New Mexico State Senate

State Capitol
Santa Fe

COMMITTEES:

MEMBER:
- Public Affairs
- Rules

SENATOR GERALD ORTIZ y PINO
D-Bernalillo-12

400 12th NW
Albuquerque, NM 87102

Home: (505) 243-1509
E-Mail: jortizyp@aol.com
Senate E-Mail: gerald.ortizypino@nmlegis.gov

Re: Hawaii HB 2680

06/02/08

Dear Chairman Dr. Green, Vice Chairman Mizuno, and members of the Hawaiian House Health Committee:

As a fellow legislator and member of the New Mexico State Senate, I write to you now to say that I support your efforts to ban aspartame. I am concerned that there is incontrovertible medical evidence that ingesting aspartame, which includes methanol and formaldehyde, is doing entirely avoidable, terrible, medical damage, particularly in causing neurodegenerative illnesses. An ordinary precautionary principle would strongly indicate that it should be off the market until proven completely safe, and not just by studies paid for by industry supporters.

Unfortunately, the FDA has shown no interest in rescinding its approval thus far. Hawaii, though, is in a strong position to limit or entirely prevent it from being imported in products coming from the U.S. mainland and foreign countries. Please do not give in to the corporate lobbyists' theories of federal pre-emption; they were advanced by corporations in New Mexico's legislature in 2006 and in 2007 and succeeded in killing the bills which I carried.

I hope you will give your bill a "do pass" in your Health Committee. This will also send a very strong message to the FDA Commissioner that corporate theories and corporate misrepresentations are not going to prevail in Honolulu, even if they have temporarily succeeded in Santa Fe!

Thank you for your time and consideration,

Senator Gerald Ortiz y Pino

000053

LINDA LINGLE
GOVERNOR OF HAWAII

CHIYOME LEINAALA FUKINO, M.D.
DIRECTOR OF HEALTH

STATE OF HAWAII
DEPARTMENT OF HEALTH
P.O. Box 3378
HONOLULU, HAWAII 96801-3378

In reply, please refer to:
File:

Committee on Health

HB No. 2680 , RELATING TO FOOD

Testimony of Chiyome Leinaala Fukino, M.D.
Director of Health

February 8, 2008
8:00am

Department's Position: The Department of Health respectfully opposes the bill.

Fiscal Implications: None.

Purpose and Justification: The intent of this bill is to ban the manufacturing, holding, sale, or delivery of any foods that contain aspartame.

The Department does not support this bill because aspartame is considered GRAS (generally recognized as safe) by the U.S. Food and Drug Administration (FDA). Aspartame is one of the most thoroughly tested and studied food additives the agency has ever approved. The agency reviewed more than 100 toxicological and clinical studies and confirmed that aspartame is safe for the general population.

On September 11, 2007, a new study of aspartame was conducted and concluded that aspartame is safe, even among its heavy users. The review, "Aspartame: A Safety Evaluation Based on Current use Levels, Regulations, and Toxicological and Epidemiological Studies," published in the September issue of the Informa Healthcare's *Critical Reviews of Toxicology*. Informa Healthcare is the oldest commercial journals publisher in the world, and one of the leading global academic publishers. The

study reviewed more than 500 reports, including toxicological, clinical and epidemiological studies dating from 1970's preclinical work to the latest studies on the high-intensity sweetener. Along with use levels and regulations data, an international expert panel from 10 universities and medical schools evaluated the safety of aspartame for people of all ages and with a variety of health conditions. The panel concluded that aspartame does not have carcinogenic or cancer-promoting activity; is safe at current levels of consumption; has no effect on behavior, cognitive function, neural function or seizures in any of the groups studied; is safe for use by diabetics and may aid diabetics in adhering to a sugar-free diet; and there is no evidence to support an association between aspartame consumption and obesity.

The review panel researched for 11 months reviewing past literature on aspartame, which was introduced in the food supply in 1981. Currently, aspartame is consumed by over 200 million people around the world and is found in more than 6,000 products including carbonated soft drinks, powdered soft drinks, chewing gum, confections, gelatins, dessert mixes, puddings and fillings, frozen desserts, yogurt, tabletop sweeteners, and some pharmaceuticals such as vitamins and sugar-free cough drops.

The Department understands that public health would be further served if it would concentrate its efforts on the food safety inspections of the regulated community, food recalls of adulterated foods, and not the monitoring of the removal of aspartame-containing foods, which are already considered safe.

Thank you for the opportunity to testify.

Calorie Control Council
Comments on Aspartame
Hearing on HB 2680
Committee on Health
and
Committee on Human Services & Housing
February 8, 2008
8:00 a.m.

Submitted by Lyn O'Brien Nabors, President
Calorie Control Council
1100 Johnson Ferry Road, Suite 300
Atlanta, Georgia 30042
Written Comments Only

The Calorie Control Council is an international association representing companies that make low- and reduced-calorie foods and beverages, including companies that make ingredients for these products. Companies that make and use aspartame are among the Council's members.

Recent statistics released by the Centers for Disease Control and Prevention confirm that 34 percent of US adults, 20 years and over, are obese and more than 65 percent are overweight or obese. Scientific research shows that obesity is related to diabetes, heart disease, certain types of cancer and a number of other health conditions. Aspartame and aspartame-sweetened products can help people reduce and control calories

According to 2007 nationally projectable consumer research conducted for the Calorie Control Council, 194 million adult Americans use low-calorie, sugar free foods and beverages. The primary reason given for using these products is "to stay in better overall health" and 87 percent of low-calorie, sugar free product users say they want more of these products. And, according to Dr. Madeleine Sigman-Grant, author of research published in the *Journal of Food Science*, people who use products containing low-calorie sweeteners, are more aware of the foods they eat and they are eating in a more healthful way and consuming fewer calories.

Aspartame is an important ingredient of low- and reduced-calorie foods and beverages. It that has been consumed by hundreds of millions of people for more than two decades. A simple ingredient, aspartame's components are found in everyday foods.

Aspartame is does not contain neurotoxic or carcinogenic metabolites. The body digests the aspartame in exactly the same way it digests everyday foods. Aspartame, composed of aspartic acid, phenylalanine (amino acids, the building blocks of protein) and a small amount of methanol, brings nothing "new" to the diet that is not already present in milk, fruits, vegetables and meats. For example, a serving of tomato juice provides about six times more methanol than a serving of a diet beverage sweetened 100% with aspartame. A serving of nonfat milk provides about six times more phenylalanine and 13 times more

aspartic acid compared with a diet beverage sweetened 100% with aspartame. A banana has twice the amount of aspartic acid, half the phenylalanine and the same amount of methanol as a serving of a diet beverage sweetened with 100% Aspartame. Once consumed, aspartame breaks down into its components, which the body digests in exactly the same way as those in everyday foods.

Aspartame has been tested for more than three decades, in more than 200 studies. Its safety has been confirmed by the Joint Expert Committee on Food Additives (JECFA) of the Food and Agriculture Organization/World Health Organization, the European Food Safety Authority, the U.S. Food and Drug Administration (FDA) and regulatory bodies in over 100 countries.

Aspartame has been reviewed and determined safe by the FDA for each new product category approval. The agency has reviewed aspartame 23 times over the past 26 years. Aspartame was first approved in 1981 during the Reagan administration and received a general use approval in 1996 during the Clinton administration. The FDA continues to review the use of aspartame and stated as recently as 2007 that there is no need for dietary change in regard to the use of aspartame.

A 2007 comprehensive review of more than 500 aspartame studies by a panel of eight leading experts in the areas of toxicology, epidemiology, metabolism, pathology, biostatistics etc., conclusively determined that aspartame is safe. The review, "Aspartame: A Safety Evaluation Based on Current Use Levels, Regulations, and Toxicological and Epidemiological Studies," was published in the September issue of *Critical Reviews in Toxicology,* the premier journal in its field.

Aspartame sweetened products provide the same nutrition as their full-calorie counterparts but with fewer calories. For example, an aspartame-sweetened yogurt used in place of a full-calorie yogurt provides the same amount of calcium, protein, and vitamins as its full-calorie counterpart but with approximately 50% fewer calories. Using gelatin sweetened with aspartame can be an ideal carrier for fruit and saves 70 calories per ½ cup. Flavored waters sweetened with aspartame offer a healthful hydration choice without calories.

Foods and beverages sweetened with aspartame offer people with diabetes a much wider variety of products from which to choose and greater flexibility in budgeting their carbohydrate intake. Thus, it can help them follow nutrition recommendations while enjoying good-tasting foods.

In a long-term study to evaluate the usefulness of aspartame containing products in weight loss and weight control, Harvard researchers concluded that aspartame, as part of a multidisciplinary weight control program, may facilitate weight control.

Leading health organizations such as the American Dietetic Association, the American Diabetes Association and the American Medical Association's Council on Scientific Affairs support the safety of aspartame.

Removing aspartame from the food supply would seriously impact the availability of low- and reduced calorie foods and beverages, negatively affecting the millions of people who depend on these products to reduce and control calories.

We appreciate your consideration of the Calorie Control Council's comments.

May Mizuno

From: Cori Brackett [cori@soundandfury.tv]
Sent: Thursday, February 07, 2008 9:34 AM
To: HLTtestimony
Subject: From Cori Brackett re. HB2680

Dear Chairman Dr. Green, Vice Chairman Mizuno, and members of the Hawaiian House Health Committee:

As the documentary filmmaker behind the films, Sweet Misery and Sweet Remedy, which both delve deeply into an analysis of aspartame - its history and chemical breakdown - I am writing to commend you for seriously considering the health of Hawaiians by bringing forward a bill to ban aspartame. It is a truly admirable and courageous act, in the spirit of positive community-based change. I, myself, am an aspartame survivor and personally can attest to the physical horrors it can inflict. In 2002, I was diagnosed with multiple sclerosis and shortly thereafter, was confined to a wheelchair with double vision and slurred speech. As I began to recover, I made the aforementioned aspartame documentaries, needing to alert the public at large and to spare people from my personal traumas. I also wanted to learn as much as I could during this film-making process about the truth or fiction of the dangers of aspartame. Although I did not want to believe that there was a problem with what had been my beverage of choice for twenty years, I found that in aspartame's case at least, where there was smoke, there was fire - a raging inferno, in fact.

The largest tragedy in my own life was thinking that aspartame was not only safe, but good for me. This same story has been repeated by countless aspartame survivors who have contacted me as they regain their health. Many other products have found to be toxic after entering the market place and have subsequently been banned. Look at DDT in pesticides; lead in gasoline;
or even Red #1, #2 and #4 for use as food dyes. Aspartame is a very
sneaky, cumulative toxin accompanied by a smiley face. This is very dangerous. As more knowledge comes to light, it has become your responsibility and high honor to react to this new understanding. I ask you to give your bill a do pass in your Health Committee.

Thank you truly for your time and consideration.

Sincerely,

Cori Brackett
Sound and Fury Productions
2301 East Broadway
Tucson, AZ 85719
(520) 884-4346 (Direct line)
www.sweetremedy.tv

February 7, 2008

The Honorable Josh Green, M.D.
Chair, Committee on Health
Hawaii House of Representatives
415 South Beretania Street
Honolulu, HI 96813

RE: HB 2680, Relating to Food (Say)

Dear Representative Green:

On behalf of the Grocery Manufacturers Association, I am writing to express our opposition to House Bill 2680 (Say), which would prohibit foods containing aspartame. The measure is scheduled for hearing in the Committee on Health on Friday, February 8.

The Grocery Manufacturers Association (GMA) represents the world's leading food, beverage and consumer products companies. The Association promotes sound public policy, champions initiatives that increase productivity and growth and helps to protect the safety and security of the food supply through scientific excellence. The GMA board of directors is comprised of fifty-two chief executive officers from the Association's member companies. The $2.1 trillion food, beverage and consumer packaged goods industry employs 14 million workers, and contributes over $1 trillion in added value to the nation's economy.

Aspartame is a safe low calorie sweetener approved for use in foods as proven in recent peer-reviewed, scientific studies, and as determined by the United States Food and Drug Administration (FDA). Aspartame has been reviewed and determined safe 23 times over the past 26 years by the FDA. Aspartame was first approved in 1981 during the Reagan administration and received a general use approval in 1996 during the Clinton administration. The FDA continues to review the use of aspartame and stated as recently as 2006 that there is no need for dietary change in regard to the use of aspartame.

A 2007 comprehensive review of more than 500 studies by a panel of eight leading experts in the areas of toxicology, epidemiology, metabolism, pathology, biostatistics etc., conclusively determined that aspartame is safe. The review, "Aspartame: A Safety

GROCERY MANUFACTURERS ASSOCIATION
1350 I Street, NW :: Suite 300 :: Washington, DC 20005 :: ph 202-639-5900 :: fx 202-639-5932 ::
www.gmaonline.org

Evaluation Based on Current Use Levels, Regulations, and Toxicological and Epidemiological Studies," was published in the September 2007 issue of *Critical Reviews in Toxicology,* the premier journal in its field. Furthermore, leading health organizations such as the American Dietetic Association, the American Diabetes Association and the American Medical Association's Council on Scientific Affairs support the safety of aspartame.

Additionally, aspartame provides those individuals who must control sugar intake for health reasons, such as the control of diabetes and excessive weight. With more than 65 percent of the population overweight, aspartame and products sweetened with aspartame can help people reduce and control calories. Foods and beverages sweetened with aspartame offer people with diabetes a much wider variety of products from which to choose and greater flexibility in budgeting their carbohydrate intake. Thus, it can help them follow nutrition recommendations while enjoying good-tasting foods.

For these reasons, we respectfully request that this committee oppose this legislation.

Sincerely,

Caroline Silveira
Director, State Affairs
Grocery Manufacturers Association

GROCERY MANUFACTURERS ASSOCIATION

1350 I Street, NW :: Suite 300 :: Washington, DC 20005 :: ph 202-639-5900 :: fx 202-639-5932 ::
www.gmaonline.org

AMERICAN BEVERAGE ASSOCIATION

Representative Josh Green, Chair
House Committee on Health

Friday, February 8, 2008
8:00 a.m., Conference Room 329

RE: HB 2680 - RELATING TO FOOD

Chair Green, Vice Chair Mizuno, and Members of the Committee:

The American Beverage Association has been the trade association for America's non-alcoholic refreshment beverage industry for more than 85 years. Formerly the National Soft Drink Association, ABA today represents thousands of beverage producers, distributors, franchise companies and support industries in Hawaii and across the country.

Aspartame – most commonly known as NutraSweet and Equal – is one of the most thoroughly tested ingredients of all time with more than 200 scientific studies confirming its safety. It was approved by the U.S. Food and Drug Administration (FDA) for use in food in 1981 and for soft drinks in 1983.

Since that time, aspartame has been reviewed and approved by regulatory agencies around the globe, including the European Union Scientific Committee on Food and the Joint Food and Agriculture Organization/World Health Organization (JECFA) Expert Committee on Food Additives. In all, regulatory agencies in more than 100 countries have reviewed aspartame and found it to be safe for use. The National Cancer Institute has also validated its safety for both over-the-counter use and use in food products.

Consumer research shows that low- and reduced-calorie foods and beverages have become part of the lifestyle of millions of men and women who want to stay in better overall health, control their weight, or simply enjoy the many low- or reduced-calorie products available.

Aspartame has helped provide calorie-conscious consumers with a wide variety of good-tasting, low- and reduced-calorie products that are easily incorporated into a healthful lifestyle. Diet soft drinks are the beverage of choice for millions of Americans who are seeking to reduce their calories without having to give up their favorite soft drinks. Currently, aspartame is found in more than 6,000 products and is consumed by over 200 million people around the world.

Further, studies have shown that foods and beverages sweetened with aspartame can be an effective "tool" as part of a weight management program. Researchers at Harvard Medical School have concluded that aspartame "is a valuable adjunct to a comprehensive program of balanced diet, exercise and behavior modifications for losing weight." And a recent review of aspartame by the British Nutrition Foundation showed that a diet including foods and drinks containing aspartame was effective in maintaining or losing weight without forgoing taste.

Diet soft drinks can also help adolescents with calorie consumption and teach them the importance of balancing calories consumed with calories burned. In fact, along with the beverage industry, the Alliance for a Healthier Generation, a join initiative of the American Heart Association and the William J. Clinton Foundation, developed School Beverage Guidelines that provide for "no- or low- calories beverages with up to 10 calories/8 oz." in high schools.

The American Beverage Association respectfully requests that the Committee hold HB 2680. Thank you for the opportunity to testify.

000062

Representative Josh Green, MD., Chair
Representative John Mizuno, Vice Chair
Committee on Health
State Capitol, Honolulu, Hawaii 96813

HEARING Friday, February 8, 2008
8:00 am
Conference Room 329

RE: HB2680, Relating to Food

Chair Green, Vice Chair Mizuno, and Members of the Committee:

Retail Merchants of Hawaii (RMH) is a not-for-profit trade organization representing about 200 members and over 2,000 storefronts, and is committed to support the retail industry and business in general in Hawaii.

RMH opposes HB2680, which bans the use of the artificial sweetener aspartame in food products.

The FDA, the governmental agency charged with safeguarding the American food supply, has concluded that aspartame is safe for the general public, including diabetics, pregnant and nursing women, and children.

Aspartame is one of the most thoroughly studied ingredients in the food supply. Prior to its approval by the FDA in 1981, aspartame's safety was documented in more than 100 scientific studies. These tests were conducted in laboratory animals and several human subpopulations, including healthy infants, children, and adults, lactating women, persons with diabetes, and obese individuals. Aspartame was tested in amounts many times higher than individuals could possibly consume in the diet. The results of these studies demonstrated that aspartame is safe and not associated with adverse health effects.

Aspartame has been approved for use by more than 100 nations worldwide. It is used widely in major industrialized countries such as the U.S., Canada, the United Kingdom, Germany and Japan. Aspartame has also been reviewed and found safe by expert scientific committees, including the Joint Expert Committee on Food Additives (JECFA) of the United Nations Food and Agricultural Organization and World Health Organization as well as the Scientific Committee on Food of the European Union. In detailed re-reviews of aspartame's safety in 2002 and 2003, health authorities in the European Union, United Kingdom, France, and Canada reaffirmed aspartame's safety.

Considering that about two-thirds of Americans are overweight or obese, and obesity is an acknowledged problem in Hawaii, regulating appropriate caloric intake is important. Since aspartame-sweetened foods and beverages are lower in calories than their sugar-sweetened counterparts, such low- or reduced-calorie products, together with regular physical activity, can help with weight control. The results from a 3-year study at Harvard Medical School showed that aspartame is a valuable aid to a long-term weight management program that included diet and physical activity.

Given the data provided, we respectfully request that you hold HB2680. I have attached a list of pertinent and enlightening web sites that RMH members provided, should you want additional information. Thank you for your consideration and for the opportunity to comment on this measure.

Carol Brizill

President

RETAIL MERCHANTS OF HAWAII
1240 Ala Moana Boulevard, Suite 215
Honolulu, HI 96814
ph: 808-592-4200 / fax: 808-592-4202

000063

http://www.time.com/time/magazine/article/0,9171,990167,00.html a great article in Time magazine exposing the aspartame hoax for what it is.

http://www.joslin.org/managing_your_diabetes_696.asp great article from the Joslin Diabetes Medical Center on "Correcting Internet Myths About Aspartame". Joslin is an affilliate of Harvard Medical School.

http://www.caloriecontrol.org/aspartame.html the Calorie Control Council site

http://www.aspartameorg/aspartame_vpk.html industry website that has tones of studies, reports, links on aspartame.

http://www.uklupus.co.uk/aspart.html Lupus Foundation site, correcting the falsehood tha aspartame causes lupus.

http://tafkac.org/ulz/nutrasweet.html article exposing aspartame wackiness as an Urban Myth.

http://www.ific.org/publications/brochures/aspartamebroch.cfm the International Food Information Council information on aspartame.

http://www.snopes.com/medical/toxins/aspartame.asp internet magazine that tackles the aspartame myth.

http://web.mit.edu/newsoffice/1998/aspartame-0916.html Link to MIT study on aspartame, but as a disclaimer they did get industry money so we do not push this one too much.

http://www.quackwatch.org/search/webglimpsecgi?othersite=&ID=2&query=aspartame a site that is very famous where medical doctors expose quack stories, includes aspartame story/

http://www.junkscience.com/news/nutrasweet.html a site that exposes scientific hoaxes.

http://www.equal.com/downloads/Aspartame_Fact_Sheet.pdf this page has printable brochures from one of the manufacturers, "Equal". Honestly we were more successful staying away from anything the industry printed, and going for third party articles and studies.

http://web.archive.org/web/20040205093914/http://www.healthcentral.com/DrDean/DeanFullTextTopics.cfm?ID=8134 this one is from HealthCentral, where real doctors write articles on health questions.

http://www.aspartame.net/FAQ_menu.asp this is an industry sponsored site with articles, links, studies

http://www.fda.gov/bbs/topics/ANSWERS/ANS00772.html article from the Food and Drug Administration

http://www.cfsan.fda.gov/~dms/fdsugar.html FDA consumer page on aspartame

http://www.cancer.gov/cancertopics/factsheet/Risk/artificial-sweeteners National Cancer Institute clears up the aspartame myth with a huge study

http://www.alz.org/alzheimers_disease_myths_about_alzheimers.asp National Alzheimers Institute tackles the subject, scroll down to Myth Number 4. What is great about these groups is that most legislators will know someone from one of these credible health groups that can sort out the crazy stuff.

http://www.digestivefacts.com/ms/news/532606/main.html a story about the European FDA debunking the Ramazzini rat study.

http://www.media-awareness.ca/english/resources/special_initiatives/wa_resources/wa_shared/tipsheets/deconstructing_webpages.cfm the Media Awareness network did a watchdog report on the aspartame hoax and how the internet was used effecteively to spread it.

http://www.hc-sc.gc.ca/fn-an/nutrition/prenatal/national_guidelines-lignes_directrices_nationales-06g_e.html the Health Canada website clears up the myth that aspartame should not be consumed by pregnant women.

http://www.aafa.org/display.cfm?id=9&sub=20&cont=285 the Allergy and Asthma Foundation site tackles aspartame

http://urbanlegends.about.com/library/blasp.htm about.com did a 3 page well researched story exposing the woman that started the aspartame hoax.

http://www.doctorslounge.com/rheumatology/forums/backup/topic-1156.html an advice column for people asking doctors questions.

http://www.nationalmssociety.org/site/PageServer?pagename=HOM_ABOUT_headlines_aspartame story from Multiple Sclerosis society explaining aspartame scare is a hoax.

http://www.encolombia.com/aspartamo6.htm statement by various groups denouncing aspartame myth.

http://www.mult-sclerosis.org/news/Jan1999/DebunkingInternetHealthAlarms.html debunking article from MS Foundation, calling the aspartame myth the "scare du jour".

http://www.aspartame.info/opinion/op_ama.html the American Medical Association statement

http://www.cancer.org/docroot/ped/content/ped_1_3x_aspartame.asp American Cancer Society

http://www.americanheart.org/presenter.jhtml?identifier=4447 American Heart Association

http://www.mayoclinic.com/health/diabetes-diet/NU00592/UPDATEAPP=0 none other than the Mayo Clinic

http://www.kidshealth.org/parent/food/question/aspartame.html the Neours Foundation

http://www.diabetes.org/nutrition-and-recipes/nutrition/sweeteners.jsp The American Diabetes Association

http://ec.europa.eu/food/fs/sc/scf/out155_en.pdf Scientific Committee of the European Food Safety Commission

http://www.nzfsa.govt.nz/publications/media-releases/2007/aspartame-press-release.htm New Zealnad Food Safety Authority

http://wwwcdc.gov/mmwr/preview/mmwrhtml/00000426.htm the Center For Disease Control (CDC)

http://www.foodstandards.gov.uk/news/newsarchive/2002/dec/aspartamereview United Kingdom Food Standards Agency

http://www.eatright.org/cps/rde/xchg/ada/hs.xsl/nutrition_1030_ENU_HTML.htm American Dietetic Association

http://www.msnbc.msn.com/id/12155793/from/ET/ MSNBC story

http://wwwpregnancytoday.com/experts/n-dietsodas.htm Pregnancy Today magazine

May Mizuno

From: Warren Woodward [w6345789@yahoo.com]
Sent: Wednesday, February 06, 2008 1:36 PM
To: HLTtestimony
Subject: HB2680 testimony

To: Representative Josh Green, Chair, House Committee on Health

From: Warren Woodward, 8805 Kula Hwy,, Kula, Hawaii 96790. 808 878 3103

Re: In support of HB2680, RELATING TO FOOD, being heard by HLT on Friday, February 8, 2008, at 8:00 am in House conference room 329.

Testimony: Aspartame is, by far, the most dangerous substance on the market that is added to foods.

Aspartame is the technical name for the brand names NutraSweet, Equal, Spoonful, and Equal-Measure. It was discovered by accident in 1965 when James Schlatter, a chemist of G.D. Searle Company, was testing an anti-ulcer drug.

Aspartame was approved for dry goods in 1981 and for carbonated beverages in 1983. It was originally approved for dry goods on July 26, 1974, but objections filed by neuroscience researcher Dr John W. Olney and Consumer attorney James Turner in August 1974 as well as investigations of G.D. Searle's research practices caused the U.S. Food and Drug Administration (FDA) to put approval of aspartame on hold (December 5, 1974). In 1985, Monsanto purchased G.D. Searle and made Searle Pharmaceuticals and The NutraSweet Company separate subsidiaries.

Aspartame accounts for over 75 percent of the adverse reactions to food additives reported to the FDA. Many of these reactions are very serious including seizures and death.(1) A few of the 90 different documented symptoms listed in the report as being caused by aspartame include: Headaches/migraines, dizziness, seizures, nausea, numbness, muscle spasms, weight gain, rashes, depression, fatigue, irritability, tachycardia, insomnia, vision problems, hearing loss, heart palpitations, breathing difficulties, anxiety attacks, slurred speech, loss of taste, tinnitus, vertigo, memory loss, and joint pain. According to researchers and physicians studying the adverse effects of aspartame, the following chronic illnesses can be triggered or worsened by ingesting of aspartame:(2) Brain tumors, multiple sclerosis, epilepsy, chronic fatigue syndrome, parkinson's disease, alzheimer's, mental retardation, lymphoma, birth defects, fibromyalgia, and diabetes.

Aspartame is made up of three chemicals: aspartic acid, phenylalanine, and methanol. The book "Prescription for Nutritional Healing," by James and Phyllis Balch, lists aspartame under the category of "chemical poison." As you shall see, that is exactly what it is.

What Is Aspartame Made Of?

Aspartic Acid (40 percent of aspartame)

Dr. Russell L. Blaylock, a professor of neurosurgery at the Medical University of Mississippi, recently published a book thoroughly detailing the damage that is caused by the ingestion of excessive aspartic acid from aspartame. Blaylock makes use of almost 500 scientific references to show how excess free excitatory amino acids such as aspartic acid and glutamic acid (about 99 percent of monosodium glutamate (MSG) is glutamic acid) in our food supply are causing serious chronic neurological disorders and a myriad of other acute symptoms.(3)

How Aspartate (and Glutamate) Cause Damage

Aspartate and glutamate act as neurotransmitters in the brain by facilitating the transmission of

information from neuron to neuron. Too much aspartate or glutamate in the brain kills certain neurons by allowing the influx of too much calcium into the cells. This influx triggers excessive amounts of free radicals, which kill the cells. The neural cell damage that can be caused by excessive aspartate and glutamate is why they are referred to as "excitotoxins." They "excite" or stimulate the neural cells to death.

Aspartic acid is an amino acid. Taken in its free form (unbound to proteins) it significantly raises the blood plasma level of aspartate and glutamate. The excess aspartate and glutamate in the blood plasma shortly after ingesting aspartame or products with free glutamic acid (glutamate precursor) leads to a high level of those neurotransmitters in certain areas of the brain.

The blood brain barrier (BBB), which normally protects the brain from excess glutamate and aspartate as well as toxins, 1) is not fully developed during childhood, 2) does not fully protect all areas of the brain, 3) is damaged by numerous chronic and acute conditions, and 4) allows seepage of excess glutamate and aspartate into the brain even when intact.

The excess glutamate and aspartate slowly begin to destroy neurons. The large majority (75 percent or more) of neural cells in a particular area of the brain are killed before any clinical symptoms of a chronic illness are noticed. A few of the many chronic illnesses that have been shown to be contributed to by long-term exposure to excitatory amino acid damage include:

- Multiple sclerosis (MS)
- ALS
- Memory loss
- Hormonal problems
- Hearing loss
- Epilepsy
- Alzheimer's disease
- Parkinson's disease
- Hypoglycemia
- AIDS
- Dementia
- Brain lesions
- Neuroendocrine disorders

The risk to infants, children, pregnant women, the elderly and persons with certain chronic health problems from excitotoxins are great. Even the Federation of American Societies for Experimental Biology (FASEB), which usually understates problems and mimics the FDA party-line, recently stated in a review that:

"It is prudent to avoid the use of dietary supplements of L-glutamic acid by pregnant women, infants, and children. The existence of evidence of potential endocrine responses, i.e., elevated cortisol and prolactin, and differential responses between males and females, would also suggest a neuroendocrine link and that supplemental L-glutamic acid should be avoided by women of childbearing age and individuals with affective disorders."(4)

Aspartic acid from aspartame has the same deleterious effects on the body as glutamic acid.

The exact mechanism of acute reactions to excess free glutamate and aspartate is currently being debated. As reported to the FDA, those reactions include:(5)

- Headaches/migraines
- Nausea
- Abdominal pains
- Fatigue (blocks sufficient glucose entry into brain)
- Sleep problems
- Vision problems

- Anxiety attacks
- Depression
- Asthma/chest tightness.

One common complaint of persons suffering from the effect of aspartame is memory loss. Ironically, in 1987, G.D. Searle, the manufacturer of aspartame, undertook a search for a drug to combat memory loss caused by excitatory amino acid damage. Blaylock is one of many scientists and physicians who are concerned about excitatory amino acid damage caused by ingestion of aspartame and MSG.
A few of the many experts who have spoken out against the damage being caused by aspartate and glutamate include Adrienne Samuels, Ph.D., an experimental psychologist specializing in research design. Another is Olney, a professor in the department of psychiatry, School of Medicine, Washington University, a neuroscientist and researcher, and one of the world's foremost authorities on excitotoxins. (He informed Searle in 1971 that aspartic acid caused holes in the brains of mice.)

Phenylalanine (50 percent of aspartame)

Phenylalanine is an amino acid normally found in the brain. Persons with the genetic disorder phenylketonuria (PKU) cannot metabolize phenylalanine. This leads to dangerously high levels of phenylalanine in the brain (sometimes lethal). It has been shown that ingesting aspartame, especially along with carbohydrates, can lead to excess levels of phenylalanine in the brain even in persons who do not have PKU.
This is not just a theory, as many people who have eaten large amounts of aspartame over a long period of time and do not have PKU have been shown to have excessive levels of phenylalanine in the blood. Excessive levels of phenylalanine in the brain can cause the levels of seratonin in the brain to decrease, leading to emotional disorders such as depression. It was shown in human testing that phenylalanine levels of the blood were increased significantly in human subjects who chronically used aspartame.(6) Even a single use of aspartame raised the blood phenylalanine levels. In his testimony before the U.S. Congress, Dr. Louis J. Elsas showed that high blood phenylalanine can be concentrated in parts of the brain and is especially dangerous for infants and fetuses. He also showed that phenylalanine is metabolised much more effeciently by rodents than by humans.(7)
One account of a case of extremely high phenylalanine levels caused by aspartame was recently published the "Wednesday Journal" in an article titled "An Aspartame Nightmare." John Cook began drinking six to eight diet drinks every day. His symptoms started out as memory loss and frequent headaches. He began to crave more aspartame-sweetened drinks. His condition deteriorated so much that he experienced wide mood swings and violent rages. Even though he did not suffer from PKU, a blood test revealed a phenylalanine level of 80 mg/dl. He also showed abnormal brain function and brain damage. After he kicked his aspartame habit, his symptoms improved dramatically.(8)
As Blaylock points out in his book, early studies measuring phenylalanine buildup in the brain were flawed. Investigators who measured specific brain regions and not the average throughout the brain notice significant rises in phenylalanine levels. Specifically the hypothalamus, medulla oblongata, and corpus striatum areas of the brain had the largest increases in phenylalanine. Blaylock goes on to point out that excessive buildup of phenylalanine in the brain can cause schizophrenia or make one more susceptible to seizures.
Therefore, long-term, excessive use of aspartame may provid a boost to sales of seratonin reuptake inhibitors such as Prozac and drugs to control schizophrenia and seizures.

Methanol (aka wood alcohol/poison) (10 percent of aspartame)

Methanol/wood alcohol is a deadly poison. Some people may remember methanol as the poison that has caused some "skid row" alcoholics to end up blind or dead. Methanol is gradually released in the small intestine when the methyl group of aspartame encounter the enzyme chymotrypsin.
The absorption of methanol into the body is sped up considerably when free methanol is ingested. Free methanol is created from aspartame when it is heated to above 86 Fahrenheit (30 Centigrade). This would occur when aspartame-containing product is improperly stored or when it is heated (e.g., as part of a "food" product such as Jello).

Methanol breaks down into formic acid and formaldehyde in the body. Formaldehyde is a deadly neurotoxin. An EPA assessment of methanol states that methanol "is considered a cumulative poison due to the low rate of excretion once it is absorbed. In the body, methanol is oxidized to formaldehyde and formic acid; both of these metabolites are toxic." They recommend a limit of consumption of 7.8 mg/day. A one-liter (approx. 1 quart) aspartame-sweetened beverage contains about 56 mg of methanol. Heavy users of aspartame-containing products consume as much as 250 mg of methanol daily or 32 times the EPA limit.(9)

Symptoms from methanol poisoning include headaches, ear buzzing, dizziness, nausea, gastrointestinal disturbances, weakness, vertigo, chills, memory lapses, numbness and shooting pains in the extremities, behavioral disturbances, and neuritis. The most well known problems from methanol poisoning are vision problems including misty vision, progressive contraction of visual fields, blurring of vision, obscuration of vision, retinal damage, and blindness. Formaldehyde is a known carcinogen, causes retinal damage, interferes with DNA replication and causes birth defects.(10)

Due to the lack of a couple of key enzymes, humans are many times more sensitive to the toxic effects of methanol than animals. Therefore, tests of aspartame or methanol on animals do not accurately reflect the danger for humans. As pointed out by Dr. Woodrow C. Monte, director of the food science and nutrition laboratory at Arizona State University, "There are no human or mammalian studies to evaluate the possible mutagenic, teratogenic or carcinogenic effects of chronic administration of methyl alcohol."(11)

He was so concerned about the unresolved safety issues that he filed suit with the FDA requesting a hearing to address these issues. He asked the FDA to "slow down on this soft drink issue long enough to answer some of the important questions. It's not fair that you are leaving the full burden of proof on the few of us who are concerned and have such limited resources. You must remember that you are the American public's last defense. Once you allow usage (of aspartame) there is literally nothing I or my colleagues can do to reverse the course. Aspartame will then join saccharin, the sulfiting agents, and God knows how many other questionable compounds enjoined to insult the human constitution with governmental approval."(10) Shortly thereafter, the Commissioner of the FDA, Arthur Hull Hayes, Jr., approved the use of aspartame in carbonated beverages, he then left for a position with G.D. Searle's public relations firm.(11)

It has been pointed out that some fruit juices and alcoholic beverages contain small amounts of methanol. It is important to remember, however, that methanol never appears alone. In every case, ethanol is present, usually in much higher amounts. Ethanol is an antidote for methanol toxicity in humans.(9) The troops of Desert Storm were "treated" to large amounts of aspartame-sweetened beverages, which had been heated to over 86 degrees F in the Saudi Arabian sun. Many of them returned home with numerous disorders similar to what has been seen in persons who have been chemically poisoned by formaldehyde. The free methanol in the beverages may have been a contributing factor in these illnesses. Other breakdown products of aspartame such as DKP (discussed below) may also have been a factor.

In a 1993 act that can only be described as "unconscionable," the FDA approved aspartame as an ingredient in numerous food items that would always be heated to above 86 degree F (30 degree C).

Diketopiperazine (DKP)

DKP is a byproduct of aspartame metabolism. DKP has been implicated in the occurrence of brain tumors. Olney noticed that DKP, when nitrosated in the gut, produced a compound that was similar to N-nitrosourea, a powerful brain tumor causing chemical. Some authors have said that DKP is produced after aspartame ingestion. I am not sure if that is correct. It is definitely true that DKP is formed in liquid aspartame-containing products during prolonged storage.

G.D. Searle conducted animal experiments on the safety of DKP. The FDA found numerous experimental errors occurred, including "clerical errors, mixed-up animals, animals not getting drugs they were supposed to get, pathological specimens lost because of improper handling," and many other errors.(12) These sloppy laboratory procedures may explain why both the test and control animals had sixteen times more brain tumors than would be expected in experiments of this length.

In an ironic twist, shortly after these experimental errors were discovered, the FDA used guidelines recommended by G.D. Searle to develop the industry-wide FDA standards for good laboratory practices. (11)
DKP has also been implicated as a cause of uterine polyps and changes in blood cholesterol by FDA Toxicologist Dr. Jacqueline Verrett in her testimony before the U.S. Senate.(13)

TESTIMONY FOR HB2680 & SB2506 – BAN ASPARTAME IN HAWAII
SENATE & HOUSE HEALTH COMMITTEES

Dear Honorable Chairs of the Senate and House Health Committees,

I am testifying in support of these bills to ban aspartame in food and beverage products in Hawaii. I have been a consumer of diet beverages since 1988. I suffered from high blood pressure that could not be controlled by medication, uncontrollable diabetes requiring pills and insulin shots since Feb 2007, tachycardia (rapid heart beat), continuous heart muscle spasms since early 2000, and several anxiety attacks. I even had to be hospitalized twice, in 2002 and 2006, due to my heart spasms.

Fortunately I have overly concerned children, who forced me to go on the Jenny Craig diet on Aug 26, 2007, and even paid for it. Being required to log everything I ate and drank, I was surprised that my blood sugar and blood pressure went down slightly during the first two weeks after a loss of only 4 lbs. I was still consuming about 2 to 3 diet sodas per week and drinking only 2 to 3 cups of water/day.

The diet counselor then stressed that I must drink at least 8 cups water/day as required by the diet plan. The financial guilt of my children paying, motivated me to be more disciplined and so I started logging down each cup of water consumed. To achieve the goal of 8 cups, while tolerating the inconvenience of going to the bathroom often, I was so well hydrated that I stopped consuming all other beverages (diet sodas, coffee, fruit juices). To my surprise and my RN diabetic nurse's amazement, blood sugar dropped so low that there was concern about going into a diabetic coma while sleeping. On Sept 9, 2007, I was advised it was OK to stop the insulin shots.

About 10 lbs lighter in Dec 2007, I was asked by a friend in Molokai to support this bill to ban aspartame in Hawaii. Having conducted research since 1997 on electro-toxins, I was well aware of the excito-toxic effects of MSG and aspartame, but being naïve like most people, I thought that "just a little bit," in moderation, is OK. I was so, so wrong. I then realized that since I stopped consuming aspartame products in Sept 2007, I have never had a heart muscle spasm in addition to stopping insulin shots. I also realized that prior to being hospitalized in 2006 with heart muscle spasms occurring as frequent as every ½ hour, I was visiting grandchildren in Los Angeles at the time and consuming 2 to 3 cans of diet soda/day. Although anecdotal, making this connection was so important to improvement in my health. By process of elimination, detailed record keeping, and strict regimented diet, there is little doubt in my engineering mind that aspartame beverages were making me sick.

I then did additional research to look into adverse health effects. As you know, aspartame products contain the labeling: **PHENYLKETONURIC: PHENYLALANINE**, although most people do not know what it means. Phenylketonuria (aka PKU) is a bad condition in which excess phenylalanine could create phenylketone in the urine (mousey smell), cause absence or deficiency in hydroxylase, and affect tyrosine levels. Tyrosine is an amino acid which helps insulin receptor cells get glucose into cells. Phenylalanine is an amino acid which occurs naturally in some foods while chemically bound with other things compared to concentrated phenylalanine from aspartame which enters the blood more readily. According to Mosby's Medical Dictionary (2006 Edition), "accumulation of phenylalanine is toxic to brain tissue." One study using people actually showed phenylalanine blood levels increased 23-39%.

Although there are many published studies for or against aspartame, using it as an artificial sweetener just does not pass the common sense test. Since it is known that aspartame breaks down to aspartate (40%), phenylalanine (50%), and methyl ester (10%), which further breaks down into methyl alcohol and formaldehyde, why do we want it in our food chain? How can we rationalize to say that it will help diabetics and obese people when we have other natural alternatives that are a lot safer such as stevia, xylitol or Just Like Sugar. It may take decades before good unbiased research comes out to demonstrate how unsafe it really is. Furthermore, just like smoking and asbestos, I suspect that the majority of harm will become evident after a few years of ingestion depending on the rate of consumption and individual chemical sensitivity. It took about

In conclusion, there are two distinct detrimental attitudes in our society that I consider significantly contribute to our escalating health problems. The first is "MORE IS BETTER." This is evidenced by the increased exposure to many different sources of fluorides, xrays as well as the wide use of aspartame in food and beverage products. The second harmful attitude is "IT'S JUST A LITTLE BIT" even though it is toxic. Unfortunately, no one is keeping track of all these "little bits" or test for safety at cumulative worse case conditions to see if there is an additive or synergistic effect on the unborn or our young children. Yes, it may be FDA approved, but the FDA is broken.

We need to once again return to THE PRECAUTIONARY PRINCIPLE which is the strongest basic foundation of common sense and good medicine. For the sake of our children and the unborn, lets unite to get rid of all these bad "little bits" one at a time starting with the passing of these bills.

Respectfully,
Adrian Chang
Retired PHNS Nuclear Engineer, Ph 227-9763

Suggested Amendment: Section 1 first sentence: Change to read (changes underlined): The legislature finds it is imperative for the publich health, safety and welfare to declare that aspartame, as commercially added in food and beverage products and in all their trade names, are poisonous and deleterious food additives due to their neurotoxic and carcinogenic metabolites.

Reason for Change: Use of the term "derivative compounds" is too vague and could be construed to include natural phenylalnine found in some food products.

ıntiadrenergic. It is ad-
m in tablets and as the

control of symptoms of
ıng surgery and for der-
travasation of parenteral

/ocardial infarction, an-
ıown hypersensitivity to

re serious adverse reac-
hythmias, anginal pain,

anticonvulsant (phenace-

novalent organic radical,

a metabolite of phenyl-
ıgation with glutamine.
ēn/, an essential amino
ıwth and development of
rmal protein metabolism
of this amino acid in the
g/dl; in newborns, 1.2 to
eggs, and other common
nylketonuria, protein.
'mē·ə/, the presence of
also ***hyperphenylalanine-***

a nonsteroidal antiinflam-

is used locally as a nasal or ophthalmic ...

■ CONTRAINDICATIONS: Narrow-angle glaucoma, concomitant administration of monoamine oxidase inhibitors, or known hypersensitivity to this drug prohibits its use.

■ ADVERSE EFFECTS: Among the more serious adverse reactions to the systemic administration of this drug are dysrhythmias and an excessive rise in blood pressure. Anxiety, congestion, and hypersensitivity reactions may occur from local administration of this drug.

phenylethyl alcohol /-eth'il/, a colorless, fragrant liquid with a burning taste, used as a bacteriostatic agent and preservative in medicinal solutions. Also called **benzyl carbonol.**

phenylic acid, phenylic alcohol. See **carbolic acid.**

phenylketonuria (PKU) /fen'əlkē'tōnyo͝or'ē·ə, fē'nəl-/, abnormal presence of phenylketone and other metabolites of phenylalanine in the urine, characteristic of an inborn metabolic disorder caused by the absence or a deficiency of phenylalanine hydroxylase, the enzyme responsible for the conversion of the amino acid phenylalanine into tyrosine. Accumulation of phenylalanine is toxic to brain tissue. Untreated individuals have very fair hair, eczema, a mousy odor of the urine and skin, and progressive mental retardation. Treatment consists of a diet low in phenylalanine. Phenylketonuria occurs approximately once in 16,000 births in the United States. Most states require a screening test for all newborns. See also **Guthrie test.** **–phenylketonuric,** *adj.*

phenyl methanol. See **benzyl alcohol.**

phenylpropanolamine hydrochloride /fen'əlprō'pənol'əmēn/, a sympathomimetic amine with vasoconstrictor action.

Mosby's Medical Dictionary (1994 Ed)
(Same words in 2006 Edition)

Adren

pheochromoc
mocytomas,
chroma, color
of chromaffin
paraganglia, c
and norepinepl
tension. Typic
ing, nervousn

000074

Honolulu Star Bulletin – Feb 6, 2008, Wed.

Drinking diet soda raises health risk

HEALTH WISE

Researchers have found a correlation between drinking diet soda and metabolic syndrome — the collection of risk factors for cardiovascular disease and diabetes that include abdominal obesity, high cholesterol and blood glucose levels — and elevated blood pressure.

The scientists gathered dietary information on more than 9,500 men and women ages 45 to 64 and tracked their health for nine years.

Overall, a Western dietary pattern — high intakes of refined grains, fried foods and red meat — was associated with an 18 percent increased risk for metabolic syndrome, while a "prudent" diet dominated by fruits, vegetables, fish and poultry correlated with neither an increased nor a decreased risk.

But the one-third who ate the most fried food increased their risk by 25 percent compared with the one-third who ate the least, and surprisingly, the risk of developing metabolic syndrome was 34 percent higher among those who drank one can of diet soda a day compared with those who drank none.

"This is interesting," said Lyn M. Steffen, an associate professor of epidemiology at the University of Minnesota and a co-author of the paper, which was posted online in the journal Circulation on Jan. 22. "Why is it happening? Is it some kind of chemical in the diet soda, or something about the behavior of diet soda drinkers?"

Antioxidants open eyes

The antioxidants vitamin E and lutein, from both food and supplements, might reduce women's risk for cataracts, researchers report.

A study in the January issue of The Archives of Ophthalmology enrolled more than 35,000 women who were followed for an average of 10 years.

After statistically adjusting for smoking, alcohol use, body mass index and other variables, the researchers found that the more vitamin E and lutein the women used, the less likely they were to have cataracts. Compared with the one-fifth of women who consumed the least antioxidants, the one-fifth who consumed the most reduced their risk for cataracts by 14 percent with vitamin E and 18 percent with lutein.

Vegetable oils, nuts, leafy green vegetables and whole grains are sources of vitamin E, and lutein is found in various fruits, corn, kale, spinach and other vegetables.

New York Times and Rodale Press Inc.

IT HAPPENED TODAY ... In 1935, the board game Monopoly went on sale for the first time. ... In 2003

HEARING: FRIDAY, FEB 8, 2008
8 AM
HOUSE CONFERENCE
ROOM 329
586-6501

February 5, 2008
To Chairperson Josh Green, House Committee on Health
RE: HB 2680 Relating to Food
TESTIMONY IN SUPPORT OF HB 2680

From Dr. Melissa Yee
1480 Kinau Street
Honolulu, Hawaii 96814

Thank you for your time in consideration of this bill. I am a doctor of acupuncture and Oriental medicine. Over the years of my practice I have seen many patients with migraines, diabetes, fibromyalgia, multiple sclerosis, and weight problems. One of the first questions I will ask them when they come in for the first time is whether they drink diet soda, Crystal lite or sport drinks, containing aspartame. If they answer in the affirmative, I ask them to stop. In most cases, the headaches, blurry vision, dizziness, muscle aches, and other symptoms related to their condition are gone within weeks, after a natural detoxifying process, sometimes with a initial recurrence of symptoms that soon disappear, once and forever. It is that simple. They don't need any more medicines and feel better than they have in years, since beginning to consume the diet drinks which they believed would reduce their calorie intake or take the burden off their pancreas and digestive system, or be healthier than regular sugar products.

My experiences may seem anecdotal because I have not conducted a study or collected statistics, but for my patients, the advice to stop drinking or using aspartame (Nutrasweet, Sweet 'n Low) is a godsend. It is interesting that Ajinomoto Company is the largest manufacturer of both aspartame and monosodium glutamate, and in America Kraft is one of the largest companies producing processed foods which are staples in many families' diets. These companies make enormous profits on these foods containing taste enhancers, which give longer shelf life and make the food palatable although laden with chemicals. These food additives may or may not have an adverse effect on the consumers until the body becomes so saturated (toxic) that the slightest amount will cause a strong reaction- extreme thirst, swelling or burning sensation in the hands and feet, diarrhea and other symptoms, sometimes even anaphylactic shock. But taking into account the number of children with food sensitivities and behavioral problems, the babies may have already been toxic from conception because of the dietary habits of their parents.

It is time to ban this substance from food because of the harm it is causing in subtle ways, yet significant enough to create a population that is obese, complacent, and malnourished. Considering the wealth of natural resources, abundance of foods to choose from, and availability of health care here in America, it may seem surprising that we are not at the top of the list in health, intelligence and test scores, and productivity. It is a standard joke that Americans are looked upon as gluttons, but unfortunately, the joke is on people in foreign countries who, eager to emulate the American lifestyle, begin to adapt the Western diets rich in food enhancers, such as aspartame, who then begin to suffer the same health problems as the westerners.

Let Hawaii be the forerunner in improving the health of its people by banning aspartame as a cheap sugar substitute which costs lives in the long run. The legislature took the steps to remove soda from the machines which were supplementing the income of the schools. Now it is time to remove aspartame from foods which have made us a "fast food nation" with a major obesity problem and return to healthy natural and unadulterated diets based on local and locally grown foods.

Please support and vote in favor of this bill.

Sincerely, Dr. Melissa Yee

HB 2680

John Mizuno
This is a petition
to get aspartame
out of our food
Mahalo

DRAKE WELLS PO Box 1006-C Kakai 96748
Pamela Barnett P Barnett

PETITION TO STOP ASPARTAME INGESTION NOW (SAIN)

We the undersigned, strongly support any legislation which would stop inclusion of aspartame in our foods and medications. Aspartame is NOT safe human consumption. We know that the break down products of Aspartame, are said to be found commonly in some of our foods, but we also know that no where is anyone telling us about the 10% of free methyl alcohol (methanol a deadly poison) being released in our bodies. The two building blocks of protein cited as commonly found in our food when taken in higher concentrations than found in nature have known adverse effects on neurotransmitters. Aspartame is a neurotoxin known to concentrate 40 times when consumed by humans and has been linked to many medical conditions, as well as being to cause of over 75% of the complaints to the FDA.

We the undersigned want stop the inclusion of Aspartame to our foods and medicines without our knowledge. We want clear labeling so that we are allowed to make informed choices about what we put in our bodies. We want to stop our unwilling exposure to Aspartame. For information, go to www.dorway.com, www.aspartamekills.com, www.russsellblaylockmd.com, www.sunsentpress.com, www.holisticmed.com/aspartame, www.sweetpoison.com, www bowendrjim.com, www.mercola.com or www.wnho.net.

Name	Address	Telephone	E-mail
Elaine Mattson	175 Aahi Pl Kaunakakai	808-553-5568	
Elin Almeida	195 Aahi Pl Kaunakakai	401-580-3324	
Pat Lucas		808-553-3935	jmg10009@hotmail.com
Maria Allen	PO 1262 Kaunakakai		
Brenda Lee Espaniola	PO Box 676 K'kai	558-8368	
Rosemary Milner	2101 Maplewood Dr Col. OH	614-8900581	
Constance Alvos	BOX 1780	553-3597	
[illegible]			
JOHN WORDIN	BOX 121 KUALAPUU HI 96757	567-6308	wordinjj@aloha.net
Jade Bruhjell	PO 945 KKai 96748	5534243	
Nancy Ravelo Nancy Ravelo	P.O. 121 Kualapuu 96757		kynalive@yahoo.com
Artice Swingle Artice Swingle	P.O. Box 121, Kualapu'u, HI	567-6308	wordinjj@aloha.net

000078

PETITION TO STOP ASPARTAME INGESTION NOW (SAIN)

We the undersigned, strongly support any legislation which would stop inclusion of aspartame in our foods and medications. Aspartame is NOT safe human consumption. We know that the break down products of Aspartame, are said to be found commonly in some of our foods, but we also know that no where is anyone telling us about the 10% of free methyl alcohol (methanol a deadly poison) being released in our bodies. The two building blocks of protein cited as commonly found in our food, when taken in higher concentrations than found in nature, have known adverse effects on neurotransmitters. Aspartame is a neurotoxin known to concentrate 40 times when consumed by humans and has been linked to many medical conditions, as well as being the cause of over 75% of the complaints to the FDA.

We the undersigned want to stop the inclusion of Aspartame to our foods and medicines without our knowledge. We want clear labeling so that we are allowed to make informed choices about what we put in our bodies. We want to stop our unwilling exposure to Aspartame. For information, go to www.dorway.com, www.aspartamekills.com, www.russellblaylockmd.com, www.sunsentpress.com, www.holisticmed.com/aspartame, www.sweetpoison.com, www.bewendrjim.com, www.mercola.com or www.wnho.net.

Name	Address	Telephone	E-mail
Mary Powers	PO Bx 1588 Kaumakani, Hi 96748	(808) 553-3887	lieoquais35@yahoo.com
~~Jacinta~~			
Jacinta Wegmann			
Rufina R. Kela		553-5192	
Rita Raymond		553-3617	
Brandon Roberts	Bx 152 96757	658 9974	brandon@themolokaidispatch.c

000079

February 7, 2008

To: **Josh Green, Health Committee Chair**
John Mizuno, Health Committee Vice Chair

From: **Jade Bruhjell**
PO Box 945
Kaunakakai, HI 96748

Re: **Hearing on HB 2680—Relating to an Banning Apartame**
February 8, 2008at 8:00am
State Capitol

TESTIMONY IN SUPPORT

Dear Chair Green and Committee Members:

Thank you for hearing this bill. The many reasons for this measure are becoming more obvious to us all as to why this dangerous drug should not be in any of our foods in any amount. Aspartame is probably the one most toxic additive in our food today as it is report by the FDA itself to comprise 80% of the health complaints by the American public. It lists 92 aspartame related symptoms among which include the most serious of neurological diseases and death.

The Philippines have banned it. 47 members of the UK Parliament have asked for a complete ban. New Zealand is asking for a ban. Hawaii is the second state to ask for a ban. Surely we are not just complaining about some minor food additive with some minor symptoms. The only people who would knowingly consume aspartame containing products are those who have no knowledge of its toxicity. The alarming fact is however that unless one is eating off the land, the garden and the sea, we are all consuming aspartame containing products. If we eat we are ingesting it. Even shopping at the health food store is no guarantee as aspartame is contained in "natural flavors," artificial flavors, etc. We are hard-pressed to find many foods on the shelves of our grocery stores that do not contain aspartame. This neurotoxic drug is found in at least 8,000 different products on the grocery store shelves. All of the food manufacturing companies I called to find out the ingredients of "natural flavors" told me that the ingredients were "secret" and "proprietary." They would not even disclose the manufacturer of "natural flavors" – this also is a secret. Why has the FDA allowed Monsanto and Ajinomoto to saturate our food chain with neurotoxins and not have to label them? This is why the subject has been brought to the state level to be dealt with here in Hawaii. As the FDA has failed to protect us consumers. The criminality involved here is another issue which should be discussed in another forum. Does anyone know how aspartame is made? This is hidden information also. However we have found that it is made from genetically engineered e coli bred from toxic sludge. E coli is the harmful bacteria found in the colon that causes diseases. Basically aspartame is the crystallized form of our own doodoo. The stink turns to sweet when it is crystallized. The juice is produced via centrifugal whirring machine. No laugh because we're all eating it. Anyone who eats and drinks in this country is ingesting this substance. Even those who laud aspartame and purport that it is safe are eating it themselves not realizing what they are ingesting. Maybe we could call the adverse reactions mad human disease.

My father died from Alzheimer's disease and I have autistic relatives as many of us now do. As the autism rate in children has risen in an unbelievable rate of 1 in 57 across the country. Five

years ago the rate was 1 in 160 which was considered an epidemic at that point. Most of us have friends and family who have been victimized by this substance. And members of this legislature and committees that I have talked to have had adverse reactions. Dr. Kalani Brady, recently aired on Channel 2 News, stated that nothing has ever been shown to be a detriment with aspartame. It is perfectly safe. I am sad for those who would believe his professional buffoonery. He also stated that taking aspartame out of all food products would shut down the economy. He maybe partially correct on that one as it would cause a recession in the medical industry. Mr. Brady, to me a doctor is one that keeps his community well and free from disease. How can medical professionals condone a known neurotoxin and keep his community healthy? Obviously he hasn't seen Serearle's self-damning studies showing a high incidence in brain tumors, seizures and convulsions in test animals. Obviously he hasn't reviewed the recent call from 12 imminent toxicologist who have called for an aspartame ban nation-wide. I'm sure he is unaware of the three year long Ramazzini studies performed on hundreds of test animals proving without a shadow of doubt that aspartame is a multi-potent carcinogen. Mountains of other reputable studies are available.

Finally, and maybe the most startling aspect of this issue is that a November 3, 1987 U.S. Senate Hearing revealed that the pentagon once listed aspartame in an inventory of prospective biochemical warfare weapons submitted to congress. As a resident of Hawaii and U.S. citizen I would like to know why we Americans and Hawaii State residents are unknowingly digesting more of this substance than any other country. It is in 8,000 different products – moreover we are forced to eat it as there are no labeling required and very few untainted food alternatives available.

It would certainly be prudent to pass this bill and remove this poisonous drug from our Hawaiian food chain. Your wise decision would help avoid much suffering and misery.

Thank you for hearing my testimony,
Jade Bruhjell

FAX 586-6051
February 7, 2008

COMMITTEE ON HEALTH
Rep. Josh Green, M.D., Chair
Rep. John Mizuno, Vice Chair

DATE: Friday, February 8, 2008
TIME: 8:00 A.M.
CONFERENCE ROOM 329, STATE CAPITOL

HB 2680 RELATING TO FOOD – Bans the use of the artificial sweetener aspartame in food products

I support a ban in the use of artificial sweetner aspartame. The FDA put off approving aspartame for many years, so did the National Soft Drink Association. Just because FDA has since been approved due to some maneuvers in high places, it does not mean that it is safe.

Aspertame breaks down into aspartic acid, Phenylalanine, Methanol and Formaldehyde. It probably has its place in industry but certainly not good for our brain and bodies.

By setting a ban, it would send a strong message to our food industry that they should be very conscious of selling us food that is safe.

Please support the ban on the use of aspertame.

Ruth Nakasone
Pearl City, HI
c. 497-3191

May Mizuno

From: Zoe [mauizoe@gmail.com]
Sent: Thursday, February 07, 2008 5:15 PM
To: Rep. Gene Ward; Rep. James Tokioka; Rep. Karl Rhoads; Rep. Rida Cabanilla; Rep. Joe Bertram III; Rep. Della Belatti; Rep. Karen Awana; Rep. John Mizuno; Rep. Josh Green
Subject: House bill number HB2680 -- Aspartame

For Hearing in Room #329, 8 A.M., Friday Feb. 8

ADDRESSED TO HON. JOSH GREEN M.D., VICE CHAIR,
JOHN MIZUNO, AND MEMBERS OF THE COMMITTEE.

Aloha, Members of the House Health Committee:

Thank you for doing what you can to stand up to corporate interests on this issue.

As I am sure you are well aware by this time, aspartame is a known neurotoxin and should not be in our food supply.

My sincere appreciation to you for acting to protect the health of all Hawaiians.

Mahalo,
Zoe Alexander, PhD
Maui, HI

PS. If you wish more detailed information, here is a good summary link by K Paul Stoller, MD:
http://www.opednews.com/articles/opedne_ken_stol_080206_santa_fe_pediatricia.htm

Also, there is an excellent book by Russell Blaylock, MD, who is a well-respected medical research expert : Excitotoxins: The Taste That Kills.
http://www.amazon.com/Excitotoxins-Taste-Russell-L-Blaylock/dp/0929173252/ref=sr_1_2?ie=UTF8&s=books&qid=1202440107&sr=1-2

PLEASE XEROX AS COMMITTEE HANDOUT FOR THIS HEARING.

Rep. John Mizuno

From: rmforall@comcast.net
Sent: Thursday, February 07, 2008 7:41 AM
To: Rep. Josh Green
Cc: Rep. John Mizuno
Subject: House Bill 2580 Hearing in Room #329, 8 AM Friday Feb 8: vinyl acetate, ethyl alcohol, or aspartame in womb increases later cancers in adults with lifetime exposure in many studies, M Soffritti et al, Ramazzini Foundation, Basic Clin. Pharm. Toxicol. 2008

House Bill 2580 Hearing in Room #329, 8 AM Friday Feb 8:

Addressed to the Honorable Rep. Josh Green, M.D., Chair, and Honorable John Mizuno, Vice Chair, and member of the Committee:

Please xerox as committee handout for this hearing.

vinyl acetate, ethyl alcohol, or aspartame in womb increases later cancers in adults with lifetime exposure in many studies, M Soffritti et al, Ramazzini Foundation, Basic Clin. Pharm. Toxicol. 2008 Feb.: Rich Murray 2008.02.07 http://rmforall.blogspot.com/2008_02_01_archive.htm
Thursday, February 7, 2008
http://groups.yahoo.com/group/aspartameNM/message/1511

See also:

need to find safe levels for aspartame (methanol, formaldehyde, formic acid) via rapid, safe, low-cost, highly accurate and sensitive modern breath gas analysis: Claire Turner et al, Foundation for Innovative New
Diagnostics: Rich Murray 2008.02.07
http://rmforall.blogspot.com/2008_02_01_archive.htm
Thursday, February 7, 2008
http://groups.yahoo.com/group/aspartameNM/message/1512

"The results, reported in table 6, show that aspartame causes a significant, dose-related increase of lymphomas/leukaemias and malignant tumours of the renal pelvis and ureter in females and malignant tumours of peripheral nerves in males.

These results demonstrate for the first time that aspartame is a carcinogenic agent, capable of inducing malignancies at various dose levels, including those lower than the current acceptable daily intake for humans (50 mg/kg of body weight in the USA, 40 mg/kg of body weight in the European Union)."

"Based on the results of long-term carcinogenicity bio-assays testing chemical and physical agents using rodents, there is ample evidence demonstrating that developmental, in conjunction with adult exposure to carcinogenic risks, produces an overall increase in the incidence of malignant tumours and an increased incidence of specific neoplasms related to exposures to specific carcinogens.

Moreover, when comparing prenatal and postnatal exposure, the development of certain tumours may appear earlier in life.

We must take into serious consideration the warnings provided by long-term carcinogenicity studies and take adequate action today.

Based on the evidence presented, increased attention must be given to developmental exposures to diffuse carcinogens.

It is only in this way that in the future we can hope to avoid a passive registration of a worsening epidemiological situation."

Basic & Clinical Pharmacology & Toxicology Volume 102 Issue 2 Page 118-124, February 2008

To cite this article:
Morando Soffritti, Fiorella Belpoggi, Davide Degli Esposti, Laura Falcioni, Luciano Bua (2008) Consequences of Exposure to Carcinogens Beginning During Developmental Life Basic & Clinical Pharmacology & Toxicology 102 (2), 118-124.
doi:10.1111/j.1742-7843.2007.00200.x

MiniReview

Consequences of Exposure to Carcinogens Beginning During Developmental Life

Morando Soffritti,
Fiorella Belpoggi,
Davide Degli Esposti,
Laura Falcioni and
Luciano Bua
Cesare Maltoni Cancer Research Center,
European Ramazzini Foundation of Oncology and Environmental Sciences, Bologna, Italy

Author for correspondence: Morando Soffritti, Cesare Maltoni Cancer Research Center, European Ramazzini Foundation of Oncology and Environmental Sciences, Castello di Bentivoglio, Via Saliceto 3, 40010 Bentivoglio, Bologna, Italy fax +39 051 6640223, e-mail crcfr@ramazzini.it

Abstract:

The increased incidence of cancer over the last 50-60 years may be largely attributed to two factors:
the ageing of the population
and the diffusion of agents and situations presenting carcinogenic risks.

Today, we have entered into a new era in which populations are ever-increasingly exposed to diffuse carcinogenic risks, present not only in the occupational, but also in the general environment.

We must now also consider an additional factor in the carcinogenic process, that is, the age in which exposure to carcinogenic risks begins.

Apart from the paradigmatic cases of diethylstilboestrol and ionizing radiation, the available epidemiological data concerning the adult consequences of developmental exposure to carcinogens is very limited.

However, important data have been provided by long-term experimental carcinogenicity bioassays conducted using rodents.

This paper reports a selection of studies conducted in the laboratories of the Cesare Maltoni Cancer Research Center of the European Ramazzini Foundation in which exposure to the chemical agents vinyl acetate monomer, ethyl alcohol and aspartame was started during developmental life and continued into adulthood.

The results of these studies provide supporting evidence that lifespan exposure to carcinogenic agents beginning during developmental life produces an overall increase in the carcinogenic effects observed.

Moreover, when comparing prenatal and postnatal exposure, the data demonstrate that the development of cancers may appear earlier in life.

Cancer represents one of the most important issues in public health today, both in the

industrialized and developing worlds.

The epidemiological dimension of the disease is epidemic, with one out of two males and one out of three females destined to become ill with cancer during their lifetimes [1].

Above all, cancer affects the oldest segment of the population, from 60-84 years of age.

Data from the Nominative Mortality Register of European Ramazzini Foundation from the period 1982-2002 show that more than 30% of the mortality in the province of Bologna, Italy, is cancer-related.

Of these deaths, 80% occurred after the age of 60-65 years [2].

If we consider the estimates that in 25 years, the number of persons over than the age of 70 years will have doubled, it is necessary to prepare for a dramatic increase in the number of tumours.

In the USA alone, it is predicted that the number of cancers will indeed double by 2050 [1].

Although the scientific effort and economic resources dedicated to cancer have increased over the last 30 years (directed especially towards the discovery of effective cancer drug therapies), in the USA, the 5-year relative survival rates based on patient follow-up from 1976-2000 have not substantially improved (table 1), with the exception of female breast, prostate and colon-rectal cancer, for which early diagnosis has certainly played an important role.

Other exceptions are cancers of the lung and bronchus in males that reflects the decrease in smoking more than the past 30 years.

The increased incidence of cancer over the last 50-60 years may be attributed to two increasing trends:
(i) the increase in life expectancy (about 10 years for males and 15 years for females); and (ii) the increase in the diffusion of agents and situations presenting carcinogenic risks in both the occupational and general environment.
A third factor in the carcinogenetic process is genetic predisposition; however, it is unlikely that this factor has changed significantly over the last decades.

In addition, a fourth factor must also be considered; that is, the age in which exposure to carcinogenic risks begins.

In this context, the present epidemiological dimension of cancer is undoubtedly a sign of the previous era in which the majority of the population had been exposed to carcinogenic risks either in the occupational environment as adolescents or adults.

Today, however, we are facing an era characterized by two new trends:
(i) lifetime exposure to carcinogenic risks beginning during developmental life (prenatally or postnatally).

This exposure during early development, when cell mutiplication and differentiation make an organism more vulnerable, may cause an increase in carcinogenic effects later in life;

and (ii) exposure to 'diffuse carcinogenic risks'.
This term is used to describe carcinogenic risks of low potency, but to which almost the entire population of the planet may be exposed.

Examples of diffuse carcinogenic risks include:
(i) agents that are slightly carcinogenic at any dose;
(ii) low or extremely low doses of strong carcinogenic agents; or (iii) mixtures of small doses of any carcinogenic agent [3].

Apart from the paradigmatic cases of diethylstilboestrol and ionizing radiation, the available epidemiological data concerning the adult consequences of developmental exposure to carcinogenic agents are very limited.

We now know much more about the effects
of this early exposure thanks to

experimental long-term bioassays.

If adequately designed and conducted,
these bioassays can produce data that
can be effectively used to identify/predict carcinogenic risks and, consequently, to make decisions to protect public health.

Numerous long-term carcinogenicity studies have been conducted at the Cesare Maltoni Cancer Research Center of the European Ramazzini Foundation (CMCRC/ERF) that demonstrate the life-time consequences of chemical/physical exposures beginning during developmental life and lasting for life.

This paper presents a selection of these exemplary cases including vinyl acetate, ethyl alcohol and aspartame.

The case of vinyl acetate monomer

Vinyl acetate monomer is an important compound used in the plastics industry.

It is also used in the production of resin in chewing gum.

The limited available epidemiological data on vinyl acetate monomer do not allow for an evaluation of its potential carcinogenic risks in human beings.

Carcinogenicity studies on rats and mice, conducted prior to the most recent International Agency for Research on Cancer evaluation [4], have been in one way or another inadequate to evaluate the carcinogenic potential of vinyl acetate monomer.

In the 1980s, a series of experiments were simultaneously conducted at the CMCRC/ERF using Sprague-Dawley rats, Wistar rats and Swiss mice.

A similar protocol was applied for all three experiments.

Vinyl acetate monomer was administered by ingestion in drinking water supplied ad libitum at the concentrations of 5000, 1000 or 0 p.p.m. to 17-week-old males and females (breeders) and 12-day-old embryos (offspring).

The treatment lasted 104 weeks in rats and 78 weeks in mice.

All animals were monitored until natural death (130-150 weeks).

The plan of each experiment and the significant carcinogenic results are reported in tables 2-4.

In the tested conditions, vinyl acetate monomer was demonstrated to be a multipotent carcinogenic agent, inducing malignant tumours of the oral cavity, tongue, oesophagus and forestomach in both strains of rats and mice.

A slight increase of the incidence
of adenomas/carcinomas of the lung
and of malignant tumours of the uterus in mice was also observed [5-7].

Furthermore, the carcinogenic effects
were strongly increased when exposure
began during foetal life.

The case of ethyl alcohol

Various epidemiological studies have shown a positive relationship between consumption of alcoholic beverages and the increase of cancer risks of the oral cavity, pharynx, larynx, oesophagus and liver.

However, as reported in the most recent
International Agency for Research on Cancer monograph on this agent [8], many experimental studies conducted on rats and mice exposed to various concentrations of ethyl alcohol administered in drinking water did not show the same effects.

In an experiment performed at the CMCRC/ERF laboratories, ethyl alcohol was administered by ingestion in drinking water at the concentration of 10% or 0% and supplied ad libitum to male and female Sprague-Dawley rats, both breeders and offspring.

In order to detect carcinogenic risk when exposure begins during adult life, treatment of breeders started at 39 weeks of age,
7 days before mating.

Treatment of offspring began during embryonic life.

Treatment of all rodents lasted for 104 weeks and all animals were observed until spontaneous death.

The plan of the experiment and the significant carcinogenic results are reported in table 5.

In contrast with previous studies,
in the test conditions of the CMCRC
ethyl alcohol was indeed demonstrated to be carcinogenic for various organs and tissues, in particular inducing malignant tumours of oral cavity, tongue and lips, and oesophagus, the same sites that were shown to be target organs in the aforementioned epidemiological studies [9].

Importantly, the incidence of malignant tumours of the oral cavity was higher when exposure began during embryonic life.

The case of aspartame

Aspartame is an artificial sweetener consumed by hundreds of millions of people worldwide.

It is used in over 6000 products, including soft drinks, chewing gum, candy, desserts and yogurt, as well as in more than 500 pharmaceutical products, in particular, syrups and antibiotics for children.

Prior to the commercialization of aspartame in the 1970s, the manufacturers of the compound conducted various experimental studies on rats and mice to test its carcinogenicity.

When taken together,
the results of these studies were considered negative with regard to the carcinogenicity of aspartame.

Doubts were, however, raised
by some in the scientific community about the conduct of the experiments and the fact that some cases of malignant brain tumours were found among animals treated with aspartame while none were found among the control group.

Given the limitations of these studies
due to the number of animals per sex and group, the duration of the experiment, and the ever growing use of aspartame throughout the years, the CMCRC/ERF decided in the late 1990s to plan and perform an experiment that would provide an adequate evaluation of the potential carcinogenic effects of aspartame.

The first CMCRC/ERF study [10-12]
was conducted on 1800 Sprague-Dawley rats (100-150/per sex/per group).

Aspartame was added to the standard rat diet in quantities of 100,000; 50,000; 10,000; 2000; 400; 80 or 0 p.p.m.
in order to simulate daily intake of
5000, 2500, 500, 100, 20, 4 or 0 mg/kg of body weight.

Treatment of the animals began at 8 weeks of age and continued until spontaneous death.

The results, reported in table 6, show that aspartame causes a significant, dose-related increase of lymphomas/leukaemias and malignant tumours of the renal pelvis and ureter in females and malignant tumours of peripheral nerves in males.

These results demonstrate for the first time that aspartame is a carcinogenic agent, capable of inducing malignancies at various dose levels, including those lower than the current acceptable daily intake for humans (50 mg/kg of body weight in the USA, 40 mg/kg of body weight in the European Union).

As soon as we perceived the carcinogenic effects of aspartame during the elaboration of the data in our first mega-experiment, we planned an integrated programme of long-term bioassays, beginning treatment from prenatal life, on an additional 1500 rats and mice in order to better quantify the carcinogenic risks of aspartame.

The second CMCRC/ERF study [13] was conducted on 400 Sprague-Dawley rats (70-95/per sex/per group).

Aspartame was added to the standard rat diet in quantities of 2000, 400 or 0 p.p.m. in order to simulate daily intake of 100, 20 and 0 mg/kg of body weight.

Treatment of the animals began on the 12th day of foetal life and lasted until natural death.

The results of the second study show an increased incidence of lymphomas/leukaemias in female rats with respect to the first study.

Moreover, the study shows that when lifespan exposure to aspartame begins during foetal life, the age at which lymphomas/leukaemias develop in females is anticipated (fig. 1).

In addition, for the first time, a significant increase in mammary cancers in females was also observed.

The results of this second study confirm the first experimental demonstration of aspartame's multipotential carcinogenicity and demonstrate that developmental exposure aggravates the carcinogenic effects (tables 7 and 8).

Conclusions

It is well known that the latency time of most cancers (i.e. the time elapsing between the start of exposure to carcinogenic risks and the clinical manifestation of cancers) may span from 20 to 40 years [14].

In light of the fact that 80% of cancers are diagnosed over the age of 55-60 years, we may attribute the present epidemiological dimension of cancer to exposure beginning during adolescence or adulthood.

Nowadays, we are facing a new era in which exposure to carcinogenic risks begins during developmental life (prenatal and postnatal) and continues into adulthood.

Based on the results of long-term carcinogenicity bio-assays testing chemical and physical agents using rodents, there is ample evidence demonstrating that developmental, in conjunction with adult exposure to carcinogenic risks, produces an overall increase in the incidence of malignant tumours and an increased incidence of specific neoplasms related to exposures to specific carcinogens.

Moreover, when comparing prenatal and postnatal exposure, the development of certain tumours may appear earlier in life.

We must take into serious consideration the warnings provided by long-term carcinogenicity studies and take adequate action today.

Based on the evidence presented, increased attention must be given to developmental exposures to diffuse carcinogens.

It is only in this way that in the future we can hope to avoid a passive registration of a worsening epidemiological situation.

References

1
American Cancer Society. Cancer Statistics 2006.

Available from: http://www.cancer.org. Accessed 28 May 2007.
2
Soffritti M, Vrahulaki C, Belpoggi F et al.
Resoconti del registro tumori di Bologna e provincia 1982-2002.
Eur J Oncol; in press.
3
Soffritti M, Belpoggi F, Minardi F, Bua L, Maltoni C.
Megaexperiments to identify
and assess diffuse carcinogenic risks.
Ann N Y Acad Sci 1999; 895: 34-55.
Synergy, Medline, ISI, Chemport, CSA
4
International Agency for Research on Cancer.
IARC Monographs on the Evaluation of
Carcinogenic Risks to Humans,
Wood Dust and Formaldehyde,
vol. 62. IARC, Lyon, France, 1995.
5
Minardi F, Belpoggi F, Soffritti M et al.
Results of long-term carcinogenicity bioassay on vinyl acetate monomer in Sprague-Dawley rats.
Ann N Y Acad Sci 2002; 982: 106-22.
Synergy, Medline, ISI, Chemport, CSA
6
Belpoggi F, Soffritti M, Minardi F et al.
Results of a long-term carcinogenicity bioassay on vinyl acetate monomer in Wistar rats.
Eur J Oncol 2002; 7: 279-93.
7
Maltoni C, Ciliberti A, Lefemine G, Soffritti M.
Results of a long-term experimental study on the carcinogenicity of vinyl acetate monomer in mice.
Ann N Y Acad Sci 1997; 837: 209-38.
Synergy, Medline, ISI, Chemport, CSA
8
International Agency for Research on Cancer.
IARC Monographs on the Evaluation
of Carcinogenic Risks to Humans,
Alcohol Drinking,
vol. 44. IARC, Lyon, France, 1998.
9
Soffritti M, Belpoggi F, Cevolani D, Guarino M, Padovani M, Maltoni C.
Results of long-term experimental studies on the carcinogenicity of methyl alcohol and ethyl alcohol in rats.
Ann N Y Acad Sci 2002;982:46-69.
Synergy, Medline, ISI, Chemport, CSA
10
Soffritti M, Belpoggi F, Degli Esposti D, Lambertini L.
Aspartame induces lymphomas and leukaemias in rats.
Eur J Oncol 2005; 10: 107-16.
11
Belpoggi F, Soffritti M, Padovani M, Degli Esposti D, Lauriola M, Minardi F.
Results of long term carcinogenicity bioassay on Sprague-Dawley rats exposed to aspartame administered in feed.
Ann N Y Acad Sci 2006; 1076: 559-77.
Synergy, Medline, ISI, Chemport
12
Soffritti M, Belpoggi F, Degli Esposti D, Lambertini L, Tibaldi E, Rigano A.
First experimental demonstration of the
multipotential carcinogenic effects
of aspartame administered in the feed to Sprague-Dawley Rats.
Environ Health Perspect 2006; 114: 379-85.
Medline, ISI, Chemport
13
Soffritti M, Belpoggi F, Degli Esposti D, Tibaldi E, Lauriola M.
Lifespan exposure to low doses of aspartame beginning during prenatal life increases cancer effects in rats.
Environ Health Perspect 2007; 115: 1293-7.

Medline, ISI, Chemport
14
Owen WG.
Diffuse mesothelioma and exposure to
asbestos dust in the merseyside area.
Br Med J 1964; 2: 214-8.
Medline, Chemport

Users who read this article also read:

Late Insights into Early Origins of Disease Philippe Grandjean Basic & Clinical Pharmacology & Toxicology, Volume 102, Issue 2, Page 94-99, Feb 2008,
doi: 10.1111/j.1742-7843.2007.00167.x
    * Abstract
    * | References
    * | Full Text HTML
    * | Full Text PDF (121 KB)

Developmental Origins of Health and Disease: New Insights Mark A. Hanson and Peter D. Gluckman Basic & Clinical Pharmacology & Toxicology, Volume 102, Issue 2, Page 90-93, Feb 2008,
doi: 10.1111/j.1742-7843.2007.00186.x
    * Abstract
    * | References
    * | Full Text HTML
    * | Full Text PDF (114 KB)

Evidence for a Role of Paternal Exposures in Developmental Toxicity Sylvaine Cordier Basic & Clinical Pharmacology & Toxicology, Volume 102, Issue 2, Page 176-181, Feb 2008,
doi: 10.1111/j.1742-7843.2007.00162.x
    * Abstract
    * | References
    * | Full Text HTML
    * | Full Text PDF (75 KB)

Characterization of the Exposure-Disease Continuum in Neonates of Mothers Exposed to Carcinogens during Pregnancy Roger W. L. Godschalk and Jos C. S. Kleinjans Basic & Clinical Pharmacology & Toxicology, Volume 102, Issue 2, Page 109-117, Feb 2008,
doi: 10.1111/j.1742-7843.2007.00174.x
    * Abstract
    * | References
    * | Full Text HTML
    * | Full Text PDF (524 KB)

Animal Models for Probing the Developmental Basis of Disease and Dysfunction Paradigm Jerrold J. Heindel Basic & Clinical Pharmacology & Toxicology, Volume 102, Issue 2, Page 76-81, Feb 2008,
doi: 10.1111/j.1742-7843.2007.00184.x
    * Abstract
    * | References
    * | Full Text HTML
    * | Full Text PDF (80 KB)

The Faroes Statement:
Human Health Effects of Developmental Exposure to Chemicals in Our Environment Philippe Grandjean, David Bellinger, Åke Bergman, Sylvaine Cordier, George Davey-Smith, Brenda Eskenazi, David Gee, Kimberly Gray, Mark Hanson, Peter van den Hazel, Jerrold J. Heindel, Birger Heinzow, Irva Hertz-Picciotto, Howard Hu, Terry T-K Huang, Tina Kold Jensen, Philip J. Landrigan, I. Caroline McMillen, Katsuyuki Murata, Beate Ritz, Greet Schoeters, Niels Erik Skakkebæk, Staffan Skerfving and Pal Weihe Basic & Clinical Pharmacology & Toxicology, Volume 102, Issue 2, Page 73-75, Feb 2008,
doi: 10.1111/j.1742-7843.2007.00114.x
    * Summary
    * | Full Text HTML
    * | Full Text PDF (45 KB)

www.ehponline.org/members/2007/10271/10271.pdf
free full text 24 pages
National Institutes of Health
U.S. Department of Health and Human Services ENVIRONMENTAL HEALTH PERSPECTIVES Lifespan Exposure to Low Doses of Aspartame Beginning During Prenatal Life Increases Cancer Effects in Rats
doi:10.1289/ehp.10271 (available at http://dx.doi.org/) Online 13 June 2007 Morando Soffritti 1, Fiorella Belpoggi 1, Eva Tibaldi 1, Davide Degli Esposti 1, Michela Lauriola 1
1 Cesare Maltoni Cancer Research Center, European Ramazzini Foundation of Oncology and Environmental Sciences, Bologna Italy Address of the institution: Cesare Maltoni Cancer Research Center, European Ramazzini Foundation of Oncology and Environmental Sciences Castello di Bentivoglio, Via Saliceto, 3, 40010 Bentivoglio, Bologna, Italy +39 051 6640460 fax +39 051 6640223 crcfr@ramazzini.it, www.ramazzini.it Address correspondence to: M. Soffritti
Acknowledgements:
This research was supported entirely by the European Ramazzini Foundation Environmental Sciences.
The authors declare that they have no competing financial interests.
http://groups.yahoo.com/group/aspartameNM/message/1441

www.ramazzini.it/fondazione/docs/NYAS_Aspartame_Ramazzini.pdf
Results of Long-Term Carcinogenicity Bioassay on Sprague-Dawley Rats Exposed to Aspartame Administered in Feed Ann. N.Y. Acad. Sci. 2006 Sep; 1076: 559-577.
Fiorella Belpoggi,
Morando Soffritti,
Michela Padovani,
Davide Degli Esposti,
Michelina Lauriola, and
Franco Minardi.
The end judges everything --
HERODOTUS (480-425 B.C.) The History
Cesare Maltoni Cancer Research Center,
European Foundation of Oncology and Environmental Sciences 'B. Ramazzini',□ 40010 Bentivoglio, Bologna, Italy
http://groups.yahoo.com/group/aspartameNM/message/1382
[and, previously]
First experimental demonstration of the multipotential carcinogenic effects of aspartame administered in the feed to Sprague-Dawley rats.
Environ. Health Perspect. 2006 Mar; 114: 379-385.
PMID: 16507461
Soffritti M, Belpoggi F, Degli Esposti D, Lambertini L, Tibaldi E, Rigano A.
Environmental Health Perspectives Volume 113, Number 11 November 2005 Current print issue
The full version of this article is available for free in PDF format.
http://ehp.niehs.nih.gov/members/2005/8711/8711.pdf 35 pages First Experimental Demonstration of the Multipotential Carcinogenic Effects of Aspartame Administered in the Feed to Sprague-Dawley Rats.
Morando Soffritti, Fiorella Belpoggi, Davide Degli Esposti, Luca Lambertini, Eva Tibaldi, and Anna Rigano.
doi:10.1289/ehp.8711 (available at http://dx.doi.org/) Online 17 November 2005 The National Institute of Environmental Health Sciences National Institutes of Health U.S. Department of Health and Human Services http://www.ehponline.org/ Cesare Maltoni Cancer Research Center, European Ramazzini Foundation of Oncology and Environmental Sciences
Sofritti, M. et al. 2005.
Aspartame induces lymphomas and leukaemias in rats.
Eur. J. Oncol. 2005; 10: 107-116.
http://groups.yahoo.com/group/aspartameNM/message/1250

http://groups.yahoo.com/group/aspartameNM/message/1508
formaldehyde in FEMA trailers and other sources
(aspartame, dark wines and liquors, tobacco smoke):
Murray 2008.01.30
http://rmforall.blogspot.com/2008_01_01_archive.htm
Wednesday, January 30, 2008

Dark wines and liquors, as well as aspartame, provide
similar levels of methanol, above 100 mg daily, for
long-term heavy users, 2 L daily, about 6 cans.

Methanol is inevitably largely turned into formaldehyde,
and thence largely into formic acid.
It is the major cause of the dreaded symptoms of "next
morning" hangover.

Fully 11% of aspartame is methanol -- 1,120 mg aspartame
in 2 L diet soda, almost six 12-oz cans, gives 123 mg
methanol (wood alcohol). If 30% of the methanol is turned
into formaldehyde, the amount of formaldehyde, 37 mg,
is 18.5 times the USA EPA limit for daily formaldehyde in
drinking water, 2.0 mg in 2 L average daily drinking water,

185 times the New Jersey limit,
615 times the California and Maine limits,
1850 times the Maryland limit.

For instance, hangover researchers claim
that it is the ~150 mg/L methanol impurity,
about one part in 10,000,
twice the level from aspartame in diet sodas,
in dark wines and liquors that,
turned into formaldehyde and then formic acid,
is the major cause of the dreadful symptoms
of "morning after" hangover:

http://groups.yahoo.com/group/aspartameNM/message/1143
methanol (formaldehyde, formic acid) disposition:
Bouchard M et al, full plain text, 2001:
substantial sources are degradation
of fruit pectins, liquors, aspartame, smoke:
Murray 2005.04.02 rmforall

http://groups.yahoo.com/group/aspartameNM/message/1016
President Bush & formaldehyde (aspartame) toxicity:
Ramazzini Foundation carcinogenicity results Dec 2002:
Soffritti: Murray 2003.08.03 rmforall

p. 88 "The sweetening agent aspartame hydrolyzes in the
gastrointestinal tract to become free methyl alcohol,
which is metabolized in the liver
to formaldehyde, formic acid, and CO2. (11)"
Medinsky MA & Dorman DC. 1994;
Assessing risks of low-level methanol exposure.
CIIT Act. 14: 1-7.

Ann N Y Acad Sci. 2002 Dec; 982: 87-105.
Results of long-term experimental studies on the carcinogenicity of
formaldehyde and acetaldehyde in rats.
Soffritti M, Belpoggi F, Lambertin L,
Lauriola M, Padovani M, Maltoni C.
Cancer Research Center,
European Ramazzini Foundation for Oncology
and Environmental Sciences, Bologna, Italy. crcfr@ramazzini.it
Formaldehyde was administered for 104 weeks in drinking water
supplied ad libitum at concentrations of
1500, 1000, 500, 100, 50, 10, or 0 mg/L
to groups of 50 male and 50 female Sprague-Dawley rats
beginning at seven weeks of age.
Control animals (100 males and 100 females) received tap water only.
Acetaldehyde was administered to 50 male and 50 female
Sprague-Dawley rats beginning at six weeks of age at concentrations of
2,500, 1,500, 500, 250, 50, or 0 mg/L.

Animals were kept under observation until spontaneous death.
Formaldehyde and acetaldehyde were found to produce an increase
in total malignant tumors in the treated groups
and showed specific carcinogenic effects on various organs and tissues.
PMID: 12562630

Ann N Y Acad Sci. 2002 Dec; 982: 46-69.
Results of long-term experimental studies on the carcinogenicity of
methyl alcohol and ethyl alcohol in rats.
Soffritti M, Belpoggi F, Cevolani D,
Guarino M, Padovani M, Maltoni C.
Cancer Research Center,
European Ramazzini Foundation for Oncology
and Environmental Sciences, Bologna, Italy. crcfr@ramazzini.it
Methyl alcohol was administered in drinking water
supplied ad libitum at doses of
20,000, 5,000, 500, or 0 ppm to groups of male and female
Sprague-Dawley rats 8 weeks old at the start of the experiment.
Animals were kept under observation until spontaneous death.
Ethyl alcohol was administered by ingestion in drinking water at a
concentration of 10% or 0% supplied ad libitum
to groups of male and female Sprague-Dawley rats;
breeders and offspring were included in the experiment.
Treatment started at 39 weeks of age (breeders),
7 days before mating,
or from embryo life (offspring)
and lasted until their spontaneous death.
Under tested experimental conditions,
methyl alcohol and ethyl alcohol
were demonstrated to be carcinogenic
for various organs and tissues.
They must also be considered multipotential carcinogenic agents.
In addition to causing other tumors, ethyl alcohol induced
malignant tumors of the oral cavity, tongue, and lips.
These sites have been shown to be target organs in man by
epidemiologic studies.
Publication Types: Review Review, Tutorial PMID: 12562628

http://groups.yahoo.com/group/aspartameNM/message/1186
aspartame induces lymphomas and leukaemias in rats, full plain text,
M Soffritti, F Belpoggi, DD Esposti, L Lambertini: Ramazzini
Foundation study 2005.07.14: main results agree with their previous
methanol and formaldehyde studies: Murray 2005.09.03

Here I have combined fairly equivalent data from
their aspartame, methanol, and formaldehyde studies.
Aspartame groups were 100-150 rats each,
methanol 100 rats each,
and formaldehyde 50 rats each
(formaldehyde control groups 100 rats each).

Aspartame and methanol are directly comparable,
since the 11% methanol component of aspartame upon ingestion
is immediately and fully released into the GI tract,
and then much of that quickly turned into formaldehyde and
then formic acid, both of which account for the toxicity of methanol.

aspartame dose a
-----------------equivalent methanol dose
---------------- (11% of aspartame)
------------------------------roughly equivalent formaldehyde dose
------------------------------ (30% of methanol)

Males
Females
Males + Females

Animals with lymphomas and leukaemias [hemolymphoreticular neoplasias] % of each group of animals

Group
100 rats each

--------------------20,000-40.0
----------------------------28.0 #^
---------------------------- 34.0

I-100,000-29.0
------------25.0**
------------27.0

II--50,000-20.0-----5,000-36.0--1,500-46.0 **
------------25.0**---------24.0---------20.0*
------------22.5------------30.0---------33.0

-----------------------------------1,000-22.0*
---22.0*
---22.0

-----------------------------------500-24.0*
---14.0
---19.0

III-10,000-15.0
------------19.0*
------------17.0

------------------------500-35.0
----------------------------24.0
----------------------------29.5

------------------------100-26.0**
----------------------------16.0
----------------------------21.0

---50-20.0
---14.0
---17.0

IV-2,000--22.0
------------18.7*
------------20.3

V----400--16.7
------------20.0**
------------18.3
---10--8.0
---10.0
---9.0

------------------------15-20.0 [-50 rats]
----------------------------10.0 [-50 rats]
----------------------------15.0 [100 rats]

VI------80-15.3
------------14.7
------------15.0

VII------0-20.7----------0-28.0---------0-8.0 [control groups]
-------------8.7------------13.0------------7.0
------------14.7------------20.5------------7.5

a Considering the life-span average weight
of a rat (male and female) as 400 g
and the average consumption of food as 20 g per day

* aspartame, statistically significant p= 0.05;
** aspartame, statistically significant p= 0.01
using poly-k test (k = 3)

methanol, p<0.05 using X2 test
^ methanol, p<0.05 using Cochrane-Armitage test
for dose-response relationship

 * formaldehyde, p<0.05 using X2 test
** formaldehyde, p<0.01 using X2 test

We can grasp the main picture by studying the results at a high level of
exposure:

II--50,000-20.0-----5,000-36.0----1,500-46.0 **
------------25.0**---------24.0-----------20.0*
------------12.5------------30.0-----------33.0

The results amount to 1.3 to 5.75 times their control group levels.
Aspartame, methanol, and formaldehyde results broadly agree.
Unknown factors are causing differences between males and females.

The control groups vary widely,
with the percentage of rats with these most common cancers,
present at natural death, ranging from 7.0% to 28.0%.
A layman can only speculate as to the possible causes in a uniform
population of rats in the same huge laboratory facility for decades,
such as various viruses, bacteria, or molds,
or variable impurities in the tap water.

Formaldehyde at 50 ppm shows a doubling of the percentage
of rats with these cancers, for groups of just 50 rats.
It is a safe bet that studies using groups of 100 to 200 rats
would establish significance at this 50 ppm level,
which in turn would mandate the reduction
of the present USA EPA level (1999) from 1 ppm
for lifetime exposure to formaldehyde
in drinking water to 0.05 ppm,
since the human limit is estimated by dividing
the lowest harmful animal level by 1000.

www.finddiagnostics.org/
FIND Foundation for Innovative New Diagnostics
71, av. Louis-Casaï
Case postale 93
1216 Cointrin/Geneva, Switzerland
Tel: + 41 (22) 710 05 90 Fax: + 41 (22) 710 05 99
info@finddiagnostics.org;

---

formaldehyde in FEMA trailers and other sources
(aspartame, dark wines and liquors, tobacco smoke):
Murray 2008.01.30
http://rmforall.blogspot.com/2008_01_01_archive.htm
Wednesday, January 30, 2008
http://groups.yahoo.com/group/aspartameNM/message/1508

The FEMA trailers give about the same amount of formaldehyde daily
as from a quart of dark wine or liquor, or two quarts (6 12-oz cans)
of aspartame diet soda, from their over 1 tenth gram methanol impurity
(one part in 10,000), which the body quickly makes into
formaldehyde -- enough to be the major cause of "morning after"

alcohol hangovers.

Methanol and formaldehyde also result from many fruits and vegetables, tobacco and wood smoke, heater and vehicle exhaust, household chemicals and cleaners, cosmetics, and new cars, drapes, carpets, furniture, particleboard, mobile homes, buildings, leather... so all these sources add up and interact with many other toxic chemicals.

BN Ames and LS Gold, 1998, have presented detailed information that there is no increase in recent decades for most cancers, and that common carcinogens do not result in significant exposures to the average human population.

However, individuals are not average -- each person has a unique genetic makeup, resulting in a huge range of variation of vulnerability to specific chemicals, as is well evidenced in the case of methanol, formaldehyde, and formic acid, especially with regard to behavioral effects.

Each is subject to very wide ranges of exposure levels.

Many are in especially vulnerable groups, depending on diet, obesity, sex, exercise, life stress, age from conception to very old, severe toxic exposures, injuries, and diseases.

It is clear that a variety of multiple chemical sensitivity syndromes do exist, often with remarkable hypersensitivity.

Methanol, formaldehyde, and formic acid toxicity are unusual, in that humans are far more vulnerable than any other mammal, as much as ten to sixty-fold, which complicates the utility of animal data.

The unusally long human life span also increases the role of long-term chronic low-level exposure.

http://groups.yahoo.com/group/aspartameNM/message/1455
FEMA slow to safety test Katrina toxic trailers, Charles Babington, Associated Press -- 1 ppm formaldehyde in air is about half the daily dose from 3 cans aspartame diet soda and ten times the 1999 EPA alarm level for drinking water: Murray 2007.07.23
http://groups.yahoo.com/group/aspartameNM/message/1455

"Paulison said FEMA received "just over 200 complaints of strange odors including formaldehyde" in trailers and that 58 trailers were replaced "because of formaldehyde concerns."

Occupants of five other trailers were moved to apartments, he said.

Several lawmakers said FEMA should have seen the 200 complaints as a sign of a much wider problem. "

1 ppm formaldehyde in air is half the daily dose
from 3 cans aspartame diet soda
and ten times the 1999 EPA alarm level for drinking water.

J. D. Trasher et al in 1990 found many symptoms
in 19 mobile home residents,
living with 0.05 to 0.5 ppm formaldehyde.

http://www.drthrasher.org/formaldehyde_1990.html full text
Jack Dwayne Thrasher, Alan Broughton, Roberta Madison.
Immune activation and autoantibodies in humans
with long-term inhalation exposure to formaldehyde.
Archives of Environmental Health. 1990; 45: 217-223.

"Immune activation, autoantibodies, and anti-HCHO-HAS
antibodies are associated with long-term formaldehyde inhalation."
PMID: 2400243

FEMA found 1.2 ppm formaldehyde in April 2005
in one of over 120,000 mobile homes
supplied for recent hurricane victims --
75 times more than the
0.016 level set for 8-hour working days
by the National Institute for Occupational Safety and Health
for workers to be required to wear respirators.

http://www.arb.ca.gov/toxics/tac/appendxc.htm

1 ppm FA in air = 1.23 mg/cubic meter, so breathing 20 cubic
meters would retain about 20 mg FA daily, ten times the 1999 EPA
alarm level for drinking water.

Dark wines and liquors, as well as aspartame, provide similar levels
of methanol, above 120 mg daily, for long-term heavy users,
2 L daily, about 6 cans.

Within hours, methanol is inevitably largely turned into formaldehyde,
and thence largely into formic acid -- the major causes of the
dreaded symptoms of "next morning" hangover.

Fully 11% of aspartame is methanol --
1,120 mg aspartame in 2 L diet soda,
almost six 12-oz cans, gives 123 mg methanol (wood alcohol).
If 30% of the methanol is turned into formaldehyde,
the amount of formaldehyde, 37 mg, is 18.5 times the USA EP
limit for daily formaldehyde in drinking water,
2.0 mg in 2 L average daily drinking water.

Medicine has to consider that the many sources of methanol and
formaldehyde are additive co-factors.

http://groups.yahoo.com/group/aspartameNM/message/1286
methanol products (formaldehyde and formic acid)
are main cause of alcohol hangover symptoms
[same as from similar amounts of methanol, the 11% part of
aspartame]: YS Woo et al, 2005 Dec: Murray 2006.01.20

http://groups.yahoo.com/group/aspartameNM/message/1143
methanol (formaldehyde, formic acid) disposition:
Bouchard M et al, full plain text, 2001:
substantial sources are degradation of fruit pectins,
liquors, aspartame, smoke: Murray 2005.04.02

"... aspartame. It's perfectly safe," eminent diabetes MD S. Kalani
Brady -- er, Doctor, RX for ignorance, 3 days earnest study of
recent 2 years of mainstream research by groups independent of
vested interests: Murray 2008.01.27
http://rmforall.blogspot.com/2008_01_01_archive.htm
Sunday, January 27, 2008
http://groups.yahoo.com/group/aspartameNM/message/1507

details on 6 epidemiological studies since 2004 on diet soda (mainly
aspartame) correlations, as well as 14 other mainstream studies on
aspartame toxicity since summer 2005: Murray 2007.11.27
http://rmforall.blogspot.com/2007_11_01_archive.htm
Wednesday, November 14, 2007
http://groups.yahoo.com/group/aspartameNM/message/1490

Hawaiian aspartame ban bills in House and Senate challenge
corporate clout, Sen. J. Kalani English & Suzanne Chun Oakland,

Rep. Calvin K.Y. Say & Mele Carroll: Murray 2008.01.25
http://rmforall.blogspot.com/2008_01_01_archive.htm
Friday, January 25, 2008
http://groups.yahoo.com/group/aspartameNM/message/1505

www.capitol.hawaii.gov/site1/house/members/rep13.asp

Mele Carroll
13th Representative District
Hawaii State Capitol, Room 405
415 South Beretania Street
Honolulu, HI 96813
Phone 808-586-6790; fax 808-586-6779
From Maui, toll free 984-2400 + 66790
From Molokai and Lanai,
toll free 1-800-468-4644 + 66790
E-mail repcarroll@Capitol.hawaii.gov;

http://groups.yahoo.com/group/aspartameNM/message/1426
ASDA (unit of Wal-Mart Stores WMT.N) and Marks & Spencer
will join Tesco and also Sainsbury to ban and limit
aspartame, MSG, artificial flavors dyes preservatives additives,
trans fats, salt "nasties" to protect kids from ADHD:
leading UK media: Murray 2007.05.15

http://groups.yahoo.com/group/aspartameNMmessage/1451
Artificial sweeteners (aspartame, sucralose) and coloring
agents will be banned from use in newly-born and baby foods,
the European Parliament decided: Latvia ban in schools 2006:
Murray 2007.07.12

Seizures and hyponatremia after excessive intake of diet coke, LJ
Mortelmans, M Van Loo, HG De Cauwer, K Merlevede, Klina
General Hospital, Brasschaat, Belgium, EJEM 2008 Feb:
Mark D. Gold critique: Murray 2008.01.10
http://rmforall.blogspot.com/2008_01_01_archive.htm
Thursday, January 10, 2008
http://groups.yahoo.com/group/aspartameNM/message/1502

See also:
possible neurologic effects of aspartame, TJ Maher, RJ Wurtman,
Environ. Health Persp. 1987 Nov, full text: other seizure reports re
aspartame, methanol, formaldehyde, formic acid:
Murray 2008.01.10
http://rmforall.blogspot.com/2008_01_01_archive.htm
Thursday, January 10, 2008
http://groups.yahoo.com/group/aspartameNM/message/1501

Eur J Emerg Med. 2008 Feb; 15(1): 51.
Seizures and hyponatremia after excessive intake of diet coke.
Mortelmans LJ, Luc.mortelmans@klina.be,
Van Loo M,
De Cauwer HG, haralddecauwer@hotmail.com,
Merlevede K. Karen.Merlevede@klina.be,
Departments of
a Emergency Medicine
b Neurology,
Klina General Hospital, Brasschaat, Belgium.

We describe a case of epileptic seizures after a massive intake of
diet coke.

Apart from the hyponatremia due to water intoxication the

convulsions can be potentiated by the high dose of caffeine and aspartame from the diet coke.

To our knowledge this is the first report of seizures due to excessive diet coke intake. PMID: 18180668

Methyl alcohol ingestion as a model etiologic agent in multiple sclerosis, WC Monte, D Glanzman, C Johnston;
Methanol induced neuropathology in the mammalian central nervous system, Woodrow C. Monte, Renee Ann Zeising,
both reports 1989.12.04: Murray 2007.12.28
http://rmforall.blogspot.com/2007_12_01_archive.htm
Friday, December 28 2007
http://groups.yahoo.com/group/aspartameNM/message/1499

[These seminal 1989 studies by Prof. Woodrow C. Monte are also given in this previous post, along his two recent comprehensive reviews:

role of formaldehyde, made by body from methanol from foods and aspartame, in steep increases in fetal alcohol syndrome, autism, multiple sclerosis, lupus, teen suicide, breast cancer, Nutrition Prof. Woodrow C. Monte, retired, Arizona State U., two reviews, 190 references supplied, Fitness Life, New Zealand
2007 Nov, Dec: Murray 2007.12.26
http://rmforall.blogspot.com/2007_12_01_archive.htm
Wednesday, December 26 2007
http://groups.yahoo.com/group/aspartameNM/message/1498]

folic acid prevents neurotoxicity from formic acid, made by body from methanol impurity in alcohol drinks [also 11 % of aspartame], BM Kapur, PL Carlen, DC Lehotay, AC Vandenbroucke, Y Adamchik, U. of Toronto,
2007 Dec., Alcoholism Cl. Exp. Res.:
Murray 2007.11.27
http://rmforall.blogspot.com/2007_11_01_archive.htm
Wednesday, November 27, 2007
http://groups.yahoo.com/group/aspartameNM/message/1495

http://groups.yahoo.com/group/aspartameNM/message/1340
aspartame groups and books: updated research review of 2004.07.16: Murray 2006.05.11

http://groups.yahoo.com/group/aspartameNM/message/1453
Souring on fake sugar (aspartame), Jennifer Couzin,
Science 2007.07.06: 4 page letter to FDA from 12 eminent USA toxicologists re two Ramazzini Foundation cancer studies 2007.06.25: Murray 2007.07.18

http://groups.yahoo.com/group/aspartameNM/message/1341
Connecticut bans artificial sweeteners in schools, Nancy Barnes,
New Milford Times: Murray 2006.05.25

http://groups.yahoo.com/group/aspartameNM/message/1369
Bristol, Connecticut, schools join state program to limit artificial sweeteners, sugar, fats for 8800 students, Johnny J Burnham,
The Bristol Press: Murray 2006.09.22

Devra Lee Davis, U. Pittsburgh Cancer Institute, rejects aspartame -- Luke Ravenstahl, Mayor,
drinks 12 cans Diet Pepsi daily:
accurate warning by Ronald K. Frazer: Murray 2008.01.13
http://rmforall.blogspot.com/2008_01_01_archive.htm
Sunday, January 13, 2008
http://groups.yahoo.com/group/aspartameNM/message/1503

http://groups.yahoo.com/group/aspartameNM/message/1141
Nurses Health Study can quickly reveal the
extent of aspartame
(methanol, formaldehyde, formic acid) toxicity:
Murray 2004.11.21

The Nurses Health Study is a bonanza of information about the
health of probably hundreds of nurses who use 6 or more cans daily
of diet soft drinks -- they have also stored
blood and tissue samples from their immense pool of subjects.

http://en.wikipedia.org/wiki/Aspartame_controversy

"Of course, everyone chooses, as a natural priority, to enjoy peace,
joy, and love by helping to find, quickly share, and positively act
upon evidence about healthy and safe food, drink, and environment."

Rich Murray, MA Room For All rmforall@comcast.net
505-501-2298 1943 Otowi Road, Santa Fe, New Mexico 87505

http://groups.yahoo.com/group/aspartameNM/message/1469
highly toxic formaldehyde, the cause of alcohol hangovers, is
made by the body from 100 mg doses of methanol from dark wines
and liquors, dimethyl dicarbonate, and aspartame:
Murray 2007.08.31

http://RMForAll.blogspot.com new primary archive

http://groups.yahoo.com/group/aspartameNM/messages
group with 120 members, 1,512 posts in a public archive
