

ISSCD Committee – terms of reference

Gluten Safety and Standards Committee (GSSC)

The Gluten Safety and Standards Committee (GSSC) is established to address the evolving landscape of gluten safety thresholds in the context of celiac disease and gluten mediated disease. Celiac disease management relies on strict adherence to a gluten free diet, making the regulation and testing of gluten in food crucial for patient long term health. Gluten challenge has a role in celiac disease diagnosis and an emerging role in clinical trials of novel drug therapies but lacks standardized approaches. Recent advances in immune biomarkers potentially simplify studies informing standards for safe gluten exposure in celiac disease, while advances in analytical chemistry and immunology allow precise measurement of gluten peptides responsible for gluten immunity in celiac disease. These developments provide new opportunities for food scientists and the food industry as well as for diagnostics and biopharmaceutical companies and may necessitate revision of food standards related to gluten.

Recognising the potential to improve food security and for the development of new applications of gluten in diagnosis and treatment of celiac disease, the ISSCD Board approved the establishment of a standing Committee to be known as the Gluten Safety and Standards Committee (GSSC) on 15 May 2024.

The ISSCD Board will appoint the Chair/Co-chairs who, along with the ISSCD Board, will convene a committee of experts with broad clinical, scientific, analytical chemistry, food technology, industry and regulatory expertise in all aspects of gluten and gluten free diet relevant to patients with celiac disease and gluten mediated human diseases.

Role

The role of the Committee is to advance the ISSCD's Objectives (ISSCD Statutes Section 2.1 and 2.2) in relation to (1) improving the quality of research in the field of celiac disease and gluten mediated human diseases; (2) improving the quality of care provided to patients affected by gluten mediated human diseases; (3) collaborating with patient support groups and other parties seeking to improve the lives of people suffering from celiac disease and gluten mediated diseases; and (4) improving the interaction with policymakers and with the relevant industry. This includes providing evidence based recommendations to regulatory bodies and industry stakeholders regarding gluten food safety standards and thresholds.

Remit

Specifically, the Committee will:

- Identify weaknesses and promote global strategies to improve:
 - Quality of evidence supporting food standards relating to safe amounts of gluten exposure in celiac disease.
 - Methodologies to reliably measure gluten from wheat, rye and barley in food
 - Methodologies to reliably assess gluten toxicity in patients affected by celiac disease and gluten mediated diseases
 - Methodologies to assess toxicity of cereals (e.g. oats) and foods that might be included in a gluten free diet for patients affected by celiac disease and gluten mediated diseases
 - Standardization of gluten format, preparation and administration for use in food challenges to support patient diagnosis, in clinical trials or other applications.

- Standardization of gluten challenge protocols to support diagnosis, in clinical trials or other applications
- Promote scientific evidence to support decision making by government regulatory authorities, food industry and other bodies considering safe gluten levels in food for patients affected by celiac disease and gluten mediated human diseases
- Promote visibility with food regulatory bodies including but not limited to Codex (FAO/WHO), US Food and Drug Administration (FDA), European Food Safety Authority (EFSA), the UK's Food Standards Agency (FSA), Health Canada and Food Standards Australia New Zealand (FSANZ) and support evidence based recommendations
- Promote scientific evidence to support safety of the gluten free diet, including defining a safe level of gluten intake, cross contamination, food labelling, gluten free certification, hospitality education and other issues impacting patient safety
- Liaise with patient support associations and advocacy groups and relevant professional groups (e.g. dietitians, food technologists and analytical chemists) regarding safe gluten thresholds in food
- Recommend relevant topics and speakers to the ICDS Committee.
- Interact with other ISSCD Committees.
- Provide content for the ISSCD website, e-newsletters and social media channels

Membership

Members are:

- The ISSCD Board will appoint the Chair/co-Chairs of the Committee.
- The Committee members would be appointed by the Chair/co-Chairs and the ISSCD Board.
- The Committee will be composed of about eight members, including the Chair/co-Chairs, but may be enlarged by agreement with the ISSCD Board
- Members will represent diverse expertise areas, including clinical, scientific, food technology, regulatory, and patient advocacy. The selection process will prioritize individuals with proven experience and contributions to the field and will focus on supporting global representation to reflect the current varied approach to this field, from across the globe.

In attendance shall be:

- The Chair and Committee members
- ISSCD Board Members may attend the meeting as required
- Ad hoc appointees
- ISSCD administrators may attend the meeting as required

Meetings

The Committee will meet at least four times a year. The Committee may meet additionally to discuss specific issues at the request of the Chair. The Committee will report at least annually to the ISSCD Board. Meetings will be held online, except for meetings during the ICDS or other conferences. Notes and actions from meetings will be minuted.

Selection process

ISSCD members will be notified of Committee vacancies on the ISSCD website and/or by other electronic means. Expressions of interest for Committee membership will be reviewed by the Chairperson who will provide their recommendations to the ISSCD Board for final approval. The members of the Committee will be selected by the ISSCD Board and the Chair based on their proven clinical and scientific experience in the field.

Rotation

All members of the committee may serve no more than 2 x 3 years terms and must step down and allow a period of no less than three years to pass before rejoining the committee. Co-Chairs and vice-Chairs may only hold either position for a maximum of two three year terms although may remain a member of the committee for a further one three year term before having to step off the committee for a minimum three years. Continued membership of the Committee remains due to mutual interest and at the discretion of the ISSCD Board

Conduct

Members of the committee will be formally announced on the ISSCD website and are not permitted to publicly promote themselves as members of the committee e.g. on third party websites or social media platforms. Committee members do not have authority to speak on behalf of or represent the ISSCD, unless authorised by the ISSCD Board. All members of the committee must complete a conflicts of interest and confidentiality form and at each committee meeting they must disclose any new conflicts of interest that may have arisen.