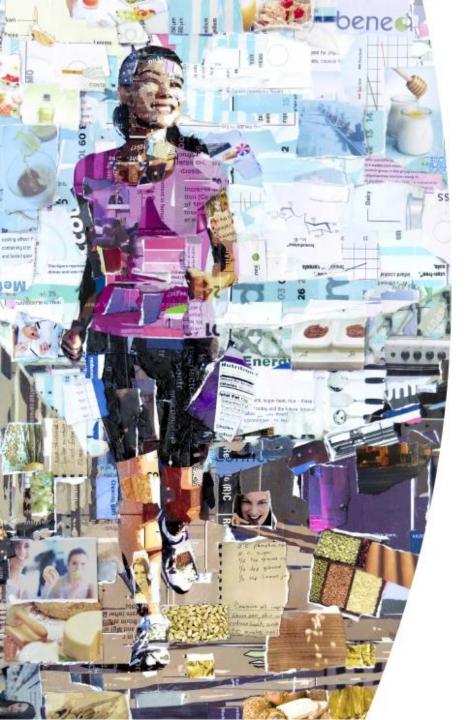


BENEO-Institute

A brief summary of our nutrition related educational activities
May 2015 – July 2016





Together

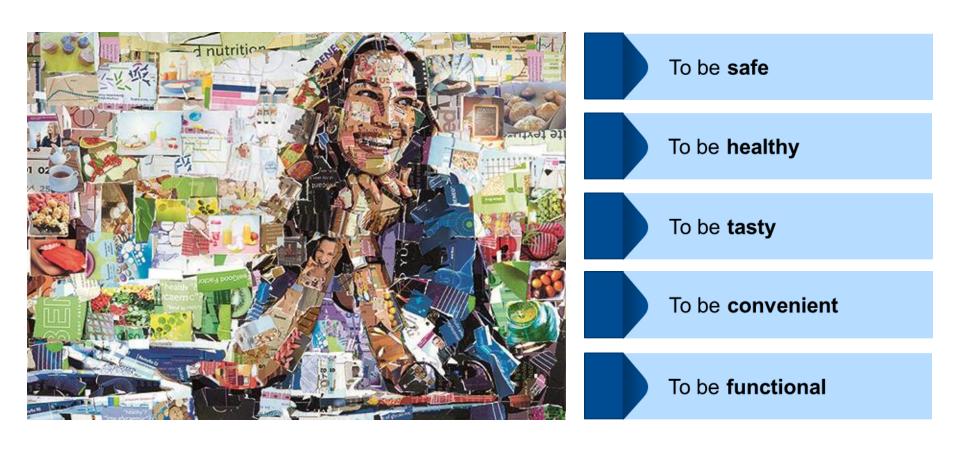
we contribute to better nutrition

and health

Matching today's expectations



What do consumers expect from nutrition today?



Discovering our range of nutrients and benefits



Products

Functional fibres

Functional carbohydrates

Specialty rice ingredients

Functional proteins

Natural sources

Chicory root



Sugar beet



Rice



Wheat



Benefits

- Digestive health
- · Fibre enrichment
- Better calcium absorption
- Weight management
- Fat & sugar replacement

- · Low glycaemic effect
- Prolonged energy
- Toothfriendly
- Weight management
- Sugar replacement

- Clean label
- Creaminess, crispiness
- Enhanced viscosity
- Tasty dairy substitution

- Vegetable protein source
- · Improved performance
- · Better texture stability
- High and reliable quality
- Non-GMO
- Neutral taste

New scientific research, presented at: 48th ESPGHAN-Congress, Amsterdam, May 2015





New scientific research, presented at: 48th ESPGHAN-Congress, Amsterdam, May 2015



Effects of a follow-on formula with a lowglycaemic index: double blind randomized trial

"AMELIE" – Acceptance and Metabolism of Isomaltulose

@ LMU, Munich, Germany (PI: Prof. Dr. Berthold Koletzko)





PO-N-047

EFFECTS OF A FOLLOW-ON FORMULA WITH A LOW-GLYCAEMIC INDEX: DOUBLE BLIND RANDOMIZED TRIAL

M. Fleddermann¹, A. Rauh-Pfeiffer ¹, H. Demmelmair¹, L. Holdt², D. Teupser² and B. Koletzko¹ Division of Metabolic and Nutritional Medicine, Dr. von Hauner Children's Hospital, University of Munich, Munich, Germany

² Institute for Laboratory Medicine, University of Munich, Munich, Germany

Objectives and Study

Formula fed infants have been reported to show higher postprandial glucose and insulin responses than breastfed infants, which may be related to greater fat deposition and an increased later risk of obesity. Therefore, effects of the glycaemic load of the meal on plasma glucose and insulin during the postprandial tolerance, and the effect on postprandial glycaemia and insulinaemia of a follow-on formula with a reduced glycaemic index.

Methods Healthy term infants aged 4 to 8 completed months (n=50, Figure 1) were randomized double blind to receive for 4 weeks a low glycaemic (IF) or conventional follow-on Table 1). Anthropometry, dietary intake, sleep patterns and tolerance parameter were assessed. On day 29 urine and capillary blood 60min after start of feeding (100-120mL formula) were obtained.



Table 1: Composition of study formulae



Figure 1: CONSORT statement

The subjects in both formula groups were similar regarding demographic data. Both formulae were well accepted without significant differences in time of crying, flatulence stool characteristic and the occurrence of adverse events. Capillary blood results are presented in Table 2. Energy intake from formula, amount of complementary feeding and rating of meals adjusted for infant age were not different between both groups. Anthropometric data adjusted for the respective anthropometric baseline value and age was not statistically different between groups. Urinary c-peptide/creatinine ratio did not differ after adjustment for infant age (IF 81.5 (44.7, 96.0) vs. CF 56.8 (37.5, 129), p=0.43).

	IF		CF			IF vs. CF	Estimated difference		
	Median	IQR	Median	ı IQ	R	p value	at study end 2		
Glucose (mg/dL)	122	(105; 140)	111	(100;	123)	0.048	-15.8 (-26.8, -4.76); p= 0.006		
Insulin (µIU/mL)	8.66	(5.85; 11.9)	8.27	(5.72;	9.76)	0.39	-2.60 (-5.75, 0.55); p=0.10		
HbA1c (%)	4.90	(4.70; 5.15)	4.90	(4.80;	5.20)	0.96	0.06 (-0.16, 0.27); p=0.60		
	itney test,	P<0.05). Deriv					ntional formula (CF, n=21) ¹ Significant and time for drinking/ volume of meal		

Table 2: Capillary postprandial glucose, insulin and HbA1c

Conclusions

Follow-on formula containing isomaltulose (Palatinose™) was accepted very well. Postprandial differences were not observed from the single time-point blood analysis. The peak of blood glucose might be earlier in infants aged 4 to 8 completed months than 60min after start of feeding. Blood withdrawal at a single time point limits the conclusions that can be drawn for metabolic differences intake of infants aged 4 to 8 completed months.

The presented data is part of a PhD thesis accomplished by Mania Fleddermann at the Medical Faculty of the Ludwigs-Maximilian rsity of Munich. No conflict of interest is declared by all authors. Contact: manja.fleddermann@med.uni-muenchen.de. This study was funded by BENEO Group, Germany, and supplied the respective formulae. BENEO, a member of the Suedzucker Group, reserves the exclusive right to use the results and data for possible Health Claim requests. Further, the research leading to these results was part EARLYNUTRITION of the European Union's Seventh Framework Programme (FP7/2007-2013), project EarlyNutrition under grant agreement n'289346.



New scientific research, presented at: 48th ESPGHAN-Congress, Amsterdam, May 2015



The Use Of Inulin-type Fructans Improves Stool Consistency In

Constipated Children. A Pilot Study.

ESPGHAN2015-1454

The Use Of Inulin-type Fructans Improves Stool Consistency In Constipated Children. A Pilot Study.

Ferre N¹, Escribano J¹, Castillejo G¹, Luque V* ¹, Mariona Gispert¹, Marta Zaragoza-Jordana¹, Carme Rublo-Torrents 1, Stephan Thels², Ricardo Closa¹ ¹Universitat Rovira i Virgili, Reus, Spain, ²BeneoGMb, Mannheim, Germany

ESPGHAN 48th ANNUAL MEETING of the European Society for Paediatric Gastroenterology, Hepatology and Nutrition

Conclusions

Prebiotic inulin - type fructans improves the stool consistency in functionally constipated 2-5 y-old children.

ntroduction

Functional constipation is one of the most common gastrointestinal complaints in children (1-2). The treatment is long lasting and more than 30% still having problems beyond puberty probably because most of the therapeutic approaches are not clearly effective (3). Moreover there are few studies on a particular intervention, especially in the age range 2-5 years. Prebiotics are considered as a new option to treat constipation in children (4). Our aim was testing the beneficial offerer of a daily depend of creeks

effects of a daily dose of Orafti inulin - type fructans supplementation on 2 - 5 years-old constipated children in a Pilot study.

	Placebo	INULIN	
	N=9	N=8	
Gender, N males (%)	2 (22)	6 (75)*	
	Mean (SD)	Mean (SD)	
Age at start (years)	4.03 (0.79)	3.72	
Weight at start (kg)	15.98 (1.65)	16.37	
Stool frequency (stools/week)	5.73 (3.03)	3.33 (1.74)	
Stool consistency (adapted Bristol scale, from 1 to 5)	1.74 (0.54)	2.19 (0.55)	
Pain during defecation (Faeces scale, from 0 to 10)	3.92 (2.56)	6.00 (2.89)	
Met the inclusion criteri	a of:		
Low frequency (1-3 stools/week), N (%)	6 (67)	6 (75)	
Pain during defecation, N (%)	9 (100)	6 (75)	
Previous history of stools retention, N (%)	8 (89)	3 (43)†	
Family history of constipation	2 (40)	2 (29)	

UNIVERSITAT ROVIRA I VIRGILI

Results

Eleven children in each study group were recruited (n=22). From those, 17 completed the study protocol without any exclusion criteria. Results showed that Orafti inulin - type fructans supplemented children showed softer stools compared to control group (p=0.003). The longitudinal analyses showed that whereas no significant changes were induced in controls, treated children softened their stool consistency after the intervention (p=0.040). Pain during defecation was reduced during intervention irrespectively of the study group.

Methods

Double - blind, randomized, placebo - controlled parallel group trial, where 2 - 5 y - old constipated children (according to Rome III Criteria) received 2 daily doses of 2g/d Orafti inulin - type fructans or the same amount of placebo (maltodextrin) during 6 weeks. Primary outcome was stool consistency assessed by a continuous daily bowel symptoms diary. Secondary outcomes were: stool frequency and gastrointestinal symptoms. Dietary intake as well as use of drugs or other products affecting gastrointestinal was

References

of functional constipation. Eur J Pediatr. 2011, 170(8):955-6. Promic constipation in children. BMJ. 2006;331(877):1051-5. 3. Pippers MAM, et al. Functional constipation in children: a systematic review on prognosis and predictive factors. J. Pediatr. Gastroenterol. Natr. 2010;50(3):255-68. 4. Sabater-Moliam M, et al. Oistern functionigoscacharides

Conclusions

Prebiotic inulin - type fructans improves the stool consistency in functionally constipated 2-5 y-old children.

Figure 1: Gastrointestinal symptoms by time period and study group







Placebo

• Inulin-supplemented formula

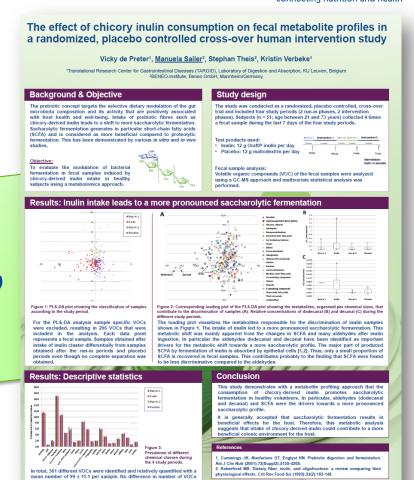
Disclosure of Interest: N. Ferre: None Declared, J. Escribano: None Declared, G. Castillejo: Non Declared, V. Luque: None Declared, M. Gispert None Declared, M. Zaragoza-Jordana: None Declared, C. Rubio-Torrents: None Declared, S. Theis Conflict with: Promoter employee, R. Closa: None Declared

4th Beneficial Microbes Conference, The Hague, March 2015





"The effect of chicory inulin consumption on fecal metabolite profiles in a randomized, placebo controlled cross-over human intervention study"



per sample (99 ± 11.1) was found between the different intake periods. 65 VOCs were sample specific and 30 VOCs were present in all samples. All VOCs were categorized into chemical classes. Most abundant VOCs

were aldehydes, alcohols and benzene derivatives. No differences were

BCFA, branched-chain fatty acids; GC-MS, gas chromatography mass spectrometry MCFA, medium-chain fatty acids; PLS-DA, partial least square discriminant analysis

SCFA, short-chain fatty acids. VOC, volatile organic compounds



Events & Speeches

ASIA



30th Scientific Conference - Nutrition Society of Malaysia, Kuala Lumpur, June 2015 bene€



Int. Symposium of Food & Nutrition (ISFAN) Jakarta, June 2015

16061 p. ASO-IFSAN Indonesia 03.06





31st Scientific Conference Nutrition Society of Malaysia, 31st May – 1st June 2016, Kuala Lumpur





"Better Nutrition, Healthier Malaysians"

Eat smart – Steer your metabolic and digestive health with science-based ingredients

Goh Peen Ern

Manager Nutrition Communication, BENEO Institute, BENEO

Asia-Pacific





EVENTS:

S. AMERICA & MEXICO

SLAN 2015

XVII Congress of the Federation of Latin American Nutrition Societies Dominican Republic, 8th - 12th Nov. 2015





Sociedad Latinoamericana de Nutrición

BENEO Symposium:

"Digestive Health: more important than ever"

Chaired by: Prof. Angela Zuleta (University of Buenos Aires)

Monica Montani (BENEO Latin America, Brazil):

Introduction to BENEO Institute & "BENEO Orafti chicory root fibres"

origin, production, application"

Prof. Closa Monasterolo (Hospital Universitari Joan XXIII, Tarragona):

"Prebiotic inulin type fructans as bioactive components in paediatrics:

benefits for digestive health and function"

Christiaan Kalk (BENEO-Institute):

"Chicory fibre and support of bowel regularity"

Symposium by Prof. Angela Zuleta

"Carbohydrates: A nutritional look, strategies for incorporation into a healthy diet"

Christiaan Kalk:

"Isomaltulose: nutritional and metabolic effects"



EVENTS: USA & CANADA



33rd International Symposium on Diabetes and **Nutrition, Toronto**



DNSG 2015 33rd International Symposium on Diabetes and Nutrition

FRIDAY,	JUNE	12TH
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PREBIOTICS AND NOVEL 8:30-10:20

CARBOHYDRATE INGREDIENTS IN

DIABETES

Chairs: Angela Rivellese & Dario Rahelic

8:30-8:50 Slowly and rapidly absorbed

carbohydrates on postprandial metabolism in type 2 diabetes

(Thomas Linn, Germany)

8:50-9:10 Metabolic benefits of prebiotic fibre intake

(Raylene Reimer, Canada)

9:10-9:30 Achieving low glycaemic response diets within

food-based approaches to healthy eating

(Geoffrey Livesey, United Kingdom)

Oral Abstract 11 - Lowering Glucose and Insulin 9:30-9:40

Responses to a Starchy Staple: From Formulation to Flux (David Mela, Netherlands)

Panel Discussion 9:40-10:00

(Thomas Linn, Raylene Reimer, Geoffrev

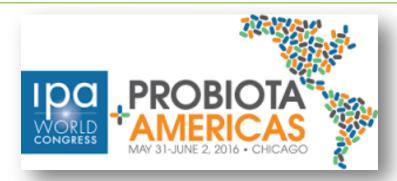
Livesey, David Mela)





Probiota Americas, 31.05.-02.06.2016, Chicago





Sponsored speech by Prof. Bob Rastall, University of Reading, UK on:

"Prebiotic manipulation of the gut microbiome and metabolome:

is this a health benefit"



Prebiotic modulation of the gut microbiome and metabolome: is this a health benefit?

Professor Bob Rastall
Department of Food and Nutritional Sciences
The University of Reading





EVENTS: **EUROPE**



6th Dietary Fibre Conference, Paris 2015





1 - 3 June 2015, Paris, France

What's new on prebiotic fibres - some snapshots

Stephan Theis

Beneo. DE

Email: Stephan.Theis@beneo.com

The role of dietary fibres in health maintenance is well acknowledged and attributed to several physiological effects such as blood lipids reduction, attenuation of postprandial blood glucose and insulin response, bowel regularity and colonic fermentation. Inulin-type fructans are established dietary fibres that contribute to these fibre effects and help to fill the gap between daily intake and dietary recommendations. Apart from their fibre function they have been shown to be effective prebiotics, i.e. they are "selectively fermented ingredients that result in specific changes in the composition and/or activity of the gastrointestinal microbiota, thus conferring benefits upon host health". The prebiotic effect is now a well-established scientific fact. Inulin-type fructans are amongst the best studied prebiotics, and are amongst the very few that are accepted as "proven" prebiotic fibers. Since the concept was first defined it has been subject of intensive research, and prebiotic research has continued at a rapid pace with more than 1000 research articles published over the past 5 years. Recent health-related research beyond the effects of prebiotic fibers on the gut ecosystem and digestive health includes the effects on energy intake and body weight management, metabolic benefits and improvements in obesity related disorders. This presentation will highlight the latest evidence from novel systematic reviews, human intervention studies as well as mechanistic investigations that continue to support the benefits of inulin-type fructans as fermentable prebiotic fibers.

Keywords: Inulin-type fructans, Fermentation, Prebiotic, Dietary fibre.



12th European Nutrition Conference FENS 2015 — Berlin — Germany — Oct. 20-23



BENEO SYMPOSIUM

ABSTRACT BOOK

12th European Nutrition Conference – FENS 2015

ESTREL CONVENTION CENTER | BERLIN | GERMANY | 20 - 23 OCTOBER 2015



SATELLITE SYMPOSIUM

Slow release carbohydrates and prebiotic fibres: smart ingredients for balanced blood sugar levels

Chairs:

Prof. Jeyakumar Henry & Dr. Stephan Theis

Thursday, 22 October 2015 Room 3 – Ground Floor





Prof. Jeyakumar Henry

The role of low glycemic diets on physiological and metabolic outcomes

Prof. Andreas Pfeiffer

Metabolic benefits of Palatinose™ related to gut hormone induced metabolic responses





Prof. Patrice D. Cani

How prebiotic fibres work in gut microbiota, glucose metabolism and metabolic disorders

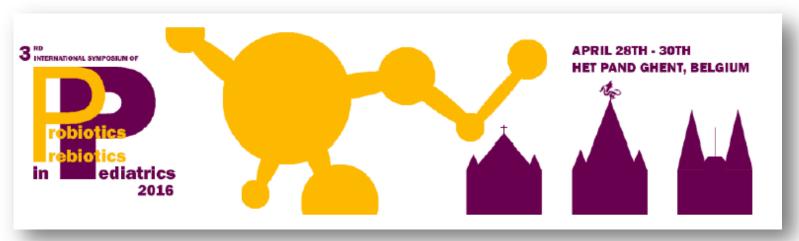


Knowledge to connect nutrition and health



PreProPed *, Ghent, 28th-30th April 2016





Sponsored speech given by Dr. Kieran Tuohy, Edmund Mach Foundation, Italy:

"Mode of delivery, route of delivery and diet – all regulate infant microbiota and metabolome"

Annual Meeting: ESPGHAN*, 25th-28th May, Athens





of the European Society for Paediatric Gastroenterology, Hepatology and Nutrition

Effect of prebiotic inulin-type fructans on health parameters and intestinal microbiota composition in children aged 3 to 6 years; a randomized, double-blind, placebo-controlled explorative study

Szimonetta Lohner¹, Nóra Szili¹, Viktória Jakobik¹, Dorottya Soltész¹, Sara Soldi², Sotirios Vasileiadis², Stephan Theis³, Carolin Sieland³, Günther Boehm⁴, <u>Tamás Decsi</u>¹

¹University of Pécs, Department of Paediatrics, Pecs, Hungary

²Advanced Analytical Technologies Srl, Fiorenzuola D'arda, Italy

3Beneo-Institute, Obrigheim, Germany

⁴Nutritional Science Consulting, Leipzig, Germany,

Prof. Dr. T. Decsi, University of Pécs, Hungary presented the results of a study supported by BENEO



Probiotics and prebiotcs, 21.-23.06.2016, Budapest





Bob Rastall - chair, Professor of Food Biotechnology in the Department of Food Biosciences, University of Reading, UK:



"Prebiotic Manipulation of the Human Gut Microbiome for Health"

Manuela Sailer, BENEO-Institute:

"Snapshots on Recent Prebiotic Fiber Research"



34th International Symposium on Diabetes and Nutrition, 29.6.-01.07.2016, Prague





Art. 13(5) EU dossier on inulin and normal bowel function: acceptance by EFSA





EFSA Journal 2015;13(1):3951

SCIENTIFIC OPINION

Scientific Opinion on the substantiation of a health claim related to "native chicory inulin" and maintenance of normal defecation by increasing stool frequency pursuant to Article 13.5 of Regulation (EC) No 1924/2006¹

EFSA Panel on Dietetic Products, Nutrition and Allergies (NDA)²

European Food Safety Authority (EFSA), Parma, Italy

ABSTRACT

Following an application from BENEO-Orafti S.A., submitted pursuant to Article 13.5 of Regulation

Orafti®inulin & normal bowel function – approved claim



"Chicory inulin contributes to normal bowel function by increasing stool frequency."

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EU Register on nutrition and health claims



connecting nutrition and health



EU Register on nutrition and health claims

Health claims for which protection of proprietary data has been granted

Claim type	Nutrient, substance, food or food category	Claim	Conditions of use of the claim / Restrictions of use / Reasons for non-authorisation	EFSA opinion reference	Commission regulation	Restriction of use for the benefit of	Expiry date of the restriction of use
<u>Art.13(5)</u>	Native chicory inulin	normal bowel function by increasing stool frequency	Information shall be provided to the consumer that the beneficial effect is obtained with a daily intake of 12 g chicory inulin. The claim can be used only for food which provides at least a daily intake of 12 g of native chicory inulin, a non-fractionated mixture of monosaccharides (< 10 %), disaccharides, inulin-type fructans and inulin extracted from chicory, with a mean degree of polymerisarion \ge or = 9.		Commission Regulation (EU) 2015/2314 of 07/12/2015	BENEO-Orafti S.A Rue L. Maréchal 1 Oreye 4360 BELGIUM	01/01/2021

Footnotes

(1) By letter of 31 December 2013, the Commission has been informed that GlaxoSmithKline Services Unlimited (GSK House, 980 Great West Road, Brentford TW89GS, UNITED KINGDOM) has agreed to transfer all rights it has to use (and to permit others to use) the health claim based fibena Suntory Limited (2 Longwalk Road, Stockley Park, Uxbridge UB11 18A, UNITED KINGDOM), and, from the date of that letter, consents to and authorises the use by Lucozade Ribena Suntory Limited and its affiliates of the health claim based on the proprietary data filed by GlaxoSmithKline Services Unlimited

Report Notes:

Health claims for which protection of proprietary data is granted, are authorised for the restricted use of the applicant for a period of five years after the entry into force of the relevant legal act. At the expiry of the five-year period, this restriction should be removed so that the health claim may be used, in conformity with the conditions applying to it, by any food business operator. Such authorisations of claims for the restricted use of the applicant, do not exclude the authorisation of the same claims in case they are based on data and studies other than those for which protection of proprietary data has been granted in accordance with Article 21 of Regulation (EC) No 1924/2006.

Reduced blood glucose response

Positive EFSA Opinion







EFSA Journal 2014;12(1):3513

SCIENTIFIC OPINION

conducted by BENEO

Scientific Opinion on the substantiation of a health claim related to non-digestible carbohydrates and a reduction of post-prandial glycaemic responses pursuant to Article 13(5) of Regulation (EC) No 1924/2006¹

EFSA Panel on Dietetic Products, Nutrition and Allergies (NDA)^{2,3}

European Food Safety Authority (EFSA), Parma, Italy



ABSTRACT

Following an application from Beneo-Orafti SA, Sensus BV and Cosucra-Groupe Warcoing SA, submitted for authorisation of a health claim pursuant to Article 13(5) of Regulation (EC) No 1924/2006 via the Competent

The food that is the subject of the health claim is fructo-oligosaccharides (FOS, oligofructose) obtained from chicory (*Cichorium intybus* L.) inulin, which should replace sugars in foods or beverages in order to obtain the claimed effect (i.e. reduction of post-prandial glycaemic responses).



Positive EFSA claims opinion on Oligofructose and Inulin & Lower Blood Glucose Rise



- The original Art. 13(5) application was only related to "oligofructose from chicory inulin" whereas EFSA has broadened in its opinion the scope to all "non-digestible carbohydrates", thus the opinion is also relevant for Orafti[®]inulin.
- Suggested claims wording by EFSA (ON 3513):
 - "Consumption of foods/drinks containing non-digestible carbohydrates instead of sugars induces a lower blood glucose rise after meals compared to sugar-containing foods/drinks"
- The claim could be used on food products of all food categories of the general food supply
- Suggested conditions of use by EFSA:
 - "At least 30% of the sugars in a food product have to be replaced by Orafti®oligofructose or Orafti®inulin."

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Reducing the blood glucose response of sugarcontaining foods with inulin and oligofructose



