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To: Cynthia Oshita
Office of Environmental Health Hazard Assessment (OEHHA)
Proposition 65 Implementation
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May 4, 2009

Comment re: OEHHA Notice “Prioritization: Chemicals for Consultation by the Carcinogen Identification Committee” on March 5, 2009 (Aspartame)

To the Members of the Carcinogen Identification Committee (CIC) of the California Office of Environmental Health Hazard Assessment (OEHHA):

The International Food Information Council (IFIC) would like to provide comments in response to the OEHHA Prioritization Notice for aspartame dated March 5, 2009. We would like to share our experience and provide context to the issue of aspartame’s safety as the State of California explores it.

From our experience in conducting consumer research related to food safety and nutrition and communicating about risk to the public, we know that information about food safety and nutrition can be confusing to consumers. As such, we believe clear and considerate communication to consumers is key, and that a warning about aspartame, if instituted, would unnecessarily confuse consumers.

As a science-based organization, we support the use of consensus science in communications regarding food safety. A couple of recent studies on aspartame which have received undue media and public attention contain methodological errors that limit or negate the strength of the conclusions. These errors prevent these studies from meeting scientific standards for clinical research, and experts agree that they do not provide reliable evidence regarding the safety of aspartame. However, there is an abundance of research that supports the consensus science, which is that aspartame is safe and does not cause cancer.

Aspartame has had a long history of safe use in a variety of foods and beverages. It is one of the most studied and reviewed food ingredients in the world and has passed rigorous safety assessments. Aspartame and other low-calorie sweeteners can offer a number of benefits to consumers when used in place of calorie-containing sweeteners, including aiding in weight loss or weight management; providing a sugar- and carbohydrate-free option for people with diabetes; and helping to improve dental health by not contributing to dental caries.

Warnings about aspartame would be confusing to consumers for several reasons. First, they would conflict with findings and advice from numerous expert groups. Reputable organizations such as the National Cancer Institute (NCI) have concluded that aspartame does not pose a health risk, including cancer. The American Dietetic Association (ADA) has published a position statement on the use of nutritive and nonnutritive sweeteners, which states, “consumers can safely enjoy a range of nutritive and nonnutritive sweeteners when consumed in a diet that is guided by current federal nutrition recommendations.” (*JADA*, 2004) In addition, an independent panel of experts recently reviewed the available scientific literature on aspartame and confirmed it is safe and not associated with increased cancer risk. (Magnuson, et al., 2007)

Food safety regulatory officials around the world have also reviewed the available research on aspartame and found it to be safe. Aspartame is approved by the U.S. Food and Drug Administration (FDA) as a food additive. In addition, the Acceptable Daily Intake (ADI) for food additives, including aspartame, is set by the FDA at levels hundreds of times higher than amounts found not to produce adverse effects. And while aspartame consumption has increased in recent years, it is still well below the ADI. (Magnuson, et al., 2007)

FDA has reviewed the available research on aspartame several times, most recently in 2007, and has consistently reaffirmed its safety. In addition, the European Food Safety Authority (EFSA) just released its updated Opinion on aspartame safety based on available research to date, including studies on aspartame and carcinogenicity conducted by the European Ramazzini Foundation, and has re-confirmed its safety for use in foods and beverages at the currently recommended levels. (April 20, 2009)

Second, more than one-third of U.S. adults and 16% of U.S. children are obese (CDC, 2009), and the majority of U.S. adult consumers are trying to lose weight (IFIC Foundation, 2008). As a low-calorie sweetener, aspartame can help to address this growing epidemic through providing a low-calorie option that, when added to products in place of caloric sweeteners, can significantly reduce the calorie content of foods and beverages. Research has demonstrated the effectiveness of aspartame for weight loss and weight management. By labeling a safe food ingredient that can help with one of the nation’s top public health problems as unsafe, consumers would become confused and may not take advantage of an option to reduce their risk for a variety of health conditions that are associated with being overweight/obese.

Third, IFIC and IFIC Foundation’s research throughout the years tells us that consumers are already aware of aspartame as an ingredient in foods and beverages, and they are aware of its functions and some of its potential benefits. According to the IFIC Foundation’s *2008 Food & Health Survey: Consumer Attitudes toward Food, Nutrition & Health*, 63% of U.S. adults are aware of aspartame. Of those Americans who say they look at the ingredients list when making a food or beverage purchase (51% say they do), only 10% look for low-calorie/artificial sweeteners, which may indicate a low concern about low-calorie sweeteners in general as an ingredient in foods and beverages. In terms

of the benefits of low-calorie sweeteners, 45% of consumers agree that low-calorie sweeteners are an alternative for people with diabetes, and 44% say that low-calorie sweeteners can play a role in weight loss or weight management.

Additionally, IFIC and IFIC Foundation research has shown a stronger trend toward avoidance of sugar than low-calorie sweeteners in recent years. According to the *Food & Health Survey*, nearly seven in ten U.S. consumers (69%) are concerned about the amount of sugar they consume. And according to IFIC's *Food Biotechnology: A Study of U.S. Consumer Attitudinal Trends 2008 Report*, more consumers are avoiding sugar than low-calorie sweeteners. Only 1.5% said they were avoiding low-calorie sweeteners, while 54% said they were avoiding sugar or carbohydrates, with 23% of those specifically avoiding sugar.

Finally, a warning about aspartame would alarm and confuse consumers about a common food ingredient, the safety of which has been established for decades and very recently re-affirmed by FDA. Warning labels should be used for true hazards, which aspartame is not. The potential impact of requiring warnings on products containing aspartame would unnecessarily frighten consumers about safe products that are consumed every day, and dilute the impact of warnings on substances that actually do pose hazards. IFIC has found over the years that consumers need accurate and balanced information about risks so that they are clearly understood.

Aspartame is a substance that is very familiar to the average consumer and already appears on food labeling. As an approved food additive, aspartame must be listed as an ingredient in food and beverage products to which it is added. As such, consumers wishing to avoid aspartame may easily do so by simply reading the label. Furthermore, numerous alternatives to aspartame are available for consumers who wish to reduce their consumption or avoid aspartame.

Most experts agree that the majority of the population, including people with diabetes, pregnant women, and children, can consume aspartame without concerns about adverse health effects. The only exception is those with a rare hereditary condition called phenylketonuria (PKU), in which a person is unable to metabolize phenylalanine, a component of aspartame. All products containing aspartame are also required to provide specific labeling directed at this population.

Additional information about aspartame can be found on the IFIC Foundation Web site:

1. "Facts About Low-Calorie Sweeteners"
<http://www.ific.org/publications/factsheets/lcsfs.cfm>
2. IFIC Review: "Low-Calorie Sweeteners and Health":
<http://www.ific.org/publications/reviews/sweetenerir.cfm>
3. "Everything You Need to Know About Aspartame":
<http://www.ific.org/publications/brochures/aspartamebroch.cfm>

Information on the FDA's Web site:

1. "No Calories...Sweet!" *FDA Consumer Magazine*. July-August 2006
http://www.fda.gov/fdac/features/2006/406_sweeteners.html

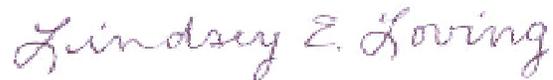
IFIC is a nonprofit organization based in Washington, DC whose mission is to effectively communicate science-based information on food safety and nutrition to health and nutrition professionals, educators, journalists, government officials and others providing information to consumers. IFIC is supported primarily by the broad-based food, beverage, and agricultural industries.

Please contact David Schmidt (schmidt@ific.org) or Lindsey Loving (loving@ific.org), or call (202) 296-6540 if you have any questions or would like to discuss anything contained in this letter.

Thank you,



David B. Schmidt
President & CEO



Lindsey E. Loving
Director, Food Ingredient Communications

International Food Information Council

Attachment: References

References

American Dietetic Association. Position of the American Dietetic Association: Use of Nutritive and Nonnutritive Sweeteners. *JADA*. 255-275. 2004.

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Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. Obesity: Halting the Epidemic by Making Health Easier. At A Glance 2009. February 2009.

<http://www.cdc.gov/NCCDPHP/publications/AAG/obesity.htm>

European Food Safety Authority. Updated opinion on a request from the European Commission related to the 2nd ERF carcinogenicity study on aspartame, taking into consideration study data submitted by the Ramazzini Foundation in February 2009. *The EFSA Journal*. April 20, 2009.

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European Food Safety Authority. Opinion of the Scientific Panel on food additives, flavourings, processing aids and materials in contact with food (AFC) related to a new long-term carcinogenicity study on aspartame. *The EFSA Journal*, (2006), v 356, p 1-44

http://www.efsa.eu.int/science/afc/afc_opinions/1471_en.html

French Food Safety Agency (2002). *Assessment Report*.

<http://www.aspartame.org/pdf/AFSSA-Eng.pdf>

International Food Information Council. *Food Biotechnology: A Study of U.S. Consumer Attitudinal Trends 2008 Report*. October 2008.

<http://www.ific.org/research/biotechres.cfm>

International Food Information Council Foundation. *2008 Food & Health Survey: Consumer Attitudes toward Food, Nutrition & Health*. May 2008.

<http://www.ific.org/research/foodandhealthsurvey.cfm>

Magnuson BA, Burdock GA et al. Aspartame: A Safety Evaluation Based on Current Use Levels, Regulations, and Toxicological and Epidemiological Studies. *Critical Reviews in Toxicology*. 2007;37:629-727.

National Cancer Institute (NCI). "Artificial Sweeteners and Cancer: Questions and Answers." National Cancer Institute Fact Sheet. Revised 10/2006. Internet:

<http://www.cancer.gov/cancertopics/factsheet/Risk/artificial-sweeteners> (accessed 7/11/07).