Gluten in "gluten-free" manufactured foods in Australia: a cross-sectional study

To the Editor: Recent Australian surveys of gluten content in gluten-free labelled foods purchased from supermarkets or restaurants are reminders of the difficulties faced by patients with coeliac disease.[1–3] Despite trying to adhere to a gluten-free diet, significant inadvertent gluten exposure is common, leaving about 30% of patients with incomplete intestinal mucosal healing.[4,5]

In Australia, a "no detectable gluten" standard applies to food labelled gluten-free. However, surveys published in the Journal reported detectable gluten in 14% of imported gluten-free foods (0.5–1.1 parts per million [ppm]),[2] in 9% of gluten-free marketed restaurant foods in Melbourne (5.2 to > 80 ppm),[3] and in 2.7% of "commonly purchased" gluten-free foods (5–49 ppm), including foods manufactured in dedicated gluten-free factories.[1]

The governance of the compliance with the gluten-free food code is unsatisfactory; the testing of gluten-free foods is done by the food industry. Despite a multilayered food code bureaucracy, there is no federal or state oversight of testing, and test results are not published. State authorities have not investigated the non-compliance reported for imported gluten-free foods in 2016.[2] Local governments are responsible for implementing state food laws, yet, they cannot coordinate oversight of gluten testing nationally. The federal Department of Agriculture and Water Resources is responsible for imported foods, but there is no evidence they test gluten-free foods imported from jurisdictions that permit up to 20 ppm gluten. The Australian Competition and Consumer Commission is responsible for the Australian Consumer Law, and Food Standards Australia and New Zealand establishes the food code standard; however, there has been no indication by either agency that they consider the problems with the gluten-free standard or its governance a sufficient public health issue to warrant changes to current practices.

Inadvertent gluten exposure may occur by cross-contamination from known gluten-containing foods, or from foods considered free of gluten by listed ingredients but not labelled gluten-free. The very least that patients with coeliac disease should expect is negligible additional contamination from foods that are labelled gluten-free. Transparent testing of gluten-free labelled foods is therefore critical. It is unlikely that the government will implement regular testing programs in place of the current ad hoc and unreported industry-based testing. However, mandating the regular publication of laboratory test results is a simple measure to reassure consumers with coeliac disease, and would likely be a positive initiative for local gluten-free food exporters seeking to take international advantage of the tight Australian gluten-free standard.

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