Dynamic Chiropractic

NUTRITION / DETOXIFICATION

Alternative Sweeteners, Part 2

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Artificial Sweeteners

Part 1 of this article [July 15 *DC*] reviewed reduced-calorie sweeteners: sugar alcohols. Part 2 focuses on those sweetening agents that are totally or virtually calorie-free. Because the obesity epidemic continues to rise, sweeteners that are highly processed, completely artificial, or synthetic derivatives of natural substances will be consumed worldwide at an increasing rate.

*The amount used as a sweetener is much more than what is allowed for flavoring.
**In the U.S., Stevia is approved as a dietary supplement and can be purchased in bulk.
***Not pure sucralose. Small amounts of maltodextrin and dextrose are added.

Name (Brand Name)	Sweetness (Relative to Sugar)	Regulatory Status
Acesulfame potassium (Sunett, Sweet 1)	200	Approved in 90 countries, including the U.S.
Alitame	2,000	Approved in Australia, New Zealand, China, and Mexico
Aspartame (Equal and Nutrisweet)	180-200	Approved in over 100 countries, including the U.S.
Cyclamate	30	Approved in over 50 countries, banned in the United States
Dihydrochalcones (Neo-DHC)	30-1,500	Approved in Europe
Neotame	10,000	Approved in the U.S., Australia, and New Zealand
Saccharin (Sweet N' Low)	300-500	Approved in over 100 nations, including the U.S.
Stevia	250-300	Approved in 10 nations, including Japan and much of South America; not ap
Sucralose (Splenda)***	600	Approved in over 40 countries, including all of North America

Comments

Nutritional conservatives and liberals are in general agreement that artificial sweeteners are not "good for you." The argument heats up when discussing how bad or how harmful these products may be. Occasional use of small amounts is not problematic for most people. Where we run into trouble is in our definition of "small amounts."

A case in point is the debate involving sucralose and Stevia. In small amounts, Stevia has been safely used in Japan for many years, with no apparent ill effects. However, in animal studies using larger amounts, complications such as energy suppression and reproductive problems have occurred, so much so that the FDA does not yet feel Stevia is a safe product for purposes of sweetening. Conversely, sucralose appears quite safe in a number of studies and is FDA-approved. However, opponents question the neutrality of the data and state that none of the more than 100 studies cited by proponents was long-term on humans. What is implied but unspoken is that both

sides in the sweetener debate are worried about how many people are incapable of moderation, consciously or unconsciously. (Conscious = they add it to everything; unconscious = industry adds it to everything.)

The biggest problem I see with both artificial sweeteners and sugar alcohols (discussed in part 1) is not their side-effects from overconsumption, but how they affect our food choices. For those on low-carbohydrate diets, as the food industry increases the use of these products, (individually and most commonly, in combinations), people will be able to eat more calories before they reach their carbohydrate limit. And although "having your cake (or bacon) and eating it, too" is a common theme among best-selling diet book authors, weight loss without sacrifice is almost impossible. (Sacrifice = fewer calories in and/or more calories out.)

Resources

1. www.caloriecontrol.org.
2. www.spipolyols.com
3. Ensminger AH, Konlande JE, Robson JRK. *Encyclopedia of Foods and Nutrition*. Boca Raton, FL: CRS Press. 1995.
4. Rowett CA. Smithsonian revisits Remsen-Fahlberg debate. *The Gazette* 1994;23(40). Johns Hopkins University.
5. www.cspinet.org.
6. www.neotame.com.
7. www.holisticmed.com.

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