Caloric Control Commentary Fall 2006 Vol. 28

Weight Loss: What Works, What Doesn't?

When it comes to weight loss, being a winner actually involves losing. Losing unwanted pounds, achieving a healthy weight, and keeping the weight off over the long-term can help reduce the risk of diabetes, heart disease and even certain types of cancers. However, for many dieters this success is not so simple to achieve. The obesity epidemic in the United States is a mounting health crisis. The Centers for Disease Control and Prevention (CDC) report 64.5 percent of adults over the age of 20 are overweight, 30.5 percent are obese.

Diane Quagliani, a registered dietitian and obesity expert, compares the effort to lose weight and maintain weight loss to running a marathon. She notes, "Many dieters mistakenly think that weight loss is a sprint, and focus only on how much weight they can lose in the short term. Once the initial motivation to diet has passed, the weight creeps back on. People who want to succeed at losing weight should remember they are running a marathon, one that requires stamina and daily commitment to reduce calories and increase physical activity over the long haul."

In light of the health risks and the fact that so many need to lose weight, why aren't people doing more about it? According to a 2004 Calorie Control Council survey, one-third of Americans report being on a diet. Unfortunately, the odds are stacked against successful dieting. According to a position paper from the American Dietetic Association, among those individuals who lose weight, 95 percent regain the lost weight plus a few extra pounds within one to five years. Some of the main factors cited for the weight regain include unrealistic weight loss goals, lack of daily physical activity, and the return to previous eating habits. With so many diet books, Internet sites and advice from friends and family, it's hard to know what works and what doesn't when it comes to successful weight loss and weight maintenance. So, what is the solution? It makes sense to examine the habits of the five percent of dieters who manage to succeed — in not only losing weight but also keeping it off.

Beating the Odds

The National Weight Control Registry (NWCR) tracks people who have lost at least 30 pounds and have kept the weight off for five years or more. Based on data collected from the NWCR, inital weight loss can be achieved using a variety of methods, but permanent weight control is linked to a few key healthy habits:

• Eat several low-calorie meals throughout the day, including breakfast. Watching (continued on page 2)



Among those individuals who lose weight, 95 percent regain the lost weight plus a few extra pounds within one to five years.

— American Dietetic Association









5 The Rise of Sugar-Free Chewing Gum

Stepping Up to Stop Childhood Obesity



-Sweetener Update



Weight Loss: What Works, What Doesn't? (continued from page 1)

"Strategies to reverse the upward trend in obesity rates need to focus on both reducing energy intake and increasing energy expenditure."

— Anne de la Hunty, Ashwell Associates

In the end, it is the ability to maintain a lower-calorie lifestyle over the long term that is most effective to weight loss success.

calories and eating at regular times keeps hunger in check and metabolism boosted. The first priority in the morning should be to refuel and re-energize the body from its overnight fast. A balanced, calorie-controlled breakfast is an important component of weight loss maintenance. Breakfast helps start the day off right and is the only meal NWCR members eat routinely. NWCR participants follow breakfast with three to four smaller, low-calorie meals every few hours.

Calories Do Count. Cutting out calories doesn't mean drastic changes, but calorie reduction is important to the success of NWCR participants.

Simple substitutions of low and reduced-calorie products can have major impact on body weight over time. Try substituting a low-calorie beverage with lunch and save 150 calories a day. Over a year that can add up to nearly 16 pounds.

Exercise at a moderate to high level for 60-90 minutes everyday.

Increasing daily activity is important to overall

health. To lose weight and keep it off, NWCR members commit to a daily routine of 60-90 minutes of vigorous exercise. However, the good news is that exercise doesn't have to take place in one block of time. It can be broken up to fit into the busiest of schedules. Aim for 30 minutes in the morning and 30 minutes in the evening of brisk walking, or try several 10minute sessions throughout the day. Take the stairs, park farther from the office and the grocery store, take a walk before dinner, rent an exercise video, ride a bike to the park — there are many different ways to get exercise in the day. The key is to find exercises that are enjoyable which makes it more likely an exercise routine will be maintained.

- Monitor weight frequently to track progress and weight maintenance. It's important to be vigilant about a commitment to health and a healthier lifestyle. Daily or weekly monitoring of weight helps NWCR members stay on track. Little increases in weight can be corrected with simple adjustments before they become major setbacks. NWCR members watch the scale and report taking action quickly to keep a few added pounds from becoming twenty or thirty pounds by immediately making changes to calorie and activity levels.
- Stay committed every day and don't give up after a setback. Weight change is about a new attitude toward a healthier lifestyle. Even after a lapse in their diet or exercise schedules, NWCR participants report an attitude that is positive and focuses on the bigger picture of long-term health and quality of life. A setback is not viewed as a permanent failure, but just

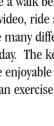
another part of life to which they adapt and adjust to get back to the weight loss method that works ---- the reduced-calorie diet and daily vigorous activity.

What is the Best Diet to Use When Trving to Losing Weight?

There are many ways to reduce calories. However, "the best diet is the one you can stick to," says Dr. Michael Dansinger, Director of Clinical Studies and Obesity Research for the Atherosclerosis Research Laboratory within the Division of Endocrinology, Diabetes, and Metabolism at Tufts-New England Medical Center in Boston. Dr. Dansinger concluded that the impor-

tance of individualized diets was not just the short-term weight loss, but how easily a person could continue to follow the food and behavior changes prescribed by the diet. To prove the equal effectiveness of today's popular diets, Mr. Dansinger led a study in which individuals were randomly selected to follow one of the following diets: The Atkins Diet, The Ornish Diet, Weight Watchers, The South Beach Diet, or The Zone Diet. The dieters were followed for one year to monitor total weight lost and the conclusion was that each diet was equally effective at helping individuals shed unwanted pounds; on average participants lost 10 to 15 pounds.

The diets worked because each promoted reduced-calorie consumption, whether those calories were from carbohydrates (Atkins and South Beach diets), from fat (Ornish diet), or from each food group (Weight-Watchers and The Zone). However, after one year, many of the dieters slowly abandoned their restriction of calories, and the weight crept back. Dr. Dansinger says that diets work in the short-term because people cut out calories and usually increase exercise. The bottom line, continues Dansinger, "Adherence trumps



Stepping Up to Stop Childhood Obesity

It's been talked about for years but the problem is not getting any better

- **Childhood obesity.** Children around the globe are consuming too many calories and not exercising enough. Children who are overweight or obese, with a Body Mass Index (BMI) of 25 or higher, are at increased risk for developing Type 2 diabetes, heart disease, certain types of cancer and a variety of other serious medical conditions. In the U.S. alone, 34 percent of children are overweight and 18 percent of children are classified as obese, according to the Centers for Disease Control and Prevention (CDC).

U.S. Government and Other Organizations React

Childhood obesity is becoming a large concern, and governmental departments are stepping in to help solve the problem. The Federal Trade Commission (FTC) and the U.S. Department of Health and Human Services (HHS) released a report intended to guide the food industry on making changes to help slow the progress of childhood obesity. The report was a result of an FTC/HHS workshop, which brought together industry, consumer, academic and government representatives to examine the role the private sector plays in addressing childhood obesity. Recommendations from the report include: controlling portion sizes, creating lower-calorie products, educating consumers about nutrition and exercise, and creating new labels to identify lowercalorie and nutritious products. The report noted that food companies should "intensify their efforts to create new products and reformulate existing products to make them lower in calories, more nutritious, more appealing to children and more convenient to prepare and eat."

Third-party organizations are also joining in the battle against childhood obesity. "The Alliance for a Healthier Generation," created by Former President Bill Clinton, Arkansas Governor Mike Huckabee and the American Heart Association, announced a partnership with Nickelodeon's campaign, "Let's Just Play," to encourage children and families to adopt healthier lifestyle habits. The campaign hopes to teach children about eating well and being physically active through public service announcements, town hall meetings, events and grassroots activities. "We want to do more than attack the obesity epidemic ... we want kids to become personally invested in living strong healthy lives. And if we do our jobs right, kids will believe that being healthy is cool," said Herb Scannell, President of Nickelodeon Networks and Vice Chairman of MTV Networks.

Family Matters

However, the U.S. government and other organizations recognize their limitations in fighting childhood obesity. Health experts agree that parents need to be involved in helping their children learn about proper nutrition and exercise in order to create life-long healthy habits. A recent Wall Street Journal Online/Harris Interactive Health-Care poll indicates 84 percent of American adults believe childhood obesity is a "major problem," up from 77 percent in 2005. The poll included approximately 2,100 adults, 432 of whom had children under the age of 12.

Combating childhood obesity doesn't necessarily mean a huge diet overhaul. A recent study indicates small changes in the diet may help prevent excessive weight gain in children. The study, presented at the 2006 Pediatric Academic Societies Meeting, found that eliminating 100 calories per day from the diet using products such as Splenda® (a low-calorie sweetener containing sucralose) and adding 2,000 steps a day may help children lose or maintain a healthy weight. Dr. James O. Hill, of the University of Colorado Health Sciences Center, and colleagues evaluated the effectiveness of the America on the Move Foundation's, "Families on the Move" program. Researchers examined more than 200 families, all of which had at least one overweight child between the ages of 7 and 14 years. One hundred and eleven families followed the "Families on the Move Program," cutting 100 calories from the diet by using Splenda® and adding 2,000 steps a day. Ninetyfive families served as the control group and self-monitored their usual calorie and activity levels. After six months, 43 of the children following the "Families on the Move Program" lost or maintained weight. In comparison, half of the children in the control group gained weight. "I think a small change approach is the only way we're going to get a handle on childhood obesity," concluded Dr. Hill.

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"We want to do more than attack the obesity epidemic . . . we want kids to become personally invested in living strong healthy lives. And if we do our jobs

right, kids will believe that being healthy is cool."

— Herb Scannell, President of Nickelodeon Networks and Vice Chairman of MTV Networks



Low Calorie/Low-Fat Bulletin

STUDY SUGGESTS LOW-CALORIE DIET MAY SLOW AGING OF THE HEART

A low-calorie diet may help the heart age at a slower rate, suggests a study from Washington University in St. Louis. The study, published in the 2006 issue of the Journal of American College of Cardiology, compared the heart functions of 25 people (who consumed a nutritionally complete diet of 1,400 to 2,000 calories per day) with another 25 people who ate a typical Western diet of 2,000 to 3,000 calories per day. Participants following the low-calorie diet typically had a heart function of a person 15 years younger than their age. Additionally, their hearts were more elastic and were able to relax between beats, making them more similar to hearts of younger people. "This is the first study to demonstrate that long-term calorie restriction with optimal nutrition has cardiac-specific effects that (delay or reverse) age-associated declines in heart function," said Luigi Fontana, lead author and assistant professor of medicine at Washington University.

OBESE ADULTS RISK Physical disabilities in Later years

Baby boomers with excess weight may be increasing their chances of physical disabilities, according to obesity experts. "Obesity will have a big impact on increasing disability in this country in the coming years unless the epidemic can be halted and turned back," says Richard Suzman



of the National Institute on Aging. Carrying more than 30 pounds of extra weight not only increases a person's chance for Type 2 diabetes, heart disease and cancer but also increases the risk for disability and the inability to perform daily tasks such as bathing and dressing. The obesity epidemic has also put a strain on nursing homes, which are under-staffed and at maximum capacity. People who are obese require intense care to perform daily tasks.

STUDY INDICATES LOW-Calorie Drinks May Reduce obesity Rates Among Teens

A recent study indicates low-calorie drinks may help reduce the prevalence of obesity among teens. The study, published in the March,



2006 issue of the journal *Pediatrics*, found that allowing teens to choose the non-caloric drinks they prefer and then providing them with a sufficient supply of the calorie-free drinks decreased consumption of "sugar-sweetened beverages" by 82 percent. Researchers at the Children's Hospital of Boston divided 103 teen participants into two groups. The first group received free deliveries of non-caloric drinks and spoke to researchers about beverage choices and weight-loss issues several times during the course of the six-month study. The control group did not make any changes in its consumption of higher-calorie beverages. At the end of the six months, the teens in the intervention group had reduced their consumption of higher-calorie beverages by 82 percent and the heaviest one-third of the teens in the group lost approximately six pounds over the course of the study.

DIET SODA SALES CONTINUE TO RISE

As obesity rates continue to soar in the U.S., many consumers are turning to low-calorie and no-calorie foods and beverages to help cut calories without skimping on taste. Because of this trend, sales of diet sodas and other diet beverages have continued to steadily increase. Diet soda sales in 2005 increased 5.2 percent from 2004 with four diet drinks maintaining a top 10-position among leading soda sales, according to

market analyst Freedonia. Many companies are creating new varieties of diet beverages due to improvements in the taste of low-calorie sweeteners as well as a wider variety of low-calorie sweeteners available.





Olestra Update

The Calorie Control Council's newest brochure on olestra is now available.

This four-color brochure provides updated information about olestra and is suitable for both consumers and health professionals. To download a free copy of the brochure, log on to www.caloriecontrol.org. Another source of credible information on olestra is www.olean.com. The Web site offers objective information about olestra and endorsements from prominent health organizations. It also offers a timeline on the creation and approval of olestra.

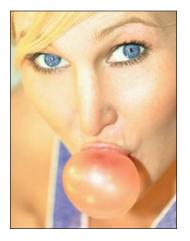
Olestra, a specific type of sucrose polyester blend made from fat with the properties of fat but contributes zero grams of fat or cholesterol and no calories to the diet. Olestra is the first FDAapproved fat replacer that is heat-stable at high temperatures, allowing snacks made with olestra to have great taste. Before its approval in 1996, the Food and Drug Administration and its Food Advisory Committee reviewed approximately 100 animal studies and 40 human studies on the safety of Olestra. The FDA has approved olestra for use in "savory snacks", such as potato chips, tortilla chips, cheese curls, corn chips, crackers and microwave popcorn.



The Rise of Sugar-Free Chewing Gum

When sugar-free chewing gum was first introduced in the late

1950's, the selection was limited. However, today, there is a wide variety of brands and flavors, and sales of sugar-free chewing gum continue to rise. The sugar-free gum market grew 21 percent from 2002 to 2004 and accounted for more than 70 percent of chewing gum sales in the United States alone. The increase in sales



was due largely to a wider variety of low-calorie sweeteners available, which enhance the flavor of sugar-free gum. The growth in sales of sugar-free gum is not limited to the United States. France experienced a 13 percent growth in the sales of sugar-free gum in 2005, while China's sugar-free gum market grew 146 percent from 2004 to 2005, according to market analyst Mintel.

The popularity of sugar-free chewing gum is likely the result of a more health-conscious society. As obesity rates increase, many consumers hope to cut calories through the use of lowcalorie and sugar-free products such as sugar-free chewing gum. The typical piece of sugar-free chewing gum has approximately one to three calories, and research indicates it may be helpful in suppressing appetite.

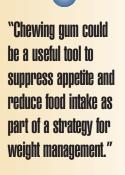
Studies also suggest chewing gum may assist in weight loss or

weight maintenance. In a recent study from the University of Liverpool, chewing gum appeared to decrease cravings for sweets and suppress appetite. The study, presented at the 2005 annual meeting of the North American Society for the Study of Obesity, examined the effects of chewing gum on appetite after a meal. The researchers examined 60 men and women with Body Mass Indexes (BMI) ranging from very lean (BMI of 18.5) to obese (BMI of 33). Lead researcher Marion Hetherington found that chewing gum (regular and sugar-free) after a meal helped participants eliminate 36 calories a day from their snack choices. (Cutting 36 calories a day could lead to a four-pound weight loss over the course of a year.) The chewing gum also helped reduce cravings for sweet snacks after lunch. "Chewing gum could be a useful tool to suppress appetite and reduce food intake as part of a strategy for weight management," Hetherington concluded.

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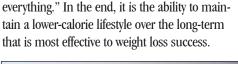
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Are Low-Calorie Sweeteners Effective for Weight Loss?

Foods and beverages sweetened with aspartame, also known by the brand name Equal[®], can help consumers lose weight, according to a recent review of previous aspartame studies. The review, published in the British Nutrition Foundation Nutrition Bulletin, examined 16 randomized controlled trials of aspartame and its effect on caloric intake and body weight. Fifteen of the studies used energy intake as an outcome measure. The estimated rate of weight loss for the 16 studies was approximately 0.4 pounds per week among participants using aspartame sweetened foods and beverages. "Strategies to reverse the upward trend in obesity rates need to focus on both reducing energy intake and increasing energy expenditure," explained lead author Anne de la Hunty. "The use of intense sweeteners as a substitute for sucrose [table sugar] potentially offers one way of helping people to reduce the energy density of their diet without any loss of palatability."

Another study, published by researches at the University of Colorado, examined the impact on weight loss and weight maintenance in families that used Splenda[®] to reduce daily calorie consumption. The families participating in the study were able to cut 100 calories from their daily diet and also increased physical activity by 2000 steps (as recorded with pedometers). The results of the study confirm that using no-calorie sweeteners like Splenda[®] to reduce total calories in combination with increases in physical activity will lead to weight loss and weight maintenance. For more information on this study see the Family Matters section on page 3.

Red Flags for the Savvy Dieter

Although a variety of methods can lead to weight loss, a few approaches spell failure from the start. The American Dietetic Association's Weight Management position paper provides excellent guidance on weight maintenance. Below are a few examples of behaviors and food restrictions that are cited as common pitfalls on the road to weight loss and weight management:

- Diets that emphasize a quantity of certain foods vs. the overall nutritional quality of foods. Focusing on a healthy diet that is low in calories but includes food from all the food groups creates a diet that is easier to stick with for a lifetime.
- Quick fix diets that promise fast weight loss without effort. Slow and steady weight loss is not only the safest but also the most effective way to slim down. Losing more than two pounds a week can signal the metabolism to go into survival mode, decreasing the calories burned everyday and making weight loss difficult and maintenance nearly impossible.
- Restrictive diets that eliminate entire food groups and can't be maintained over the long-term. Very restrictive diets that prohibit one type of food are not likely to satisfy for more than a few weeks. Making sure to eat foods from all the food groups ensures that cravings are satisfied and all the vitamins and minerals essential to a healthy diet are included.
- Setting unrealistic weight-loss goals and/or unrealistic expectations about life after the diet. Many individuals set themselves up for failure by desiring to be the perfect size six or to get back into 32-inch waist pants. If they are unable to achieve these goals they get discouraged and give up on the diet. Sometimes people believe that their whole life will instantly change if they just lose weight — but rarely does that happen. By keeping goals realistic, such as improving blood pressure or increasing personal fitness levels, the likelihood of maintaining lifestyle changes and attaining a healthy weight over the long-term increases. The chances of keeping the weight off also increases because the focus is on health and quality of life.

Bottom Line — Calories Count and Physical Activity Is Not Optional

The research is clear that there is no magic bullet for long-term weight loss success. Being able to incorporate some of the strategies of successful dieters from the NWCR, while avoiding the common pitfalls highlighted above, is key to achieving a healthy weight. Like anything worthwhile, it takes hard work and dedication to be successful using a weight control strategy. In the end, commitment to a reduced-calorie lifestyle and daily activity are the cornerstones for creating a healthier life.

Sweetener Update

Low-calorie sweeteners have received another strong endorsement from the U.S. Food and Drug Administration (FDA). The FDA has issued a fact sheet on sugar substitutes, and published it in the *FDA Consumer* magazine, carrying the headline, "No Calories ... Sweet!" To read the entire article, visit: http://www.fda.gov/fdac/ features/2006/406_sweeteners.html.

Acesulfame Potassium: Acesulfame Potassium was discovered in 1967 and is currently used in thousands of foods, beverages, oral hygiene and pharmaceutical products in about 90 countries. It is a non-caloric sweetener and has a clean sweet taste that is 200 times sweeter than sugar. Acesulfame potassium is also often used in blends with other sweeteners. This low-calorie sweetener has been very thoroughly studied and has been determined safe by the FDA, the Joint Expert Committee on Food Additives (JECFA) of the Food and Agriculture Organization/World Health Organization, and the Scientific Committee on Food of the European Union. In 2003, the FDA granted acesulfame potassium general-purpose approval.

Fructose: A new fructose Web site will soon be available. Log on to www.fructose.org to learn more about crystalline fructose, why it is used in a variety of foods and beverages, the differences between high fructose corn syrup and crystalline fructose, and more. (The information will be available in a variety of languages on the Web site.) A crystalline fructose Fact Sheet was published in the September issue of the *Journal of the American Dietetic Association*. The Fact Sheet can be downloaded from the American Dietetic Association's web site, www.eatright.org or www.fructose.org. Pure crystalline fructose offers many functional benefits when added to a wide range of foods and beverages, improving product palatability and stability. It is also safe for people with diabetes because it does not cause surges and dips in blood glucose levels.

Neotame: Neotame is a no-calorie sweetener composed of amino acids, aspartic acid and phenylalanine. It is 7,000-13,000 times sweeter than sugar and is used in combination with a variety of other sweeteners in many products. Extensive research has been conducted on neotame to establish its safety as a sweetening ingredient. The U.S. Food and Drug Administration (FDA) reviewed over 100 scientific studies before approving neotame. Neotame received a general use approval from the FDA in 2002.

Saccharin: Saccharin is the oldest of the approved low-calorie sweeteners, and has been used in foods and beverages for over 125 years. A new four-color saccharin brochure is now available on www.saccharin.org and www.caloriecontrol.org. The brochure is designed for a variety of audiences and contains information on the benefits, uses and safety of saccharin. The brochure also contains information from a variety of health professional groups, which support the safety and benefits of saccharin.

Sucralose: A new four-color sucralose brochure is now available on www.sucralose.org and www.caloriecontrol.org. The brochure is packed with useful information concerning the history of sucralose (including how it was discovered), the many studies conducted on the safety and benefits of sucralose, and how sucralose is used in a variety of products. Additional materials can be found online on www.sucralose.org. Check out the calorie savings calculator to determine the number of calories saved by using sucralose-sweetened foods and beverages.

Polyols: Log on to www.polyol.org for more information about polyols. Download a general information brochure, a Q&A brochure, and other informative articles and information on polyols. There are currently eight polyols available for use in the United States, including erythritol, hydrogenated starch hydrolysates, isomalt, lactitol, maltitol, mannitol, sorbitol and xylitol.

Don't forget to check out the latest low-calorie sweetener brochure, entitled, "Sweet Choices." This updated, four-color brochure can be downloaded from www.caloriecontrol.org and contains valuable information on a variety of low-calorie sweeteners.

Aspartame Update: Safety Re-Confirmed

There seems to be a lot of misinformation circulating these days, especially when it comes to aspartame. And, it can be difficult to sort out fact from fiction. For example, by "Googling" the word aspartame almost three million listings appear — with many of these sites claiming that aspartame causes everything from lupus to multiple sclerosis. Most recently, some media outlets reported on a study by Italian-based Ramazzini researchers who claimed that aspartame caused leukemias and lymphomas in rats. But such articles don't tell the whole story. Many failed to include the following pertinent information:



(continued on page 8)

• The design and execution of the Ramazzini study did not follow guidelines set up by the National Toxicology Program (NTP), the U.S. government toxicology initiative administered by the National Institute of Environmental and Health Sciences (NIEHS). Nor did Ramazzini researchers follow internationally established protocols for evaluation of animal carcinogenicity study findings. The NTP and other organi-

zations have established guidelines for pathology peer review in order to provide scientific consensus that study conclusions are valid. Such an independent review of the pathology slides from this study has not been conducted.

 NTP recently completed three animal studies designed to evaluate whether aspartame causes cancer. These U.S. government-funded and managed studies were conducted using Good Laboratory Practices (GLP) and individ-

> uals considered experts in their profession reviewed the results. The results of these cancer studies, in which aspartame was fed at levels similar to those reportedly fed in the Ramazzini study, unequivocally indicated that "there was no evidence of carcinogenic activity [cancer] of aspartame."

- Four long-term carcinogenicity studies on aspartame conducted in accordance with international standards have found no relationship between aspartame and any form of cancer. The studies were submitted to numerous regulatory agencies, such as the FDA, which conducted exhaustive reviews of the data.
- Based on a study of the National Cancer Institute's Surveillance, Epidemiology and End Results (SEER) program, there has been no increase in lymphoma and leukemia rates in the U.S. population since aspartame's introduction in 1981.

Since the publication of the Ramazzini study, a new National Institutes of Health study, conducted by the National Cancer Institute, examined aspartame consumption data in relationship to leukemias, lymphomas and brain tumors. The researchers found that consumption of aspartame-containing beverages did not increase the incidence of such diseases.

Further, the European Food Safety Authority (EFSA) reviewed the findings from Ramazzini, and disagreed with the researchers conclusions. According to Dr. Herman Koeter, EFSA Acting Executive Director, "EFSA considers that the results of this new

> study on aspartame [by Ramazzini researchers] do not provide scientific basis for reconsidering its [aspartame's] use in foods." The FDA has also noted, "Based on the large body of evidence we have reviewed, including several studies on carcinogenicity which showed no adverse effects and data on how aspartame is metabolized by humans, we have no reason to believe that aspartame would cause cancer. Thus, it remains FDA's position that use [of aspartame] is safe." Links to the EFSA and FDA statements are available at:

http://www.efsa.europa.eu/en/ press_room/press_release/1472.html, http://www.fda.gov/bbs/topics/NEWS/ 2006/NEW01369.html.

"Despite allegations by critics, this new NCI study, in conjunction with a multitude of other scientific studies, clearly demonstrates that aspartame is not a carcinogen and can be a beneficial and safe tool in helping people reduce calories and control their weight. On the other hand, obesity has been shown to be directly related to certain types of cancer," noted Lyn Nabors, President of the Calorie Control Council.

For more information about the safety and benefits of aspartame, including information from health professional groups and regulatory authorities, log on to www.aspartame.org.

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a beneficial and safe tool in helping people reduce calories and control their weight."

"Aspartame... can be

— Lyn Nabors, President of the Calorie Control Council

Calorie Control

Providing timely information on low-calorie and reduced-fat foods and beverages, weight management, physical activity and healthy eating.

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