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A Concept of Dietary Exposure Sciences Food Ture Position in the Interplay between Food Safety and Nutrition

Yamuna Singh*

Food tech Department, WWSC, KTH
Royal Institute of Technology

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From the standpoint of harmful substances and nutrients, food safety and nutrition in a changing environment. Man-made chemicals, such as pesticides, food additives, and veterinary medications, as well as naturally occurring substances, such as heavy metals, natural poisons, and allergies, are all potential hazardous chemicals. The dietary exposure to a nutrient or hazardous chemical (or mixture thereof) and the subsequent beneficial or adverse health effects are determined by the consumption level of a food or foods and the concentration of a nutrient or hazardous chemical (or mixture thereof) in that food or foods in food safety and nutrition. A risk assessment evaluates these health impacts and their likelihood of occurrence in populations: for hazardous chemicals, the dose must be low enough to prevent harmful effects. A risk assessment is carried out to determine if a hazardous chemical (or collection of compounds) in food poses a threat. A hazard assessment and a dietary exposure assessment are the foundations of such a risk assessment. The next step is risk characterization, which involves comparing the food exposure to a safe dosage threshold. Hazard assessment and dietary exposure assessment will be explored more below. Limits of detection (LODs) should be appropriate for the situation.


Monitoring is carried out by each EU country, although it may be consolidated.

Adapting more holistic methodologies, such as integrated risk-benefit analysis, is a possibility.

A hazard assessment is the first phase in a risk assessment, and it determines the effects that occur at different dosage levels and determines the dose (exposure level) that may be eaten without generating unfavourable health consequences. Hazard evaluation for many compounds is based on toxicity research with rats and, in certain cases, other animal species. A Reference Point (RP) - or Point-of-Departure (PoD) - is selected based on this research. A no-observed adverse effect level (NOAEL), i.e., the maximum oral dosage with no effect, or a lower limit of a benchmark dose's confidence interval (BMDL: benchmark dose lower confidence limit) producing, for example, a 5% change in effect, are examples of RPs. The RP is converted into a Health-based Guidance Value by utilising so-called Uncertainty Factors (UFs) or Safety Factors.

*Corresponding author:

Yamuna Singh

 Yamuna@163.comFood tech Department, WWSC, KTH Royal
Institute of Technology

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At dietary exposure levels at and below this HBGV, adverse health consequences in humans are not expected. UFs address inters- and intra species variations in toxicokinetics and toxicodynamics, but also possibly additional variables such as inadequate time of exposure in the critical research. In the vast majority of situations, the applicable UF is 100. This method of calculating an HBGV may be used for both acute and chronic impacts, yielding a tolerated daily intake (TDI) for pollutants and an Acceptable Daily Intake (ADI) for purposely added substances. Tolerable Weekly or Monthly Intakes (TWIs or TMIs) are sometimes calculated for long-acting substances whose accumulation in the body over time is more important than a one-time larger consumption. For gene toxic carcinogens, obtaining HBGVs in the manner described above is regarded impossible. There is no ingestion limit above or below which no detrimental effects can occur for these substances. A BMDL is also produced in such instances; however it is employed as an RP in the risk characterization rather than to construct an HBGV. In general, this BMDL is based on a dosage that causes a 10% increase in the number of animals developing tumours; with a 95 percent confidence interval established to account for data uncertainty (the BMDL is the lower bound of this interval). This BMDL10 is compared to a chronic exposure estimate calculated using recognised techniques or other methods such as Lifetime Average Daily Dose assessments.