugar content supports current public health guidance as limiting 217 saturated fat and sugar intake is recommended to reduce the risk of common long-term 218 conditions in the UK, notably CVD and diabetes ⁽¹⁴⁾. This is one reason why wholegrain 219 bread is recommended as a carbohydrate source in guidelines across Europe^(14,34). The 220 medium content of fat is not concerning as only 16% is saturated. The remaining unsaturated 221 fats may promote a healthier blood lipid profile, improving cardiovascular health ⁽³⁵⁾, again 222 suggesting these breads have good nutritional quality. The medium sodium content is 223 unsurprising as bread is the largest single contributor of sodium in the UK diet ⁽³⁶⁾. This is a 224 well-established concern⁽³⁷⁾. Most breads have a high salt content, not just those meeting the 225 226 criterion, but this is decreasing in UK bread following a voluntary salt-reduction programme (36) 227

228 Studies of wholegrain breads tend to examine health benefits or micronutrient

supplementation rather than overall nutritional content as in the present study. In addition, no

published studies have examined the $\leq 10:1$ criterion in UK breads. Results of this study

cannot be compared to the findings of Mozaffarian *et al.* ⁽²³⁾ as their study did not distinguish

between the nutritional composition of breads and other products meeting the criterion.

- However, when compared to wholegrain breads in the UK food tables, The Composition of
- Foods ⁽³¹⁾, the breads that met the criterion were higher in fat, saturated fat, sugar and sodium,

suggesting that they are, overall, less healthy. Nevertheless, this comparison is limited as the

- food tables have a smaller sample size and analysis methods may differ. Overall, the
- 237 nutritional composition of breads meeting the criterion appears to correspond with healthy
- eating recommendations ⁽¹⁴⁾ which indicates the utility of using this criterion.

Regardless of the relatively good nutritional profile and health implications, it is important to 239 consider that, due to the inclusion criterion of the $\leq 10:1$ carbohydrate:fibre ratio, many of the 240 breads contained seeds. While people who eat seeds may have better health (including lower 241 triglyceride levels and increased insulin sensitivity) ⁽³⁸⁾, seeds contain a different type of fibre 242 from whole grains, which some argue has fewer biological benefits ⁽³⁹⁾. This fibre lowers the 243 ratio without contributing whole grains. In addition, the seeded breads have a different 244 nutritional composition with more energy, fat and saturated fat (Table 3). While eating 245 seeded rather than un-seeded breads is unlikely to have a major impact in isolation on 246 247 someone's body weight, it may be a less desirable choice for overweight or obese people who are trying to reduce their energy intake. Thirty-seven percent of the breads examined 248 contained seeds and, based on the food labelling, it is not possible to determine which would 249 meet the $\leq 10:1$ criterion by virtue of their wholegrain content alone, i.e. if the seeds were 250 excluded. This is a limitation of the criterion as a $\leq 10:1$ carbohydrate:fibre ratio does not 251 guarantee a product contains adequate wholegrain ingredients and, as a result, foods meeting 252 the criterion may have a different nutritional profile. 253

In breads, there was an inverse relationship between the carbohydrate:fibre ratio and fat 254 255 content. This may relate to the relative mutual displacement of the macronutrients in terms of fat and unrefined carbohydrate or it may be because the seeded breads have more fat and 256 fibre (Table 3) due to the contribution from seeds ⁽⁴⁰⁾. The difference in fibre between breads 257 with and without seeds was not statistically significant, but this may be because of inadequate 258 sample size. In fact, it disagrees with evidence that higher fibre diets are usually associated 259 with a lower fat intake ⁽²³⁾, though this may be because the negative association relates to 260 wholegrain foods alone, not the total diet. Nonetheless, more research is needed to see if this 261 is representative of breads and other wholegrain products. This correlation suggests that, to 262 promote lower fat wholegrain options, products with a higher ratio should be chosen; 263 however, foods with a higher ratio provide fewer wholegrain benefits due to having less fibre 264 (8) 265

Even though breads meeting the criterion have a relatively good nutritional profile, the criterion does not account for the negative change to overall nutritional profile due to adding high fat or sugar ingredients such as butter or jam. This is supported by recommendations in international guidelines ⁽⁴¹⁾ and recent Public Health England recommendations ⁽¹⁴⁾ to avoid adding fats to starchy foods to prevent excess weight gain. Nonetheless, a small serving of butter or jam may not affect health benefits significantly whereas a larger serving could. This is pertinent because bread is normally eaten in a mixed meal which can affect its nutritional
properties, such as glycaemic index ⁽⁴²⁾, sometimes detracting from potential health benefits
of the wholegrain ingredients. Clearly, the utility of the wholegrain criterion is limited by its
inability to account for this.

276

277 Evaluation of the criterion in relation to breakfast cereals meeting the <10:1 ratio

There is no other research looking at this criterion in relation to UK breakfast cereals. There 278 is literature that looks at the nutritional composition of wholegrain breakfast cereals, albeit 279 280 defining whole grains differently, and these are considered here to assist the evaluation. The breakfast cereals meeting the criterion have low amounts of saturated fat and sodium (Table 281 2) which could contribute beneficially to the diet as the average intake of these nutrients in 282 the UK exceeds recommendations, contributing to poorer heart health ⁽²⁷⁾. This is supported 283 by a systematic review by Williams ⁽⁴³⁾ who found that those who eat wholegrain breakfast 284 cereals have a lower CVD and hypertension risk, partly due to reduced sodium intake. The 285 NDNS ⁽²⁷⁾ has also shown that breakfast cereals, on average, only contribute 1-2% of total 286 dietary sodium. This indicates that the saturated fat and sodium content of these breakfast 287 cereals corresponds with healthy eating recommendations ⁽²⁹⁾. As with breads meeting this 288 criterion, the medium fat content is not of concern as only 18% is saturated. The remaining 289 unsaturated fats contribute positively to the nutritional profile and may contribute to 290 improved cardiovascular outcomes ⁽⁴⁴⁾. 291

Research has shown that, in all age groups, in the UK and internationally, breakfast cereal consumption is associated with reduced overall fat intake ^(27,45), suggesting that the medium fat content of the breakfast cereals is unlikely to contribute to increased fat intake.

295 However, some breakfast cereals have a high sugar content which is detrimental to their overall nutritional profile ⁽⁴⁶⁾. Even though it is well-established that some breakfast cereals 296 are high in sugar, there is no evidence that those who eat them have a higher overall sugar 297 intake or are more likely to be overweight $^{(43,47)}$. This study showed the higher the 298 carbohydrate: fibre ratio, the higher the sugar content. This may be due to added sugar, listed 299 as an ingredient in 77% of the breakfast cereals, which contributes to the carbohydrate but not 300 the fibre content. This is supported by Williams ⁽⁴³⁾ who has discussed the presence of sugar 301 in breakfast cereals. However, there are many lower sugar breakfast cereals as the sugar 302

303 content of these products varied from 0.3 g to 31.4 g/100g. It could be argued that to make

304 the criterion a better tool, it should only be applied to breakfast cereals that have a $\leq 10:1$ ratio

and a medium or low amount of sugar (i.e. <15g/100g). Alternatively, promoting a lower 305

criterion could exclude high sugar cereals while providing more fibre as suggested by 306

Mozaffarian et al ⁽²³⁾. Furthermore, the UK food tables show that the carbohydrate:fibre ratio 307

of wholemeal flour is typically 6.5:1-7:1 ⁽³¹⁾ which is lower than the $\leq 10:1$ ratio suggested by 308 the American Heart Association ⁽¹⁶⁾. This may be further justification for a lower ratio to be

used in order to exclude foods with significant amounts of added sugars. Alternatively, for 310

breakfast cereals, carbohydrate:fibre:sugar ratio could be considered to provide a better 311

312 indication of the overall carbohydrate composition and sugar content.

309

As with bread meeting this criterion, in these breakfast cereals, as the carbohydrate:fibre ratio 313 decreases, fat content increases. This may be due to nuts and seeds which have high fibre and 314 fat content ⁽⁴⁰⁾ and was reflected in the results from this study where breakfast cereals with 315

fruit, nuts and/or seeds contained more energy, fat, saturated fat and sugar (Table 3). 316

317 Therefore, even though the fruit, nuts and/or seeds can provide benefit through their

contribution to micronutrient and phytosterol intake ^(48,49), the breakfast cereals containing 318

fruit, nuts and/or seeds had a poorer nutritional profile and, considering some may not have 319

320 met with $\leq 10:1$ criterion without the addition of fruit, nuts and/or seeds, they may have less

wholegrain benefits and hence less bioactive properties. Nonetheless, consuming breakfast 321

322 cereals with fruit, nuts and/or seeds would still be a good way of increasing the general

population's fibre intake which is an important public health message (27). However, if 323

consumers assumed all foods with a $\leq 10:1$ carbohydrate:fibre ratio contain whole grains, they 324

could be misled and choose products high in fruit, nuts and/or seeds but low in actual 325

326 wholegrain ingredients, especially as some ice-creams and fruit juices (both without whole

grains) meet this ratio. Another example is a supermarket own brand porridge pot where the 327

plain porridge did not meet the criterion but the same product with fruit, nuts and/or seeds 328

did. Confusion could be avoided by using clear front-of-pack labelling showing if there is 329

adequate fibre from whole grains to meet the criterion. This would also help consumers 330

identify products that are better for their health. Mozaffarian et al ⁽²³⁾ also supported 331

codifying the $\leq 10:1$ ratio to use it on front-of-pack labelling. 332

Furthermore, consideration needs to be given to the type of cereal. As whole wheat typically 333

has a low carbohydrate: fibre ratio (e.g. wholemeal wheat flour, code 11-889 = 6.9)⁽³¹⁾, this 334

criterion is likely to favour wheat-based foods, along with those with added fibre and rye 335

flour (rye flour, code 11-897 = 5.2)⁽³¹⁾. However, despite oats having a higher 336

carbohydrate:fibre ratio (porridge oats, code 11-788 = 9.1)⁽³¹⁾ research shows that, due to the presence of beta-glucans and avenanthramides amongst other bioactive components, there are more consistent results for the health benefits associated with their consumption⁽⁵⁰⁾. Clearly identifying the source of the whole grains as well as the carbohydrate:fibre ratio may enable consumers to better understand the overall nutritional value of the food.

Adding other ingredients to breakfast cereals post-purchase alters the carbohydrate:fibre 342 ratio, as with breads. Adding milk can alter the nutritional profile: 34% of products originally 343 meeting the criterion do not meet it after milk is added. The original premise of the criterion 344 is to capture the balance of whole grains in relation to sugars and refined grains ⁽²⁰⁾ but adding 345 milk detracts from this as lactose in milk increases the ratio. This may look like a drawback 346 of the criterion. However, adding milk helps meet calcium, protein and vitamin B 347 requirements ⁽⁵¹⁾. Lactose also enhances calcium and magnesium absorption while having a 348 low glycaemic index and carcinogenicity ⁽⁵²⁾. Therefore, even though adding milk to 349 wholegrain breakfast cereals can result in the meal exceeding the $\leq 10:1$ ratio, it can be argued 350 351 that the nutrition that milk provides is more important, especially as it does not detract from the benefits of wholegrain ingredients. Adding other ingredients, such as sugar, is different 352 and could detract from the wholegrain ingredients ⁽⁷⁾. While this is a limitation of the 353 criterion, it may not be worth altering it for this reason. Instead, a separate public health 354 campaign that encourages reducing sugar intake, such as Change4Life's Sugar Smart⁽⁵³⁾, 355 could mitigate this. 356

357

358 *Limitations*

359 This study included only breads and breakfast cereals. Other grain-based foods could be assessed such as pasta and foods aimed at children aged less than 4 years and evaluating these 360 361 would contribute to a more comprehensive evaluation of how widely the criterion could be applied. Furthermore, foods from other retailers could have been included as 21% of the UK 362 population do not shop at the supermarkets surveyed ⁽²⁸⁾ so there may be products that were 363 not analysed. There are also nutritional components that affect health that are not included on 364 365 food packaging which could have extended the evaluation, for example, trans-fats or the extent of processing. In addition, the effect of portion size when discussing nutritional 366 content of foods has not been considered. Looking at nutrients per 100 g enables medians to 367 be calculated and compared with the FSA standards but this does not account for the portion 368

someone might eat. The FSA standards themselves were designed to inform consumers rather
 than assess food products and have limitations as a tool ⁽⁵⁴⁾.

In an attempt to discuss the possible health implications of foods meeting this criterion, some 371 inevitable generalisations may have been made regarding the effects of the nutritional 372 composition of wholegrain ingredients or foods on health - these associations are not always 373 straightforward or predictable⁽⁵⁵⁾. Another significant limitation is the unavoidable 374 subjectivity when judging health quality. While the authors may consider a medium amount 375 of fat, saturated fat, sugar or sodium to represent a relatively healthy food, others may 376 disagree. This indicates the importance of considering the whole diet rather than single 377 components in isolation. 378

379

380 *Future recommendations*

As this is the first study of its kind, more research is needed before steps can be taken 381 towards using this criterion. It would be useful to repeat the research comparing it with 382 similar products with a >10:1 ratio. This would also provide an opportunity to compare the 383 price of foods that meet the criterion with those that do not to explore the cost of foods that 384 meet this criterion and how this could affect sales and intake. The research could also be 385 386 completed while comparing the nutritional content of the foods to a different nutrient profiling model. This would improve understanding of how useful the criterion is in 387 388 identifying healthier foods. An investigation into the contribution of fruit, nuts and seeds to 389 products meeting the criterion would also be useful so decisions can be made about whether products with fruit, nuts and seeds should be included. In addition, more research could be 390 391 conducted to determine if a different ratio (for example, \leq 7:1) should be used to promote products with less fat or sugar. This could help meet other public health goals. However, a 392 393 disadvantage of using a criterion other than $\leq 10:1$ is that it may be more difficult for 394 consumers to work out from food labels if a product meets the wholegrain criterion. It is also 395 important to explore whether consumers would understand how to identify wholegrain foods using this criterion and if not, how it could be adapted. Nonetheless, this $\leq 10:1$ criterion has 396 397 potential as a standardised definition for wholegrain foods.

- 398
- 399
- 400

401 *Conclusions*

- 402 This study furthers understanding of the $\leq 10:1$ carbohydrate:fibre wholegrain criterion and its
- potential implementation by reporting that foods meeting the $\leq 10:1$ criterion are relatively
- 404 healthy when assessed using the FSA nutrient profiling standards as a benchmark; the main
- 405 exception being the sugar content of breakfast cereals. The utility of the criterion is its
- 406 potential to offer a standardised approach to the classification of wholegrain breads and
- 407 breakfast cereals which relates to their nutrient content and thus potentially contributing to
- 408 efforts to increase wholegrain intake $^{(20,21,56)}$.

Table 1: Food Standard Agency nutrient profiling categories for high, *medium* and <u>low</u> amounts of nutrients per 100g respectively including salt re-calculated as sodium as described in the method ⁽²⁵⁾.

Level	Fat (g/100g)	Saturated Fat (g/100g)	Sugar (g/100g)	Sodium (g/100g)
Low	<u><3.0</u>	<u><1.5</u>	<u><5.0</u>	<u><0.1</u>
Medium	3.0-20.0	1.5-5.0	5-15.0	0.1-0.6
High	>20.0	>5	>15.0	>0.6

Table 2: Energy and nutrient content per 100g of breads and breakfast cereals meeting the \leq 10:1 wholegrain criterion. Values classified as high, *medium* and <u>low</u> amounts of nutrients per 100g respectively, following Food Standards Agency nutrient profiling categories ⁽²⁹⁾.

Food Group	Carbohydrate	Fibre	Carbohydrate: Fibre	Energy (kJ/	Fat	Saturated Fat	Sugar	Sodium
	(g/100g)	(g/100g)	ratio	100g)	(g/100g)	(g/100g)	(g/100g)	(g/100g)
Breads (n=162)								
25 th Quartile	37.00	5.38	5.29	981.00	<u>2.40</u>	<u>0.40</u>	<u>2.60</u>	0.88
Median	39.75	6.45	6.18	1032.50	3.50	<u>0.56</u>	<u>3.20</u>	0.93
75 th Quartile	43.25	7.10	7.79	1159.25	6.75	<u>1.03</u>	<u>4.20</u>	1.00
Breakfast Cereals								
(n=266)								
25 th Quartile	60.08	7.70	6.75	1518.75	<u>2.50</u>	<u>0.60</u>	13.75	<u>0.03</u>
Median	66.00	8.50	7.57	1572.50	6.20	<u>1.10</u>	18.40	<u>0.13</u>
75 th Quartile	69.68	9.70	8.86	1682.50	9.50	1.85	22.13	0.45

Table 3: Median content of carbohydrate, fibre, carbohydrate: fibre ratio, sugar, sodium, energy, fat and saturated fat for breads with seeds, breakfast cereals with and without fruit, nuts and/or seeds

Subgroups	Carbohydrate (g/100g)	Fibre (g/100g)	Carbohydrate: Fibre ratio	Energy	Fat	Saturated fat (g/100g)	Sugar (g/100g)	Sodium (g/100g)
				(kJ/100g)	(g/100g)			
Breads								
Bread containing seeds (n=60)	38.40	6.70	5.76	1165.00	7.30*	0.90	3.20	0.37
Bread not containing seeds	40.50	6.35	6.12	1005.00	2.60*	0.40	3.20	0.94
(n=102)								
P value†	0.026	0.323	0.212	< 0.0005	< 0.0005	< 0.0005	0.996	0.883
Breakfast cereals								
Breakfast cereals containing	64.45	7.58	7.66	1601.50	7.55	1.20	20.05	0.10
fruit, nuts ± seeds (n=138)								
Breakfast cereals without fruit,	68.50	8.80	7.66	1564.50	3.70	0.85	16.00	0.24
nuts ± seeds (n =128)								
P value‡	0.001	0.093	0.713	0.002	< 0.0005	< 0.0005	< 0.0005	< 0.0005

* The only difference in Food Standards Agency categories ⁽²⁹⁾ between subgroups is in fat content with seeded and non-seeded breads: seeded breads having medium fat and non-seeded breads having low fat.

[†]P values obtained by comparing nutrients in breads with seeds and without seeds using the independent samples median test.

‡P values obtained by comparing nutrients in breakfast cereals containing fruit, nuts and seeds with those that did not using the independent samples median test.

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