INDUSTRY GUIDE FOR APPLICATION OF NEW HEALTH CLAIMS ON FOOD PRODUCTS (SINGAPORE)

A publication by the Health Promotion Board (HPB)

November 2025

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1. INTRODUCTION

This guidebook serves as a practical reference to support industry partners in navigating the application process for health claims and applies to all foods, food constituents, and beverages intended for sale and use as food in Singapore[1].

It is important to note that the content of this document is intended for informational purposes and does not constitute or replace legal advice. All food labels, advertisements, and promotional materials must continue to comply with relevant laws and regulations in Singapore, including the Food Regulations, Sale of Food Act, and any other applicable provisions.

The Health Promotion Board (HPB) seeks to ensure that health claims carried by food products sold in Singapore are used responsibly, accurately, and in alignment with scientific evidence, to communicate substantiated benefits to consumers. This in turn supports informed food choices and promotes innovation in the development of healthier food and beverage options.

Businesses remain responsible for ensuring that all claims are not misleading, false or prohibited. Companies must also maintain adequate and up-to-date scientific evidence to substantiate any nutrition or health claims made, supported by peer-reviewed studies, authoritative guidelines, or laboratory analyses as applicable. Such information may be requested by the authorities during compliance checks.

[1] **Food or Food Constituent** refers to energy, nutrients, related substances, ingredients, e.g. bioactives and functional ingredients, and any other feature of a food, a whole food, or a category of foods on which the health claim is based. A category of food is included in the definition because the category itself may be assigned a common property of some of the individual foods that make it up.

This includes special purpose foods; foods fortified with nutrients such as protein, carbohydrate, dietary fibre, fatty acids, amino acids, vitamins and minerals; and foods with added approved herbal ingredients.

2. TYPES OF CLAIMS

There are two main categories of claims used in food labelling: Nutrition Claims and Health Claims.

2.1 NUTRITION CLAIMS

Nutrition claims describe the presence, absence, or comparative amount of a nutrient in a food (e.g. "low in fat", "source of calcium", "high in fibre) and often appear alongside health claims on labels and advertisements.

2.2 HEALTH CLAIMS

Health claims are statements that state, suggest, or imply that a relationship exists between a food or a constituent of that food and health. It aims to communicate the health impact of a food or a constituent.

In Singapore, health claims are broadly classified into three categories: nutrient function claims, other function claims and disease risk reduction claims.

Definition and Examples of Health Claims

	Nutrient Function Claims	**Other Function Claims**	**Reduction of Disease Risk Claims**
Definition	Nutrition claims that describe the physiological role of the nutrient in growth, development, and normal functions of the body.	Claims about the specific beneficial effects of consuming foods or their food constituents, as part of the total diet, on the body's normal functions or biological activities that positively contribute to health, improve the function, or modify or preserve health.	Claims relating to the consumption of a food or food constituent, in the context of the total diet, which is associated with the reduced risk of developing a disease or health-related condition.
Examples	✓ Protein helps in tissue building and growth. ✓ Vitamin B2 contributes to the maintenance of normal vision	✓ Inulin helps support the growth of beneficial bacteria/good intestinal flora in the gut. ✓ Prebiotics promote the growth of good Bifidus bacteria to help maintain a healthy digestive system.	✓ A healthy diet rich in whole grains, fruits and vegetables that contain dietary fibre may reduce the risk of heart disease. (Name of food) is low in/free of fat and high in dietary fibre.

3. GENERAL PRINCIPLES FOR USE OF APPROVED HEALTH CLAIMS

Health claims that have been previously approved and published in A Guide to Nutrition Labelling for Food Products (Singapore) can be used without the need for a new application, provided that the claim is used in accordance with all conditions of use.

Any deviation that may constitute a new or modified claim will require a new submission to HPB. If an applicant intends to:

- Propose a claim for a NEW food constituent that has not been previously approved.
- Propose a claim establishing a NEW relationship between a previously approved food constituent and a different health outcome.

Then, a **new application** must be submitted to HPB with supporting scientific substantiation for review. Applicants should complete the application form and submit any supporting documentation to Health_Nutrition_Claims@hpb.gov.sg. Refer to Section 4 for guidance on filling in the application form.

Note: For the complete list of approved claims and specific conditions for use, please refer to the following sections in A Guide to Nutrition Labelling for Food Products (Singapore):

- Section 6 – Health Claims
- Appendix II – List of Health Claims and Criteria

3.1 CONDITIONS OF USE OF CLAIMS

Before a claim can be used on a food product, the claim must comply with general labelling requirements, with the following conditions met:

- ☐ Prepackaged products bearing nutrition or health claims are required to include a Nutrition Information Panel (NIP), to substantiate the nutrient(s) or component(s) claimed.

Recommended placements of approved health claims in relation to the NIP

Example A: Approved claim displayed in proximity to the NIP

NUTRITION INFORMATION		
Servings per package: (insert number of servings)		
Serving size: *x* g (or ml) (insert household measurement)		
	Per serving	Per 100 g (100 ml)
Energy	*x* kcal (*x* kJ)	*x* kcal (*x* kJ)
Protein	*x* g	*x* g
Total Fat	*x* g	*x* g
- Saturated Fat	*x* g	*x* g
- Polyunsaturated Fat	*x* g	*x* g
- Omega 3	*x* g	*x* g
- Omega 6	*x* g	*x* g
- Monounsaturated Fat	*x* g	*x* g
- Omega 9	*x* g	*x* g
Cholesterol	*x* mg	*x* mg
Carbohydrate	*x* g	*x* g
- Total Sugar	*x* g	*x* g
- Glucose	*x* g	*x* g
- Lactose	*x* g	*x* g
- Galactose	*x* g	*x* g
Dietary Fibre	*x* g	*x* g
- Resistant Starch	*x* g	*x* g
Sodium	*x* mg	*x* mg
Magnesium	*x* mg	*x* mg
Vitamin D	*x* mg	*x* mg
Phytosterols	*x* g	*x* g
Vitamin D helps support calcium absorption and improves bone strength.		

Example B: Approved claims shown on the front of pack, supported by the NIP

Example C: For products within the scope of Nutri-Grade (e.g. freshly prepared beverages), the NIP indicating the quantity of the claimed nutrient need not be displayed on the product itself*.

**Do note that the necessary information in line with the requirements set out by existing food regulations have to be complied with. For example, nutrition information, in print or through digital means such as but not limited to QR codes, should be made available upon request.*

☐ The claim on the product label, or any labelling or advertising materials, must not be false, misleading, or prohibited.

💡 ***What constitutes a prohibited claim?***

Under Regulation 9 of Food Regulations, a prohibited claim is a false or misleading statement, word, brand, picture, or mark purporting to indicate the nature, stability, quantity, strength, purity, composition, weight, origin, age, effects, or proportion of the food or any ingredients.

💡 ***Examples of prohibited claims***

- × Claims that any food will prevent, alleviate, or cure any disease or condition affecting the human body.

e.g. 

- × Claims that improved health or an improved physical condition may be achieved by consuming any food.
- × Claims that may be interpreted as advice of a medical nature from any person.
- × Use of scientific data (e.g. graphs on health effects) that cannot be verified / validated by consumers or has been truncated / exaggerated to imply greater validity than what is being concluded, including claims like “clinically proven” in relation to the health effects claimed.

Note: A list of examples on prohibited claims can be found in Appendix III: “Examples of prohibited claims on food” in A Guide to Nutrition Labelling for Food Products (Singapore).

☐ All related print and online point-of-sale (POS) materials must be consistent with the approved claims.

☐ Companies should keep documentary evidence (e.g. laboratory analyses, evidence from scientific journals, etc.) for post-market compliance checks on the substantiation of claims.

4. GUIDE TO FILLING IN THE APPLICATION FORM

This section provides recommendations for the information that industry players can provide when applying for a new health claim. A complete and well-prepared submission facilitates efficient evaluation. Incomplete or inadequately referenced submissions may result in delays or non-acceptance.

Industry players should refer to the Application Form while reviewing this section, as it provides the fields needed to complete a submission. **A separate application form is required for each health claim**.

The application form consists of three sections:

- Part A: Collection of company and contact person details.
- Part B: Summary of proposed claim
    - Applicants may refer to Section 2.2 for guidance on the selection of the type of claim.
    - Applicants may refer to Section 4.1 for guidance on the proposed wording of claim.
    - Before filling in the summary of scientific evidence in the summary table, applicants are advised to select and review the supporting studies first.
- Annex: Summary of supporting studies
    - Applicants may refer to Section 4.2 for guidance on the selection of supporting studies.

4.1 HOW TO WORD PROPOSED CLAIM

✅ Do's	Example
Use clear and factual language	✓ "Vitamin A **helps to** maintain normal skin and mucous membranes." ✓ "Vitamin B2 **contributes to** the maintenance of normal vision." ✓ "Folic acid is **essential/important** for the growth and division of cells."
Clearly specify the food constituent that the claim is based on (should correspond with supporting studies)	✓ "**Inulin** helps to support the growth of beneficial bacteria/good intestinal flora in the gut." × "**Fibre** helps to support the growth of beneficial bacteria/good intestinal flora in the gut."

❌ Don'ts	Example
Don't use medical or absolute terms	Avoid absolute terms like "cures", "prevents", or "ensures", as well as terms that suggest endorsement by healthcare professionals, such as "doctor-approved formula" or "recommended by dietitians".
Don't exaggerate the effects of food constituents that are not supported by the evidence provided	If your supporting studies show that "vitamin C helps support normal immune function", do not extrapolate to claim that "vitamin C prevents the common cold".
Don't use vague terms	Avoid generic phrases such as "good for you" or "supports health".

4.2 HOW TO SELECT SUPPORTING STUDIES

A robust and well-documented evidence base is essential to substantiate a proposed health claim. Applicants should carefully select and present studies that directly support the claim.

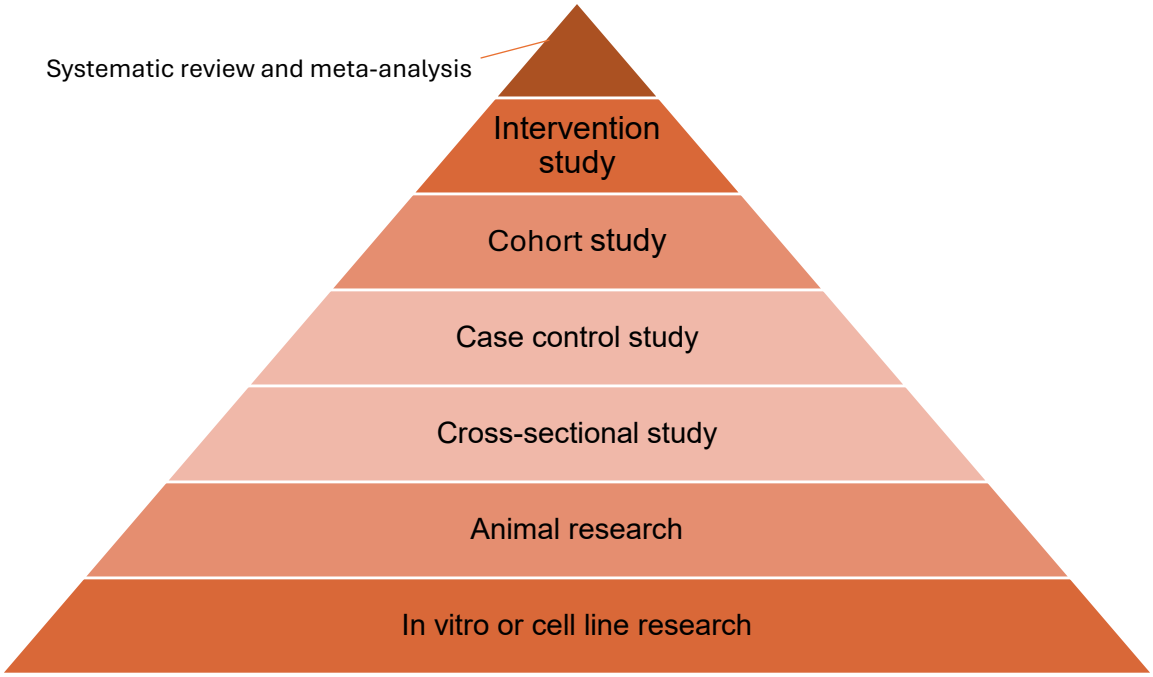
Simplified 3-step evidence-based framework to evaluate studies:

- **Step 1: Assess the study design and quality**
  - Identify type of study design
  - How reliable are these studies in terms of their design and execution?
- **Step 2: Check for a cause-and-effect relationship**
  - Is there a clear and consistent link towards the claimed health effect?
- **Step 3: Rate the overall strength of evidence**
  - Based on steps 1 and 2, determine if the strength of evidence meets the required level to support the claim

Guiding Principles	What to include	Tips
1. Focus on human evidence	Prioritise human intervention studies that directly test the food constituent and the claimed health effect. Observational studies can support your evidence but are NOT sufficient on their own.	💡 Include at least two placebo-controlled trials showing that consuming a specified amount of food constituent per day demonstrates the intended effect on health.
2. Match the Study to the Claim	Ensure studies directly correspond to the claim being made as much as possible (e.g. same food constituent, form / food matrix, same target population and intended effect).	💡If your claim concerns a specific ingredient or component, ensure that supporting studies correspond to the same substance and form (e.g. specific probiotic strain), rather than a different variant or delivery format. 💡If your claim is about the general population, your studies should not be based on immuno-compromised populations.
3. Check Study Quality	Select studies with robust design. Refer to the evidence hierarchy pyramid in Figure 1 to evaluate study quality. Systematic reviews or meta-analysis that summarise	💡 Things to look out for: ✓ Randomisation ✓ Double-blind ✓ Placebo-controlled ✓ Appropriate duration ✓ Sufficient sample size ✓ Validated outcome measures ✓ Conflict of interest disclosure ✓ Clear reporting

	consistent human evidence are highly valuable.	✓ Published in peer-reviewed journal
4. Ensure Consistency	The overall body of evidence should show a consistent trend of benefit.	💡It is acceptable if most studies demonstrate a positive effect and a few shows no effect. However, where the evidence is mixed (e.g. where comparable numbers of studies show opposing outcomes), the totality of evidence would be considered inconsistent and may not support your claim.
5. Demonstrate Biological Plausibility	The proposed mechanism should be scientifically sound, explaining how the food constituent produces the claimed effect.	💡 Look out for studies that include established pathways or mechanisms to strengthen your justification.
6. Ensure Relevance to the Local Context	Where possible, use studies conducted in Singapore or in populations similar to local consumers.	💡If local data is unavailable, justify why international studies are relevant.

Figure 1: Evidence hierarchy pyramid, in descending order based on quality of evidence



4.3 COMMON PITFALLS

Applicants should avoid the following as much as possible when submitting their application:

Issue	Why is it a problem?
× Selecting low-quality isolated studies, which may include: - Studies with limited replication, i.e., results have only been observed in one/a few studies - Studies with methodological differences that limit comparability with the broader body of evidence	Low-quality, one-off studies are risky because their results may not be reliable, repeatable, or applicable to all consumers.
× Selecting animal model studies, ex vivo and in vitro studies	The results of these studies may not be applicable to human consumers. Note: These may be provided, but only as supporting knowledge to illustrate the relationship between the food/food constituents and the proposed health effects.
× Selecting informal sources, including: - Abstracts and articles from in-house reports, newspapers, newsletters, magazines - Books or chapters of books for consumers or the general public - Classic texts or textbooks for professional training	Informal sources may be unreliable because they are not peer-reviewed and may contain opinions rather than solid scientific evidence.
× Selecting outdated studies (not published within the last 10 years)	More recent research reflects current scientific understanding and methodologies and could provide more accurate and relevant results.
× Intentionally excluding limitations of study	This gives an incomplete and misleading picture of the evidence, as limitations help reviewers understand how reliable and applicable the findings are. Transparency is critical in demonstrating the credibility of your application.

5. CHECKLIST OF DOCUMENTS FOR APPLICATION

- ☐ Completed Application Form
- ☐ Copies of full study reports (annexed)
- ☐ (If applicable) Approval letter from national food authorities
- ☐ (If applicable) Supporting documentation (e.g. laboratory analysis)
- ☐ (If applicable) Permission to review proprietary information in confidence

6. POST-SUBMISSION TIMELINE

Upon successful submission of the completed application form and supporting documents, applicants can expect the following:

Within one week upon receipt	Notification by HPB that the submission has been received
In between	HPB will work with applicant to ensure dossier is complete before forwarding to expert panel for evaluation
Within 6-9 months upon receipt	Applicant will be informed of result in due course

7. FREQUENTLY ASKED QUESTIONS

1. **What are the regulatory requirements for health claims?**
   A health claim is optional for food. Companies are not required to seek pre-market approval for the use of **approved** health claims. However, **new** health claims must undergo pre-market evaluation and approval by HPB before being used on food products. Companies are responsible for ensuring that their products are safe for consumption. Companies can refer to the Food Regulations for further information on food safety and food labelling. Post-market surveillance (e.g. request for supporting documents/laboratory tests) will be conducted by the relevant authorities to ensure that the regulations are complied with.

2. **Where can I send my products for lab analysis?**
   You can send your products for lab analysis to any laboratory accredited by the Singapore Accreditation Council-Singapore Laboratory Accreditation Scheme (SAC-SINGLAS). A list of accredited laboratories can be found here. For overseas-accredited labs, please refer to the SAC Mutual Recognition Arrangement (MRA). Please ensure that the nutrient information declared is accurate and consistent. Direct chemical analyses using official AOAC (Association of Official Analytical Chemists) methods and/or alternative methods shown to be equivalent to AOAC official methods are recommended.

3. **Can I use nutrition or health claims without the Healthier Choice Symbol (HCS)?**
   Yes, you can use the claim without the HCS if your product is able to meet the stipulated criteria. HCS is a voluntary labelling programme, and you can find out more about it at https://hpb.gov.sg/food-beverage/healthier-choice-symbol.

4. **Can food products make claims about disease prevention or treatment?**
   No, food products are generally prohibited from making claims about preventing, treating or curing diseases, and must not be interpreted as advice of a medical nature. All claims relating to risk of disease reduction must be approved and gazetted in the Food Regulations before being used on food products.

5. **Where do I submit my application?**
   Submission of applications can be done by emailing Health_Nutrition_Claims@hpb.gov.sg with the completed application form and supporting evidence dossier.

6. **What types of evidence are acceptable to support a health claim?**
   Human intervention studies are preferred. Observational studies can be included but must be supported by human studies. Studies should be peer-reviewed, ideally published within the last 10 years, and include details of study design, population, intervention, outcomes, and results. Refer to Section 4.2 for further guidance.

7. **How long does it take for a health claim submission to be reviewed?**
   The duration of the review process generally takes about 6-9 months, although this may vary according to the completeness and complexity of each submission. Providing a complete dossier with all supporting documents and evidence will help facilitate timely processing. For a detailed breakdown of the expected timeline, refer to Section 6.

8. **What happens if my claim does not pass the completeness check, or is rejected?**

If your submission is assessed to be incomplete or insufficient, you will be notified to address the specific areas requiring clarification or provide additional supporting evidence. The application may be resubmitted once all the required information has been provided.

In the event that your health claim application is rejected after evaluation by the expert panel, HPB will inform you of the decision and the reasons for rejection. You may revise and submit a new application if the issues identified can be adequately addressed, or if new supporting evidence becomes available.

9. **Are unpublished or proprietary studies accepted?**
   Unpublished or proprietary studies conducted by companies may be included, provided they include adequate methodological information and results to allow for a rigorous scientific assessment. Applicants should submit a statement that explicitly allows HPB to review the proprietary information in confidence. However, peer-reviewed, published human intervention studies should be prioritised.

10. **How do I report a suspected false, misleading, or prohibited claim?**
    In the case where you suspect that a claim might be false, misleading or prohibited, please write in to Health_Nutrition_Claims@hpb.gov.sg with details such as the product name, claim in question, and evidence supporting your concern.

8. CONTACTS

Questions, concerns or feedback related to nutrition labelling and health claims may be directed to:

Level 5, Policy and Strategy Division

Health Promotion Board

3 Second Hospital Avenue Singapore 168937

Email: Health_Nutrition_Claims@hpb.gov.sg