

ORGANISATION MONDIALE DE LA SANTÉ



WORLD HEALTH ORGANIZATION

ВСЕМИРНАЯ ОРГАНИЗАЦИЯ ЗДРАВООХРАНЕНИЯ

ORGANIZACION MUNDIAL DE LA SALUD

Telegr.: UNISANTÉ, Genève

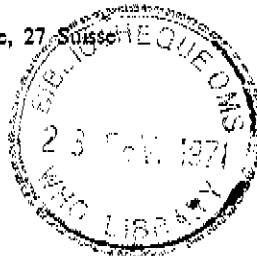
1211 Genève, 27, Suisse

INDEXED

Tel. 34 60 61

Ref: C.L.37.1970

F6/180/12



Geneva, 5 October 1970

Sir,

I have the honour to refer to my letter C.L.27.1970 dated 24 July 1970, on the subject of Health Hazards of Food Additives (resolution WHA23.50).

Pursuant to that letter, three communications have been received. Information sheets prepared on the basis of these are enclosed herewith. The original communications are retained in the archives of WHO for consultation.

In the interest of speeding up the food additives information service, I would suggest using the same procedure as for the Drug Information Service (pursuant to resolution WHA16.36), i.e. that the information collected by WHO should be addressed directly to the relevant technical department or service of the national administration concerned. I should appreciate it if you would let me have the corresponding address at your earliest convenience.

I have the honour to be,

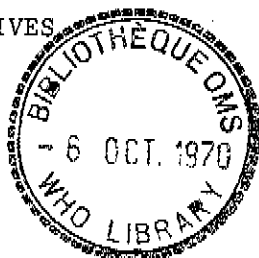
Sir,

Your obedient Servant,

M. G. Candau, M.D.  
Director-General

... ENCL: As stated

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5 October 1970

ORIGINAL: ENGLISH

The Director-General of the Ministry of Health for Israel, has transmitted to the World Health Organization a copy of the report on cyclamates by the committee set up by the Minister of Health. The report "includes the toxicological evaluation made by the committee and recommendations for action. Regulations have been drafted on the basis of these recommendations and will be published shortly".

The recommendations in their entirety are quoted below:

"7. Recommendations

It seems to us that were it possible to postpone any action or decision for two to three years, appropriate recommendations could have been made with greater assurance. We are convinced that during this period, the existing results will be analyzed more precisely, and additional experiments and observations will have been carried out. Unfortunately, such a delay is not practicable. Both from the viewpoint of public opinion and of possible danger to public health, it is undesirable to suggest postponement of any recommendations.

The following comprise, therefore, only interim recommendations, with no final decisions in terms of actual avoidance of hazards - as we would have wished.

(1) We recommend the forbidding of the use of cyclamates in food products for the free market, but that cyclamate-containing dietetic products might be permitted, provided they are marketed as medicinal products. (In Israel the use of cyclamates, apart from tablets, has, till now, been restricted to the soft drinks industry, and for juice concentrates and jams.)

(2) We do not recommend the limitation, by law or administratively, of the use of cyclamates in tablet form.

(3) We suggest that the Ministry of Health publish the following recommendations:-

It is desirable that an adult should not use more than 20 tablets a day, and a child not more than 10 tablets (on the assumption that a tablet contains 50-60 mg cyclamates). This limited consumption ensures margins of safety at a ratio of 100 (approx.).

(4) We suggest the publication of a recommendation that pregnant women do not use cyclamates without medical approval.

It is clear that these recommendations will not refer to people for whom the use of cyclamates is part of medical treatment, the recommended quantity to be decided by the attending physician.

(5) We recommend also to keep in future the accepted ratio in the tablets on the market today, i.e. 10% saccharin and 90% cyclamates. (Note: Saccharin was used many years before the cyclamates, but the research on it has been less. The reported studies fail to show positive evidence of toxicity, but also include less negative findings than with cyclamates.)

(6) It would also be advisable that the standards of purity of cyclamates comply with the accepted international specifications (especially in regard to CHA).

(7) We wish to reiterate, and to stress, that the limitations we recommend are purely precautionary measures. We have not reached the conclusion that the artificial sweetening agents constitute a real danger to the health of the public.

(8) The entire problem should be re-examined after additional data have been accumulated. A period of two or three years appears to us to be a reasonable length of time for such reconsideration - if unequivocal findings are not meanwhile published which will change the entire picture."

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HEALTH HAZARDS OF FOOD ADDITIVES

FOOD ADDITIVES INFORMATION No. 2

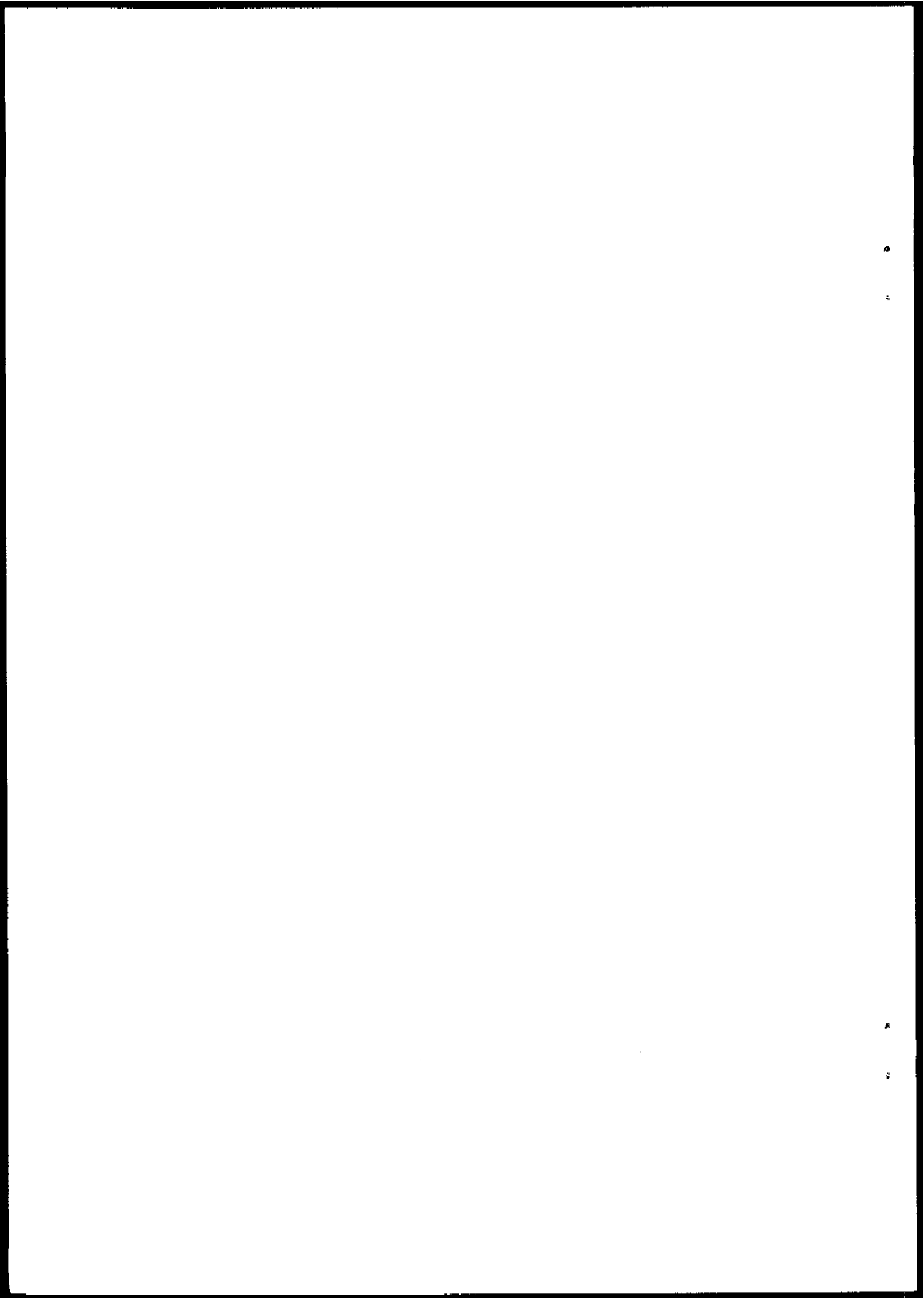
Resolution WHA23.50

5 October 1970

ORIGINAL: ENGLISH

The Director of the Department of Health Administration, Ministry of the Interior of the Republic of China has communicated to the World Health Organization the following information:

According to the Regulation of Food Additives of the Republic of China, all artificial sweeteners are prohibited to be used as food additives; and foods containing artificial sweeteners are also prohibited to be imported into the country.



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HEALTH HAZARDS OF FOOD ADDITIVES

FOOD ADDITIVES INFORMATION No. 3

Resolution WHA23.50

5 October 1970

ORIGINAL: ENGLISH

The Government of the United States of America has transmitted to the World Health Organization the following information:

The Food and Drug Administration announced that food products containing cyclamates will not be permitted to be marketed as drugs, and reaffirmed the previously announced September 1, 1970 phase-out date for canned fruit and vegetable juices, concentrates and mixes for lemonade and fruit drinks and iced tea mixes containing cyclamates and cyclamate sweeteners, all marketed as foods.

The FDA action will have the effect of not permitting products containing cyclamate in the marketplace.

This decision was based on the recommendation of the Medical Advisory Group on Cyclamates which re-examined its previous recommendation that some obese persons and juvenile diabetics are intractable to dietary control and require non-nutritive sweeteners to maintain their caloric intake control. It now concluded that prudent limitation on cyclamate intake, dictated by safety considerations, would restrict the daily intake of cyclamates to a maximum of 168 milligrams. This, the group said, would permit the sweetening of only one serving of canned fruit or vegetables, with a caloric reduction in the order of 21 calories. The group felt that this was an insignificant caloric reduction having no practical value for the obese or the diabetic patient. Thus the FDA which under the law must approve use of cyclamates as drugs based on evidence of safety and effectiveness, must now conclude that the continued sale of the products with drug labelling cannot be permitted.