

Sweeteners, Good, Bad, or Something even Worse.
(Part 4)

These are non-calorie sweeteners other than Aspartame

Cyclamate (Sodium Cyclamate)

Currently not in the US as per FDA

Also labeled as:

- Sweetener code 952
- Calcium Cyclamate
- Cologram = cyclamate and saccharin; not in US
- Sucaryl

In the United States, the U.S. Food and Drug Administration banned the sale of cyclamate in October 1969 after lab tests in rats involving a 10:1 mixture of cyclamate and saccharin indicated that large amounts of cyclamates causes bladder cancer in rats, a disease to which they are particularly susceptible. Another 1978 study "concluded that neither saccharin nor cyclamate is likely to be carcinogenic in man." Cyclamates are still used as sweeteners in many parts of the world, including Europe.

Saccharin

Also labeled as:

- Acid Saccharin
- Equal Saccharin
- Necta Sweet
- Sodium Saccharin
- Sweet N Low
- Sweet Twin

Foods containing saccharin no longer carry a label stating that the "use of this product may be hazardous to your health ...contains saccharin which has been determined to cause cancer in laboratory animals." This warning was lifted in 2001 by the American FDA as saccharin no longer has been connected to cancer in human beings, or so they say.

Saccharin may be present in drugs in substantial amounts. Ingestion of the recommended daily dosage of chewable aspirin or acetaminophen tablets in a school-age child would provide approximately the same amount of saccharin contained in one can of a diet soft drink. This amount, relative to the body weight of a child younger than 9 or 10 years, ingested for prolonged periods would be considered as "heavy use," as defined in a major large-scale FDA/National Cancer Institute epidemiologic study.

Saccharin is an O-toluene sulfonamide derivative and causes similar dermatologic reactions. Cross-sensitivity with sulfonamides has been demonstrated; therefore, children with "sulfa" allergy should also avoid saccharin. Hypersensitivity can usually be confirmed by a radioallergosorbent test for saccharin. In a series of 42 patients with adverse effects resulting from consumption of saccharin in pharmaceutical agents, pruritus and urticaria were the most common reactions, followed by eczema, photosensitivity, and prurigo. Other reactions include wheezing, nausea, diarrhea, tongue blisters, tachycardia, fixed eruptions, headache, diuresis, and sensory neuropathy.

Ingestion of saccharin-adulterated milk formula by infants was associated with irritability, hypertonia, insomnia, opisthotonos, and strabismus, which resolved within 36 hours after ingestion. However most infants that I know of eat more often than every 36 hours so these symptoms would be continuous as long as the child was fed this formula. Two anecdotal reports of an accidental overdose in an adult and a child discussed reactions of generalized edema, oliguria, and persistent albuminuria. Because of the paucity of data on the toxicity of

saccharin in children, the American Medical Association has recommended limiting the intake of saccharin in young children and pregnant women.

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