

A training course for caregivers, caterers, schools, hospitals, hostels, home stays, bed and breakfast providers, and residential rest homes.

COURSE WEBSITE  
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# Dietary Differences



## IN THIS MAGAZINE READ ABOUT...

The growing numbers with special dietary needs **P1**

The causes and effects of allergies **P4**

The main food types that cause allergies **P6**

Types of food intolerances **P6**

Do Coeliacs have a disease... or an intolerance? **P10**

Medical conditions that need special diets **P15**

Religious and ethical food choices **P19**

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# Welcome

## to the first of your three course magazines

It's great to have you with us, thank you for joining in.

Did you know that the number of people with special dietary needs is increasing all the time? This may be because of allergies, intolerances or medical conditions; or may be due to changes in culture, religion or ethics. Whatever the reason, it is very important to only serve foods that are appropriate and to strictly eliminate foods that are not.

This course has been especially designed and written to help you quickly and easily gain a wide understanding of the various needs, so you can keep your clients safe.

The information you are about to read has been written by a qualified dietitian and nutritionist, and refined further in conversation with NZ Food Safety, the Australian Grocery Council, Coeliac NZ, Allergy NZ and the NZ Restaurant Association. I thank the great people in those organisations for their valuable feedback.

By the end of this course you are going to

Have a good understanding of the differences between the special dietary needs.

Be knowledgeable about potentially troublesome menu ingredients.

Understand what food types are suitable for different dietary needs.

Know what to be aware of as food is served.

Be able to alter your question style to get the information you need.

Have had the opportunity to ask your tutor information about your needs.

Have carried out some on-the-ground research for yourself.

I'm sure you will find the information we have interesting and relevant to your work.

Enjoy your course.



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# The numbers are growing!

The experts tell us that between 6 and 8% of children and between 2 and 4% of adults have a food allergy.

Source: *Marlborough Express*, 28 July, 2010.

Research shows that in fact coeliac disease affects 1 in 100 people in New Zealand (that's approximately 43,000) people, making it much more common than previously thought. Under-diagnosis is a significant problem, with only 1 in 8 affected people being diagnosed.

Source: *New Zealand Coeliac Society*.

One in 2500 Aucklanders suffer from anaphylaxis (hypersensitivity to food) every year.

Source: Article 'Death by food' by Jennifer Bowden, February 2008, *The New Zealand Listener*.

Food allergy is estimated to affect between 2 to 2.5% of the general population.

Source: *Auckland Allergy Clinic*

In 1996 it was predicted that the number of diabetics in New Zealand in 2011 would increase around 8% to 145,000 (Ministry of Health). In 2010, the number of diabetics had already increased to 270,000.

Source: *Diabetes New Zealand*.

It is estimated that 2%, or approximately 86,000 New Zealanders, follow a vegetarian diet. It is also generally accepted that far great numbers regularly have at least one or two meatless meals a week.

Source: *New Zealand Vegetarian Society*.

The Australasian Society of Clinical Immunology and Allergy (ASCIA) estimates that in 2007, allergies, including food allergies, cost Australia \$A7.8 billion in costs. It believes that the cost of allergic disease to New Zealand is likely to be comparable.

Source: *Australasian Society of Clinical Immunology and Allergy*.

500% increase in hospital admissions for food allergies in the United Kingdom since 1990.

Source: *The Telegraph*, 7 August, 2010.

The number of children in the United States with food allergies went up 18% from 1997 to 2000.

Source: *CNN*, 3 August, 2010.

There's been a ten-fold increase in people with food intolerances in the United Kingdom in the last 25 years.

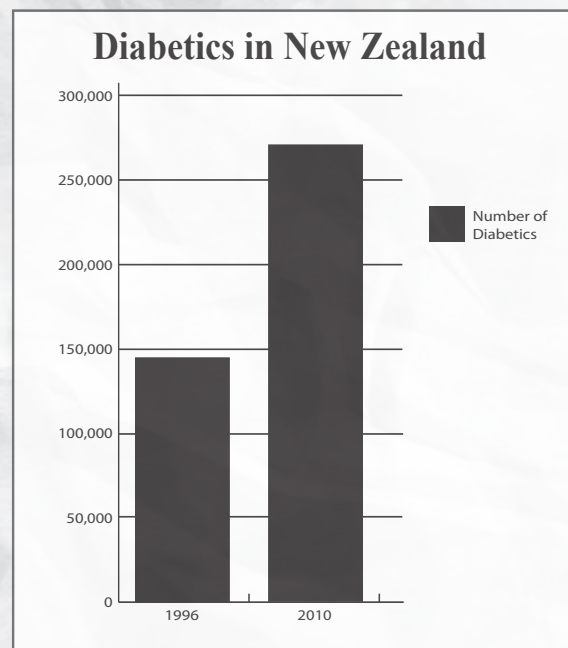
Source: *The Telegraph*, 15 October, 2009.

It is estimated that there are 200,000 Australians with coeliac disease and there has been a big increase in the number of people with the condition in recent years.

Source: *ABC Science Online*, 22 July, 2010.

From now on the number of people in residential aged care facilities is expected to grow hugely as the 'baby boomer' generation reach older age. A 2010 review of aged residential care services in New Zealand predicted that an extra (above normal admittances) 12,000 to 20,000 residents would be in care by 2026.

Source: *Residential Aged Care facilities*.



Source: *Allergy New Zealand*



Think about what the growing numbers will mean for your sector.



# Knowing the differences between dietary needs

A special dietary need is where a person has to be extra selective about their food choices because of

A food **allergy**.

A food **intolerance**.

A **medical condition**.

**Religious or ethical** reasons.

In most cases eating some foods is simply not an option, and can in fact cause the person ill health.

It can be miserable for a person when they don't get the food that they need or want. But there is also another effect – a bad experience for someone with special dietary needs may be shared with their friends and family, and sometimes publicly. Not a good look!

The service you provide has a big impact on the success of your organisation.

As the number of people diagnosed with special dietary needs increases, the responsibility of those serving or preparing their food increases.

If you understand and treat client's requests respectfully and do your best to make sure they have the information they need, you will be offering a safer service.



According to a study released in 2013 by the US Centers for Disease Control and Prevention, food allergies among children increased approximately 50% between 1997 and 2011.

The number of people who have a food allergy is growing, but there is no clear answer as to why.

*Source: Food Allergy Research & Education (FARE).*

“

## Personal experiences

At times throughout the following sections we will include the actual words of people with special dietary needs. These are the stories they wanted us to tell you.

## Food allergies

A food allergy is an immune system response to a food protein where the body automatically triggers an allergic reaction. The result is a range of unpleasant symptoms such as diarrhoea, cramping or vomiting, right through to severe and potentially fatal reactions.

### What causes an allergy?

A food allergy is when a person's immune system responds to a protein in a food such as milk, eggs, peanuts, soy, shellfish, fish, wheat and nuts, and that protein causes an allergic reaction.

The immune system keeps humans healthy by protecting us against disease. A problem with the immune system can lead to illness and infection.



### Allergy Statistics in New Zealand

6-8 per cent of children and 2-4 per cent of adults have an identified food allergy.

One in every 2500 people experience anaphylaxis, a rare, severe and life-threatening reaction, mainly to foods.

One or two people a year are thought to die from Anaphylaxis.

*Sources: Allergy NZ, Auckland City Hospital Immunologists)*





## The effects of food allergies

After a person with an allergy has eaten, touched or inhaled particles of the problem food, the person's body thinks the proteins in the food are invading the body and are going to cause it harm. The immune system then releases chemicals into the body to 'fight off' the food.

Those chemicals can cause

Skin reactions, which are the most common type of food allergy reactions. They can take the form of itchy, red, bumpy rashes (hives), eczema, or redness and swelling around the mouth or face.

Stomach cramps, nausea, vomiting, or diarrhoea.

A runny or stuffy nose, itchy, watery eyes, and sneezing too.

Asthma with coughing and wheezing.

A person to feel light-headed or faint, or worse still, they may develop anaphylaxis, which can be life-threatening.

Reactions can be different between people. It all depends on the person – and sometimes the same person can react differently at different times! Some reactions can be very mild and involve only one system of the body, like hives on the skin. Other reactions can be more severe and involve more than one part of the body.



## Anaphylaxis

For some allergic people anaphylaxis can happen.

**Anaphylaxis** is a very serious allergic reaction that happens quickly and may cause death.

Anaphylaxis is always a medical emergency. It affects the whole body, often within minutes of the person eating or even coming into contact with the food, and can cause a number of reactions. For example the rapid spreading of hives (pale red, raised, itchy bumps), swelling of the face, lips and eyes, vomiting, wheezing, coughing, and maybe the loss of consciousness.

The most serious symptoms (which can be life-threatening) are breathing difficulties and/or a sudden, dramatic drop in blood pressure.

**Read the Anaphylaxis Causes Death story** to understand how serious anaphylaxis can be for some people.

**Watch out for the foods that cause 90% of food allergic reactions**

Dairy.

Eggs.

Wheat.

Soy.

Fish.

Shellfish.

Peanuts.

Tree nuts.

It is very important that when a person is allergic to a food, that they **completely** avoid that food. Also, any food they eat **must not have come into contact in any way** with the food that causes them to have a reaction. This requirement becomes very important when meals are being prepared and served.





## Personal experience

### Anaphylaxis causes death

Grant Freeman sat down to a tomato entree on Tuesday night last week at a work dinner. Ten minutes later he collapsed in the toilet. Two days later he was dead, a suspected victim of a food allergy.

Now his family is speaking out to try to prevent similar tragedies. Food authorities have been alerted.

Mr Freeman, a 38-year-old father and a marketing manager, had had food allergies since he was 5, but he never realised his life might be at risk, his grieving family said yesterday.

On April 17 he went to dinner at a cafe. Allergic to peanuts, tree nuts, eggs, seafood and chicken, he warned the cafe, was identified as the person with allergies when he arrived, and given a specially prepared meal, his sister Donna Whittle said yesterday.

Others were given a seafood entree, but Mr Freeman had a raw-tomato dish with a sauce. She was unsure what kind of sauce.

"He had a glass of wine, then had a mouthful of entree. He said it wasn't right and he didn't feel good. He went to the bathroom and collapsed in a stall. They heard the crash from the restaurant."

A colleague found him, and an ambulance was called. Ambulance officers managed to restart his heart, Mrs Whittle said, but he had been without a pulse for some minutes.

He was taken to hospital where he was put into a coma, but last Thursday his life-support was stopped because he had suffered severe brain damage.

Mrs Whittle wonders whether his meal was inadvertently contaminated with a trace of one of his allergy foods, but does not blame the cafe. She named the cafe but did not want it identified.

When the cafe was phoned and asked about Mr Freeman's death, a woman said, "We can't make any comment about it," then hung up.

Mrs Whittle said it might never be known what caused her brother's death. "They were very clear at the hospital that it was anaphylaxis [a severe allergic reaction]. They can't work out definitively what the reaction was to. The fact he's always had these allergies points in that direction."

Adrenalin is given to save the lives of people suffering anaphylactic shock, which can be caused by insect stings but more often is from a food allergy. Some people at risk of the condition carry an 'EpiPen' adrenalin injector. Mr Freeman did not.

His worst previous reactions were diarrhoea and vomiting, Mrs Whittle said. "He had never been diagnosed with life-threatening reactions."

When he was 5 he had breathing difficulties after eating fudge-containing walnuts. He became very careful about what he ate and his home was kept free of the foods he was allergic to.

Mrs Whittle, whose 4½-year-old son Thomas, is allergic to peanuts and eggs, wants greater public awareness of food allergies and greater tolerance from restaurants. "People just don't take it seriously enough."

*Source: The NZ Herald*

## Food intolerances

Food intolerances are much more common than food allergies. Food intolerances do not involve the body's immune system unlike food allergy and Coeliac Disease.

People with food intolerances can eat **some** of the problem food, but if they eat too much (or eat it too often) they become unwell because their body cannot tolerate unlimited amounts of the food.

An intolerance to several foods, or a group of foods, is not uncommon and may be caused by natural food chemicals that are

Lactose (milk sugar).

Guten (found in cereals foods).

FODMAP's (types of sugars).

Natural food chemicals (such as salicylates, amines and glutamate, found in a range of foods).



A food allergy is different from a food intolerance.

## Food intolerance effects

Food intolerance can cause some not very nice to have effects such as

Diarrhoea.

Bloating and stomach cramps.

Skin symptoms such as rashes and eczema.

Fatigue.

Joint pains.

Diarrhoea.

Vomiting.

The appearance of intolerance symptoms in people is usually slow and may not happen for many hours after the food has been eaten. The effects may also last for several hours, maybe into the next day and sometimes even longer.

All food intolerances should be treated seriously. Always ask for clear guidance on which foods are being avoided.

## Gluten Intolerance

People with Gluten Intolerance may not have Coeliac Disease and they may in fact be able to tolerate small amounts of gluten – but ask them about that first.

## Lactose intolerance

Lactose is a milk sugar and is found in varying amounts in milk and milk products. Lactose intolerance occurs when the human body is unable to digest lactose.

People with lactose intolerance may need to limit their intake of milk and milk products such as cheese and yoghurt.

**Lactose intolerance is especially common in Asian populations, who are genetically susceptible to the condition. Lactose intolerance can also occur as a secondary condition to a medical problem such as Coeliac Disease.**

Have a look on the internet and find out if there is a difference between dairy-free and lactose intolerance!



### NOTE

If you are told someone is 'Gluten Intolerant' treat them as though they are Coeliac unless they tell you differently.

And remember, for people who do have Coeliac Disease, gluten must be **totally excluded**.





# Food related needs that are not allergy based

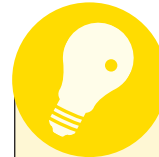
## Coeliac Disease

Coeliac Disease is a food intolerance, but it is also a **disease-based food need**, Coeliac Disease is more severe than other intolerances and has long term effects on the persons health.

Coeliac Disease is a genetic medical condition that results in a **permanent intolerance** to gluten food. A medical specialist diagnoses the disease after a series of blood tests and a small intestine biopsy.

People with Coeliac Disease are sometimes referred to as 'Coeliac's'.

For Coeliacs it is essential that all foods and drinks provided are *completely free* of all traces of gluten.



### NOTE

There are grains that do not have gluten and are safe for Coeliac's to eat, for example rice, corn, buckwheat, millet, amaranth and quinoa. Food items that are labelled 'Gluten Free' use those grains.



### Personal experience

It is tricky finding somewhere to eat (where you don't feel like you are standing out in the crowd, or looking like one of 'those fussy eaters'). We HAD found a really good place to eat, which was a 'normal' place with GF (gluten free) options on menu. Unfortunately the last time we went back (I always look forward to a meal out) the staff didn't appear to care that my meal had sauce which contained gluten drizzled onto it – I became suspicious and asked again after I had eaten most of it – this was also after I had checked when ordering and made sure the staff were aware it had to be totally GF. I was appalled with the waiting staff comment "Surely a little won't hurt you". I will never go back there again. Now I don't have a favorite place that we can 'pop' into for a meal. If you note GF against a meal – then it should be GF! It is disheartening when wait or cooking staff just "Don't get it". "My lesson from this is if you have a favorite place – be aware if they change hands (and/or staff)!"

## So, what is gluten?

Gluten is a protein found in cereals such as wheat, rye, barley, spelt, triticale (types of wheat) and oats. It is found in many types of flours, breads and pasta.

Gluten gives bread dough and cakes strength and is used in processed foods, for example in bacon, vinegar or mayonnaise.

## The effect of gluten on a coeliac

For those with Coeliac Disease, the **short-term** result of eating gluten in any form or quantity is different from person to person

and can include stomach upsets (for instance vomiting, diarrhoea, bloating, and pain) and other effects such as tiredness or headaches.

However, and **this is very important**, as well as those very unpleasant short-term effects, each time a person with Coeliac Disease eats gluten there is a **long-term, unseen effect on the lining of their intestine and ongoing health.**

People with Coeliac Disease have an increased risk of developing other diseases, such as Type 1 diabetes, malnutrition, some types of cancer and osteoporosis. Following a **strict, gluten-free** diet is the **only** treatment for Coeliac Disease.





## Diabetes

Diabetes is a condition where a person has poorly controlled blood sugar that needs managing. A diabetic needs to manage the amount of sugar they eat and drink. They will be following a special diet to help manage their condition, and/or they may take insulin medication to help with their disease.

There are two different types of diabetes – Type 1 and Type 2

People with Type 1 diabetes require daily insulin injections, alongside a healthy diet.

**Type 2** diabetes is more common than **Type 1** diabetes. **Type 2** diabetes is often associated with being overweight, so people with **Type 2** diabetes may also be on a weight-reducing diet. People with **Type 2** diabetes may control their condition with dietary modifications alone, or may additionally require medication or insulin injections.

**Diabetes fact:** Sometimes a diabetic will need to know a time when food is likely to be served as they have to self-inject a certain time period before eating. In those cases it is important the food is served at the promised time.



### Diabetes Statistics

280 Australians develop diabetes every day.

Over 100,000 Australians have developed diabetes in the past year.

Diabetes is the fastest growing chronic condition in Australia.

Almost 1.1 million Australians currently have diagnosed diabetes.

Over 225,000 New Zealanders have type 1 or type 2 diabetes.

Nearly 7 percent of New Zealanders have diabetes, but over quarter of them don't know yet know it.

**And every day 50 more New Zealanders are diagnosed with diabetes.**

## Cardiovascular disease

Cardiovascular disease affects the heart, veins and arteries and may lead to heart attacks and strokes. It is a disease-based food need, not a food intolerance or allergy.

People with high blood pressure or high cholesterol are advised to follow a heart-healthy diet. In particular they may be looking to reduce the amount of salt and fats they eat, to follow a low calorie/low fat diet.

## Low calorie diets

Some people may be following a low calorie diet as a general health choice, or to deal with a health issue they have such as cardiovascular disease or Type 2 diabetes.

Food provides humans with the energy they need day to day. Calories are a measure of that food energy. If a person doesn't use that food energy up through exercise, they put on weight. In general, foods with a lot of fats and

sugar in them have the greatest amount of food energy. Alcohol also provides energy.

Those who are on a low calorie diet may want to know about the calories in their menu choice, as they will be restricting how many calories they consume each day. Some food outlets produce menus with calorie information so as to give guidance to diners.

The course Home Page has a good link to a site that shows you the calories in everyday foods.

Try to remember some of the low calorie foods for the future.

## Trans fats

Some clients may be wanting to reduce the amount of trans fat in their daily diet, and as part of that they may ask about the amount of trans fat in a food. It is not compulsory to label foods with trans fat levels, so it may not be possible to give a client the information they want.



# Dietary needs that may be encountered in hospital and care situations

## Dysphagia

People with dysphagia have problems swallowing certain foods or liquids, or cannot swallow at all. It is most common in people with medical conditions such as Parkinson's Disease, motor neurone disease, multiple sclerosis, brain injury, or conditions affecting the head and neck.

Someone with dysphagia is likely to be under the care of a team of specialists including doctors, nurses, speech therapists, dietitians, physiotherapists, occupational therapists, and pharmacists. The experts will advise on the types and amounts of foods the person should eat.

For a person with dysphagia, the process of eating can be slow, difficult and tiring.

Foods often need to be modified before consumption, and in severe cases tube feeding through the nose or stomach, or feeding directly into the circulatory system may be required.

If the food for a person with dysphagia is not suitable it can cause

Coughing or choking when eating or drinking.

Bringing food back up, sometimes through the nose.

Pain when swallowing.

A sensation that food is stuck in the throat or chest.

One of the most common problems is coughing or choking, when food goes down the 'wrong way' and blocks the airway. If this happens often, then the person concerned may try to avoid eating and drinking due to a fear of choking. However, this can lead to malnutrition and dehydration.



## Constipation

Constipation is a common condition that affects people of all ages. It means the person has fewer bowel movements or they are unable to completely empty their bowels.

Constipation can be caused by a low fibre diet, ignoring the urge to go to the toilet, not drinking enough water, a lack of exercise (for example elderly or bed ridden patients), or by a medical condition such as coeliac disease.

## Diverticular disease

The large intestine (colon) is a long tube-like structure that stores and then eliminates waste material left over after the digestion of food.

Pressure within the colon can cause bulging pockets of tissue that push out from the colon walls, especially as a person gets older. Diverticulitis happens when those bulging pockets in the colon become infected or inflamed causing constipation and other symptoms such as pain.

## Dementia

People with dementia are losing the ability to think and reason clearly for example by not recognising food on the plate or losing their sense of smell and taste. Alzheimer's is the main cause of dementia in older people. Those clients do not need a special diet – eating regularly and having a well-balanced and nutritious diet is important for their overall health.

## Malnutrition

Malnutrition is a condition that occurs when a person is not eating the right amount or kind of food (or sometimes not having enough food to eat).

Even people with a lot of food can suffer from malnutrition because they are not getting a balanced diet with all the necessary vitamins and minerals in it.

### NZ Nutrition Survey

**Most New Zealanders surveyed did not meet the recommendations for calcium intake.**

**The proportion of women with iron deficiency more than doubled from 1997.**

**One in four people surveyed had inadequate intake of zinc.**

**Prevalence of iron deficiency in women jumped from 2.9 percent to 7.2 percent.**

*Source: 2008-2009 Adult Nutrition Survey (NZANS)*

## Malnutrition and the elderly

Elderly people are often at an increased risk of malnutrition due to the loss of appetite that happens with aging, along with chewing problems, swallowing difficulties and difficulty in obtaining and preparing food for themselves.

## Iron-deficiency anemia

Iron-deficiency anemia is the most common form of nutritional deficiency in developed countries. An iron deficiency in the diet causes the anemia (it can be also found in people who have colon cancer and gastrointestinal conditions, women who are pregnant and vegetarians who do not replace meat with another iron-rich food). Iron-deficiency anemia is prevented by a diet high in iron-rich foods and vitamin C.

## Low-FODMAP diets

A client may be following a low FODMAP diet, which is a special type of diet that can be helpful for some people with irritable bowel syndrome.

FODMAP is an abbreviation, of Fermentable Oligosaccharides, Disaccharides, Monosaccharides and Polyols. Don't be put off by the long names; saccharide is simply another name for sugar.

## Other diseases

Sometimes you will meet a person who has another, possibly rarer, disease such as Sjögren's Syndrome (look it up on the Internet ☺). In those cases, ask them what effect the disease has on their diet as a starting point to discussing the menu with them.





# Religious and ethical food choices

Some client's food choices may be made for religious or ethical reasons. Those people can be as worried about their dietary needs as people with medical reasons – if a person with a personal food choice consumes unwanted food ingredients, they may feel extremely upset and experience emotional distress as a result of eating the wrong food.

## Halal food

Muslims are meant to only consume Halal food. That means animals have to be slaughtered in a specific way, and these foods below are not to be eaten

Pork (including bacon) or pork by-products.

Blood and blood by-products.

Alcohol.

Carnivorous animals (animals that eat other animals).

Birds of prey (birds that eat other animals).

Land animals without external ears, for example snakes, reptiles, worms, insects.



## Kosher food

The Jewish religion requires its members to eat Kosher food, which must meet the strict requirements of Jewish law.

Basically there are three categories of Kosher food

Meat.

Dairy.

Parve (or 'Pareve'). The word 'Parve' means that neither meat nor milk products are included in the food. For example, fish, eggs, fruits and vegetables are Parve.

Kosher eating separates meat and milk. Meat and milk products may not be mixed together, or produced using the same utensils.

All fruits, vegetables and grains, still in their natural (not processed) state, are Kosher and Parve. Fish that have fins and scales such as salmon, trout, cod and snapper are also kosher and Parve: however, fish such as swordfish, sturgeon and dogfish are non-Kosher. Similarly, shellfish (mussels, oysters, pipi etc.) are non-Kosher and cannot be eaten.

During the Jewish religious festival of Passover there are extra restrictions on what foods may be eaten. Your client will tell you about those if you ask them.

**Important:** Kosher ingredient that is mixed with together with a non-Kosher ingredient then becomes non-Kosher and unable to be eaten by a Jewish diner. For example, if a food colouring that came from a lobster shell (a fish with a shell, which is non-Kosher) was used in cake icing that then makes the cake non-Kosher.

Do not accidentally provide these non-Kosher ingredients

Gelatin.

Wine.

Liquor.

Beer batter.

Rum flavour.

Ethyl Alcohol or ethanol as a main ingredient.

Cochineal or Carmine.

Naturally brewed Soy Sauce.

Brewer's Yeast Extract (from beer making).

Vanilla Extract.

Wine Vinegar.

Ethyl alcohol as a solvent in natural and artificial flavours.

Confectionary Glaze or Resinous Glaze (this has an ingredient made from an insect and often uses alcohol).

Yeast grown on alcohol.

Natural Vanilla or Natural Vanilla Flavour (because alcohol is used in extracting the vanilla).

## Alcohol

You might be asked by a client seeking Halal or Kosher food to find out if alcohol has been used as a food ingredient. This can be a problem, as it very often does not appear in the ingredients statement on the label.

For example

Alcohol is a hidden ingredient or processing aid in flavourings.

Seaweeds extracts are widely used as food thickening and some are made with ethyl alcohol.

Tell the client if there is doubt about the label information.



## Vegetarianism

The different types of vegetarianism are another example of a personal choice need. Some people just do not want to eat animal products for ethical reasons; others may feel that a vegetarian diet keeps them healthier.

### Types

There are three different types of vegetarian. Your client will tell you which type they are, so try to remember the basic differences between the types

**Vegans** are vegetarians who avoid all meat, poultry, fish, eggs, dairy products and honey (i.e. no animal products). They will also avoid any foods containing animal derived ingredients such as gelatine.

**Lacto-ovo**-vegetarians will eat dairy products and eggs.

**Demi**-vegetarians or **Semi**-vegetarians leave out red meat, but they may occasionally eat fish or poultry.



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### That brings you to the end of the magazine. Well done.

If you haven't done so by now, please watch the video that goes with this magazine, and on your course Home Page look at

The document downloads and the websites related to this magazine.

Your small research task for the topic.

The Task Talk pages to see what others may have written.

### Got a question or a comment?

Just email your tutor from the link on the course Home Page.



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