

Dangers of Aspartame

Are you sick from aspartame and don't know it? Please read the counter point comments from readers at the end of the article. This is a hot topic... Here is the argument against aspartame from various sources around the web:

There are 92 documented symptoms of ASPARTAME, from coma to death. The majority of them are all neurological, because the ASPARTAME destroys the nervous system. ASPARTAME Disease could be the cause to what is behind some of the mystery of the Desert Storm health problems some of the soldiers are experiencing. The burning tongue and other problems discussed in over 60 cases can be directly related to the consumption of an ASPARTAME product. Several thousand pallets of diet pop were shipped to the Desert Storm troops. (Heat can liberate the methanol from the ASPARTAME at 86 degrees F). Diet pop sat in the 120 degree F. Arabian sun for weeks at a time on pallets. The service men and women drank this diet pop all day long. All of their symptoms are identical to ASPARTAME poisoning.

You may have never knew about the fact that aspartame can poison. This is in no small part because the diet industry is worth a ton of money to some big name companies, and they want to protect their income even if it means your health! When NutraSweet came to market for the second time in 1981, a new diet craze was born and low carb was the rage. The money started to pour in for artificial sweeteners and there was a niche market ready to be marketed to.

The 1976 Grolier's encyclopedia states cancer cannot live without phenylalanine. Aspartame is 50% phenylalanine.

Many people have reported the following side effects from aspartame:

- Fibromyalgia Syndrome and symptoms of Fibromyalgia
- Multiple Sclerosis symptoms
- Dizziness
- Headaches
- Menstrual problems
- Behavioral changes observed after intake of aspartame flavored foods and drinks are moodiness, nausea, hallucinations, seizures, twitching, abnormal breathing, and depression.

How does this happen? When Aspartame, is synthesized from the amino acids, Phenylalanine, and Aspartic Acid, in the presence of methyl alcohol, amino acid imbalances immediately result causing interruption of the normal neurotransmitter metabolism of the human brain.

The amino acid neurotransmitter Tryptophan is less available for its known action for optimal brain serotonin levels. This in turn arouses systemic hypertension, insomnia, hyperactivity, general contraindication to those taking the medications levodopa or monoamine oxidase inhibitors.

The structure of aspartame seems simple, but what a complicated structure aspartame really is. Two isolated amino acids in aspartame are fused together by its third component, deadly methanol. In this structure, methanol bonds the two amino acids together, but when released at a mere 86 degrees Fahrenheit or 30 degrees Celsius, the methanol becomes a poisonous free radical.

Methanol breaks down into formic acid and formaldehyde, embalming fluid. Methanol is a dangerous neurotoxin, a known carcinogen, causes retinal damage in the eye, interferes with DNA replication, and causes birth defects. **Aspartame can be found on the ingredients list in the following products:**

Diet pop, over-the-counter drugs & prescription drugs (very common and listed under inactive ingredients), vitamin & herb supplements, yogurt, instant breakfasts, candy, breath mints, cereals, sugar-free chewing gum, cocoa mixes, coffee beverages, instant breakfasts, gelatin desserts, frozen desserts, juice beverages, laxatives, milk drinks, shake mixes, tabletop sweeteners, tea beverages, instant teas and coffees, topping mixes, wine coolers, etc.

Also, some drug and supplement manufacturers are allowed to avoid listing aspartame on the label if they state the words, contains phenylalanine.

Why Diet Pop and Colas make you fat and sick .

Many times people come in to train with me and ask what can I do to lose weight? One of the very first questions I ask is - Do you drink diet pop?

Effective weight loss starts with diet changes and exercise, one of the first changes is to stop drinking all diet pop all colas, all carbonated beverages - including diet pop, which is the worst. *Get the Aspartame out of your diet!*

Why? Diet pop is very acidic, with a pH of 1.5 to 2.5 - that is 100,000 times more acid that your body wants to be. Aspartame has a pH of 1.5! **All life dies at a pH of 4.5.** (I was at 4.0 Joni Lund.com before I changed my life around. Look how fortunate I was to be alive. See why I was so sick?)

Because of this your body creates fat cells to store the extra acid or in this case Aspartame. This is why people who drink diet pop just get fatter.

Your kidneys are the prime pH balancing organs in your body. The body wants to have a general pH of about 7. So when you drink pure water with pH of about 7 or a little higher - you are balancing the pH in your kidneys, and balancing the general pH in the body. When the pH is right the body can release and dispose of stored acids, which are filling the fat cells. This why some clients have had such drastic weight reductions in such a short amount of time, just drinking water.

Why is pH so important? If your PH is correct you will have a much less chances of contracting a chronic condition, such as cancer, arthritis, or even the common cold.

There is a direct correlation between pH and your immune system. The Immune system works at its most optimal level, when the body pH is 7.0 - or slightly alkaline.

So when you drink just one diet pop - you drive your pH down, shutting down the immune system, and setting yourself up for a disease to take hold. **Drink just one diet pop or cola, you will then have to drink 32 glasses of water with a pH of 7 or more to balance your pH.** Same problem for other toxic ins stored in the body. This is why detoxing your body is so important when healing, repairing body, or improving your health.

Scientists have found that healthy people have body fluids that are slightly alkaline, 7.1 to 7.5 pH. Scientists and doctors have also found that over 150 degenerative diseases are linked to acidity, including cancer, diabetes, arthritis, heart disease, gall and kidney stones, and many more. All diseases thrive in an acidic, oxygen poor environment.

Keep in mind that a drop in every point on the pH scale is 10x more acidic than the previous number. I.e. from 7 to 6 is 10x, from 7 to 5 is 100x etc. From 7 to 2 is 100,000x more acidic, colas are in the approximate 2.5 pH range. Almost no soda(pop) is higher than 3.0. Diet sodas are the worst as they have the highest acid content. Actually diet sodas cause you to gain weight because they alter the blood chemistry, making changes in your metabolism, leading to a slower metabolic rate. The best liquid to drink is water.

Most degenerative diseases we call Old-Age Diseases like memory loss, osteoporosis, arthritis, diabetes, hypertension, and many more are actually **life style diseases caused by acidosis**, the lack of supplements, what acids we ingest, what nutrients we don't ingest, or toxins we don't properly eliminate.

Extract from: The WORLD ENVIRONMENTAL CONFERENCE and the MULTIPLE SCLEROSIS FOUNDATION.

When the temperature of ASPARTAME exceeds 86 degrees F, the wood alcohol in ASPARTAME converts to formaldehyde and then to formic acid, which in turn causes metabolic acidosis. (Formic acid is the poison found in the sting of fire ants). The methanol toxicity mimics multiple sclerosis; thus people were being diagnosed with having multiple sclerosis in error. The multiple sclerosis is not a death sentence, where methanol toxicity is. In the case of systemic lupus, we are finding it has become almost as rampant as multiple sclerosis, especially with Diet Coke and Diet Pepsi drinkers. Also, with methanol toxicity, the victims usually drink three to four 12 oz. cans of them per day, some even more.

On the other hand, in the case of those diagnosed with Multiple Sclerosis, (when in reality, the disease is methanol toxicity), most of the symptoms disappear. We have seen cases where their vision has returned and even their hearing has returned. This also applies to cases of tinnitus. If you are using ASPARTAME (NutraSweet, Equal, Spoonful, etc.) and you suffer from fibromyalgia symptoms, spasms, shooting pains, numbness in your legs, cramps, vertigo, dizziness, headaches, tinnitus, joint pain, depression, anxiety attacks, slurred speech, blurred vision, or memory loss-you probably have ASPARTAME DISEASE!

ASPARTAME changes the brain's chemistry. It is the reason for severe seizures. This drug changes the dopamine level in the brain. Imagine what this drug does to patients suffering from Parkinson's Disease. This drug also causes Birth Defects. There is absolutely no reason to take this product. It is **NOT A DIET PRODUCT!!!** The Congressional record said, It makes you crave carbohydrates and will make you FAT. Dr. Roberts stated that when he got patients off ASPARTAME, their average weight loss was 19 pounds per person. The formaldehyde stores in the fat cells, particularly in the hips and thighs.

According to the Conference of the American College of Physicians, We are talking about a plague of neurological diseases caused by this deadly poison. Dr. Roberts realized what was happening when ASPARTAME was first marketed. He said his diabetic patients presented memory loss, confusion, and severe vision loss. At the Conference of the American College of Physicians, doctors admitted that they did not know. They had wondered why seizures were rampant (the phenylalanine in ASPARTAME breaks down the seizure threshold and depletes serotonin, which causes manic depression, panic attacks, rage, and violence).

I assure you that MONSANTO, the creator of ASPARTAME, knows the dangers. They fund the American Diabetes Association, American Dietetic Association, Congress, and the Conference of the American College of Physicians. The New York Times, on November 15, 1996, ran an article on how the American

Dietetic Association takes money from the food industry to endorse their products. Therefore, they cannot criticize any additives or tell about their link to MONSANTO.

Dr. Roberts says consuming ASPARTAME at the time of conception can cause birth defects. The phenylalanine concentrates in the placenta, causing mental retardation, according to Dr. Louis Elsas, Pediatrician Professor of Genetics, at Emory University in his testimony before Congress.

Stevia, a sweet food, NOT AN ADDITIVE, which helps in the metabolism of sugar, which would be ideal for diabetics, has now been approved as a dietary supplement by the FDA for years. If it says **SUGAR FREE** on the label-DO NOT EVEN THINK ABOUT IT !!! **So what is an alternative to aspartame?**

Stevia is an herb that has been used as a sweetener in South America for hundreds of years. It is calorie - free, and the powdered concentrate is 300 times sweeter than sugar. Is widely used all over the world. In Japan, for example, it claims 41% of the sweetener market, including sugar, and was used in Japanese Diet Coke until the company replaced it with aspartame to standardize worldwide. There have not been any reports of toxicity with stevia, which is consumed by millions of people daily.

Just How Dangerous Are Splenda and Artificial Sweeteners - Which Side is Lying?

Reasons for concern and basic cautions on Splenda, Aspartame and artificial sweeteners.

Written by Richard Keir

There seems to be fairly poor tracking by any formal standards once a product is approved as a food additive. Despite supposedly tracking adverse reactions, the reality has been different at the FDA. Aspartame is a case in point. Apparent collusion, distorted research reports, lack of funding for independent research, questionable practices in tracking adverse reactions and reporting them. Its a pretty ugly sounding story. Its been said that Aspartame is a contract on humanity.

I'm no epidemiologist but what struck me was the large number of serious toxic reactions reported by pilots. My conclusion I won't use the stuff. And there are suggestions that the offshoot - Neotame - may be even worse.

Everyone pretty much knows the kinds of problems that have been reported with cyclamates and Saccharin. Weirdly - perhaps bad tracking? - the actual dangers still seem unclear after many years of use. However, as I read it, they seem to be substantially less toxic than some more recent artificial sweeteners.

Splenda is the latest and greatest. Reportedly manufactured from sugar by substituting 3 chlorine atoms for 3 hydroxyl groups, some claim that the end product is not what it should be. Apparently if it were made from sugar then when you dissolve it in water (hydrolyze), it ought to produce chlorinated glucose which is a known toxin. Instead it produces chlorinated monosaccharides.

Splenda, or sucralose, is a chlorocarbon. Chlorocarbons have an illustrious history, being known for causing organ, reproductive and genetic damage. Whether sucralose (Splenda) is as safe as the manufacturer claims (which is pretty much what manufacturers always claim) remains to be seen. Here is another reference worth taking a look at: - Secret Dangers of Splenda .

Andrew Weil, MD has some pertinent - and more moderate comments on Aspartame and Splenda here: - Aspartame: Can a Little Bit Hurt. He suggests using the precautionary principle - which basically says if there are questions about the safety of a product, don't use it.

At this point, I think it's my head that's spinning. I'm uncertain whether Splenda is safe, reasonably safe, slightly risky or seriously risky. When I looked at the manufacturer's site and a couple other sites that were all enthused about Splenda, I didn't see any answers to the points the critics are making. Mostly it's all lightness, sweetness and the miracle of modern science.

Like you I've seen some miracles of modern science turn into nightmares when the testing wasn't adequate, when the results were fudged, when cover-ups went on. So questions exist about all the artificial sweeteners. Splenda may be less dangerous than Aspartame (which I sure wouldn't recommend to anyone). Long-term and independent studies are lacking. And here's the real kicker: ***** **From Consumers Research Magazine**

There is no clear-cut evidence that sugar substitutes are useful in weight reduction. On the contrary, there is some evidence that these substances may stimulate appetite.

Now that just tears it. Risk your health using one of these chemicals and then end up eating more because it stimulates your appetite. Terrific.

So what alternatives are there? Surprisingly there are quite a few. One interesting alternative is a South American plant called Stevia. Apparently once considered a potential threat to the sugar industry, it seems to have been deep-sixed early in the twentieth century. It has been used as a sweetener for centuries by South American natives. In the U.S., it seems (somehow) to have been kept from being available as an additive and the FDA has said not enough studies have been done. Yet it's widely used by diabetics and in countries such as Japan and Brazil. Stevia is available at health stores as a supplement (though without any indication that it could be used as a sweetener). It's a fascinating story which you can read here: [The Stevia Story](#)

Our health is challenged on all sides these days. New chemicals, new additives, genetically engineered foods, highly processed foods, empty calories, stress and pollution all pose threats to our bodies. I've come to the conclusion that the fewer highly processed, chemically enhanced, questionably assessed, factory created products we ingest, the better off we will probably be.

Our bodies evolved as a part of the natural world and though we are changing the world radically (which is only natural, it is what people do after all), our bodies do not evolve and adapt at the rate technology changes. And for scientific, political and economic reasons, the quality and thoroughness of evaluations done on newly created products don't match up to our industrial creativity.

Finally, balancing the need to lose weight (or maintain an optimum weight) against potential risks creates difficult choices. It's up to you to make the best choice you can for your specific situation just remember, that old saw still holds - Let the buyer beware.

Reported Aspartame Toxicity Effects

Q. What are the reported reactions to aspartame ingestion?

How often are such effects seen?

We will limit our discussion in this FAQ to reported toxicity reactions to aspartame ingestion. Controlled studies showing problems with aspartame ingestion will be discussed in another FAQ. Toxicity reactions to aspartame can be divided into three types:

1. Acute toxicity reactions occurring within 48 hours of ingestion of an aspartame-containing product.
2. Chronic toxicity effects occurring anywhere from several days of use to appearing a number of years (i.e., 1-20+ years) after the beginning of aspartame use.
3. Potential toxicity effects that would be nearly impossible for the user to recognize the link to aspartame.

In an epidemiological survey which appeared in the Journal of Applied Nutrition (Roberts 1988), 551 persons who have reported toxicity effects from aspartame ingestion were surveyed. The adverse effects found cover a subset of reported acute and chronic toxicity effects from aspartame. What follows is a listing of the adverse health effects which were found.

Number of people first and then the total percentage.

Eye

- Decreased vision and/or other eye problems 140 (25%)
- Pain (one or both eyes) 51 (9%)
- Decreased tears, trouble with contact lens, 46 (8%) or both
- Blindness (one or both eyes) 14 (3%)

Ear

- Tinnitus (ringing, buzzing) 73 (13%)
- Severe intolerance for noise 47 (9%)
- Marked impairment of hearing 25 (5%)

Neurologic

- Headaches 249 (45%)
- Dizziness, unsteadiness, or both 217 (39%)
- Confusion, memory loss, or both 157 (29%)
- Severe drowsiness and sleepiness 93 (17%)
- Paresthesias (pins and needles, tingling) 82 (15%) or numbness of the limbs
- Convulsions (grand mal epileptic attacks) 80 (15%)
- Petit mal attacks and absences 18 (3%)
- Severe slurring of speech 64 (12%)
- Severe tremors 51 (9%)
- Severe hyperactivity and restless legs 43 (8%)
- Atypical facial pain 38 (7%)

Psychologic-Psychiatric

- Severe depression 139 (25%)
- Extreme irritability 125 (23%)
- Severe anxiety attacks 105 (19%)
- Marked personality changes 88 (16%)

- Recent severe insomnia 76 (14%)
- Severe aggravation of phobias 41 (7%)

Chest

- Palpitations, tachycardia (rapid heart action), 88 (16%)
- Shortness of breath 54 (10%)
- Atypical chest pain 44 (8%)
- Recent hypertension (high blood pressure) 34 (6%)

Gastrointestinal

- Nausea 79 (14%)
- Diarrhea 70 (13%)
- Associated gross blood in the stools (12)
- Abdominal pain 70 (13%)
- Pain on swallowing 28 (5%)

Skin and Allergies

- Severe itching without a rash 44 (8%)
- Severe lip and mouth reactions 29 (5%)
- Urticaria (hives) 25 (5%)
- Other eruptions 48 (9%)
- Aggravation of respiratory allergies 10 (2%)

Endocrine and Metabolic

- Problems with diabetes: loss of control; 60 (11%)

precipitation of clinical diabetes; aggravation or simulation of diabetic complications

- Menstrual changes 45 (6%)
- Severe reduction or cessation of periods (22)
- Paradoxical weight gain 34 (5%)
- Marked weight loss 26 (6%)
- Marked thinning or loss of the hair 32 (6%)
- Aggravated hypoglycemia (low blood sugar attacks) 25 (5%)

Other

- Frequency of voiding (day and night)
- burning 69 (13%) on urination (dysuria), or both
- Excessive thirst 65 (12%)
- Severe joint pains 58 (11%)
- Bloat 57 (10%)
- Fluid retention and leg swelling 20 (4%)
- Increased susceptibility to infection 7 (1%)

Many pilots appear to be particularly susceptible to the effects of aspartame ingestion. They have reported numerous serious toxicity effects including grand mal seizures in the cockpit (Stoddard 1995). Nearly 1,000 cases of pilot reactions have been reported to the Aspartame Consumer Safety Network Pilot Hotline (Stoddard 1995). This susceptibility may be related to ingesting methanol at altitude as suggested in a letter from Dr. Phil Moskal, Professor of Microbiology, Biochemistry, and Pathology, Chairman of the Department

of Pathology, Director of Public Health Laboratories (Moskal 1990), or it may simply be that some pilots tend to ingest large quantities of aspartame during a flight. Whatever the case, numerous warnings about aspartame dangers have appeared in piloting journals including The Aviation Consumer (1988), Aviation Medical Bulliten (1988), Pacific Flyer (1988), CAA General Aviation (1989), Aviation Safety Digest (1989), General Aviation News (1989), Plane & Pilot (1990), Canadian General Aviation News (1990), National Business Aircraft Association Digest (NBAA Digest 1993), International Council of Air Shows (ICAS 1995), and the Pacific Flyer (1995). Both the U.S. Air Forces magazine Flying Safety and the U.S. Navy's magazine, Navy Physiology published articles warning about the many dangers of aspartame including the cumulative deleterious effects of methanol and the greater likelihood of birth defects. The articles note that the ingestion of aspartame may make pilots more susceptible to seizures and vertigo (US Air Force 1992).

Countless other toxicity effects have been reported to the FDA (DHHS 1995), other independent organizations (Mission Possible 1996, Stoddard 1995), and independent scientists (e.g., 80 cases of seizures were reported to Dr. Richard Wurtman, Food (1986)). Samples of some aspartame toxicity reactions reported on the Internet can be found on the Aspartame (NutraSweet) **Toxicity Info Center web page**:

Frequently, aspartame toxicity is misdiagnosed as a specific disease. This has yet to be reported in the scientific literature, yet it has been reported countless times to independent organizations and scientists (Mission Possible 1994, Stoddard 1995). In other cases, it has been reported that chronic aspartame ingestion has triggered or worsened certain chronic illnesses. Nearly 100% of the time, the patient and physician assume that these worsening conditions are simply a normal progression of the illness. Sometimes that may be the case, but many times it is chronic aspartame poisoning.

According to researchers and physicians studying the adverse effects of aspartame, the following list contains a selection of chronic illnesses which may be caused or worsened by the chronic, long-term ingestion of aspartame. (Mission Possible 1994, Stoddard 1995)*:

Brain tumors Multiple sclerosis Epilepsy Chronic fatigue syndrome Parkinson's Disease Alzheimer's Mental retardation Lymphoma Birth defects Fibromyalgia Diabetes Arthritis (including Rheumatoid) Chemical Sensitivities Attention Deficit Disorder ***Note:** In some cases such as MS, the severe symptoms mimic the illness or exacerbate the illness, but do not cause the disease.

Also, please note that this is an incomplete list. Clearly, ingestion of a very slow poison is not beneficial to anyone who has a chronic illness.

How often are such effects seen?

Until recently approximately 90% of aspartame sales were in the United States (Monsanto 1994). Other countries are now being inundated with aspartame, but it will be some time until they begin to feel the full effects of aspartame toxicity on the general population. Since the U.S. has some history of significant use, we will limit the discussion to the frequency of effects in the U.S.

There have been well over 7,000 aspartame toxicity reactions officially received by the U.S. Food and Drug Administration between 1982 (after aspartame was first approved) until 1995 (DHHS 1993, DHHS 1995). From this figure, we can estimate the number of actual toxicity reactions observed.

FDA officials believe that as little as 1% of the serious adverse drug reactions are reported to the FDA (Kessler 1993). Using a reported rate of 1%, we would estimate that there have been 700,000 recognized aspartame toxicity reactions in the U.S. since 1982. However, there are a number of significant adjustments that must be made before we can accept this estimate.

1. Most physicians are aware of the Adverse Reaction Monitoring System (ARMS) and are encouraged by the FDA to report serious adverse drug reactions (Kessler 1993). Physicians are not encouraged by the FDA to report aspartame toxicity reactions to the FDA (Food 1995). The lay public is generally unaware of ARMS and much less likely to report adverse reactions to the FDA. Therefore, this would lower the estimated reporting rate below 1%. Let us make a small adjustment and estimate a 0.88% reporting rate.

2. It was pointed out by James Turner, Esq. in a letter to the then FDA Commissioner Frank Young that no program to monitor aspartame toxicity reactions was created until February 1984, two years after aspartame approval began (Turner 1984). This would probably add at least 1,200 reported reactions (probably much more), so that we should use 8,200 toxicity reaction reports. In addition, a Freedom of Information act request determined that the regional FDA offices had been told that only serious complaints should be forwarded to the FDA headquarters (Turner 1984). Serious complaints were complaints where the illness was severe enough to require the attention of a physician. Since this happened between 1984 (when the monitoring system began) and 1985, we can estimate an additional 300 toxicity reactions would have been reported for a total of 8,500.

3. In 1987, it was brought out at U.S. Congressional Hearings that the FDA had been transferring aspartame toxicity reaction calls to the AIDS Hotline (Turner 1987). In addition, it was reported by James Turner, Esq. of Community Nutrition Institute (CNI) that there were numerous cases of people calling the FDA to report toxicity reaction and they were told that there was no connection between aspartame and adverse reactions and no other information was taken by the FDA. While this may not affect the reporting rate after the start of 1988, it would significantly affect the reporting rate before that time. Let us make another small adjustment and estimate a 0.78% reporting rate.

4. Perhaps the biggest reduction in the reporting rate comes from the fact that Commissioner Kessler's estimated 1% reporting rate for adverse drug reactions involves only serious adverse reactions. The rate for reporting all drug reactions (if such reporting were done) would almost certainly be no more than 0.5%. Therefore, if we cut our current estimated reporting rate of 0.78% in half, the estimated reporting rate for all toxicity reactions to aspartame (including serious or mild) would be no more than 0.39%.

During the first couple of years that aspartame was on the market, there was publicity that would likely have increased the reporting rate. However, since the FDA did not have a monitoring system in place until February 1984, the estimated increased number of reports will not be that much. I will reduce the number of reports by 1,000 to 7,500 to take this into account.

We now have approximately 7,500 reports at an estimated reporting rate of 0.39%. This totals approximately 1.9 million recognized aspartame toxicity reactions in the U.S. between 1982 and 1995. These reactions run anywhere from mild to very serious illnesses.

It is very important to understand, however, that 1.9 million represents only those toxicity reactions that have been discovered by users and/or healthcare practitioners. Quite often, I encounter case histories where people suffered for long time and did not make the connection. **For example:**

ÒI have suffered from Migraines for years. As soon as I gave up NutraSweet my migraines disappeared. All those Cat Scans, MRIÖs.....for nothing.

ÒSince I last wrote my brother has been off NutraSweet since then. My brothers lupus type of symptoms completely went away. My brother has been a physician for over 10 years .. his doctor (a specialist) who has been treating him has seen the significant difference and wants to write a research paper on this .. my brothers physician has now started prescribing getting off NutraSweet for his other patients.

Therefore, I believe that in addition to the estimated 1.9 million people in the U.S. who have recognized aspartame toxicity reactions in themselves (from serious to mild), there are many times that number who are suffering from some of the symptoms mentioned above and that they do not recognize that chronic aspartame use is the cause or at least a contributory factor. I would estimate that *at least* 7.6 million others are suffering from some symptoms related to aspartame use (many mild symptoms, but many serious ones as well) and do not recognize the connection.

In addition to the estimated 1.9 million recognized reactions and 7.6 million unrecognized reactions in the U.S., it is very important to note that aspartame has been used in significant amounts in the U.S. for a relatively short time. A U.S. Department of Agriculture report noted that it wasn't until approximately 1987 that aspartame was used in significant amounts in the U.S. (USDA 1988). Therefore, aspartame had been used for only nine (9) years in significant amounts through 1995. When one considers that the damage from aspartame is often silent and cumulative (much like chain-smoking cigarettes), one can see that a couple of generations of aspartame use might be disastrous!

The FDA and NutraSweet have claimed that the number of reported adverse reactions have declined substantially since the mid-1980s (Pauli 1995, Butchko 1994). In addition, the FDA recently claimed that the number of reported toxicity reactions for 1995 was only 11 (WSJ 1996)! It is important to realize that during the mid-1970s the FDA was investigating wrong-doings of the aspartame manufacturer and stated the facts exactly as they found them:

Ò[The manufacturer] lied and they didn't submit the real nature of their observations because had they done that it is more than likely that a great number of these studies would have been rejected simply for adequacy. What Searle did, they took great pains to camouflage these shortcomings of the study. As I say filter and just present to the FDA what they wished the FDA to know and they did other terrible things for instance animals would develop tumors while they were under study. Well they would remove these tumors from the animals.

[FDA Toxicologist and Task Force member, Dr. Andrian Gross (Wilson 1985)]

During the late 1970s and early 1980s, a number of key government and FDA officials left their jobs to work with companies related to the aspartame industry (GAO 1986). This included key FDA officials such as the head of the FDA Bureau of Foods becoming a Vice President of the National Drink Association and the FDA Commissioner becoming a high-paid consultant for the manufacturer's PR firm, Burston Marsteller (Gordon 1987). After this period of time, there was no scientific evidence and no amount of serious toxicity reports that could get the FDA to seriously consider funding independent, properly-conducted (e.g., chronic exposure) research. That appearance of the FDA being under the total control of the manufacturer, Monsanto, continues to this day.

I include these comments about the FDA to demonstrate why no independent scientist familiar with the aspartame issue takes statements from the FDA such as reported reactions in 1995 seriously. There are many people, including myself who have received that many toxicity reaction reports in a single day during 1995. The reality is that independent organizations have noted that aspartame toxicity reaction reports given to them have increased every year since the late 1980s (Stoddard 1995). It is also important to note that in mid-1995, the FDA admitted that it had stopped recording aspartame toxicity reactions (Food 1995). That may have something to do with why the numbers that the FDA reported to the Wall Street Journal (WSJ 1996) were so small!

Please remember that the info used for this article was gathered from the internet. I know no more about this topic than the research I can find from other sources.

Email Comment From Reader:

Reader One

I really enjoyed your emails until today - The Dangers of Aspartame & Side Effects is a junk article with no scientific basis. Aspartame is composed of two amino acids, aspartic acid and phenylalanine, as the methyl ester. Amino acids are the building blocks of protein. Aspartic acid and phenylalanine are also found naturally in protein containing foods, including meats, grains and dairy products. Methyl esters are also found naturally in many foods, such as fruits and vegetables and their juices. Allegations spread via the Internet and the media by a few individuals that aspartame may be associated with a myriad of ailments are not based on science. These have come to be called urban myths.

Here is what the National Multiple Sclerosis Society had to say about such allegations: These stories claim that Aspartame is the cause of a variety of illnesses, including MS, lupus, Alzheimer's disease, Parkinson disease, birth defects, Desert Storm syndrome, brain tumors, and seizures. However, please bear in mind the following: The claims are not documented; There is no evidence for epidemics of multiple sclerosis, lupus, and some of the other diseases as claimed in the articles; There is no evidence that authors of the claims have any scientific, medical, or academic credentials; nor is there any evidence that they have done any scientific research to support their claims; and No published, peer-reviewed scientific research exists that supports the claims being made in the articles.

An October 2005 issue of the British Medical Journal (BMJ) carries an editorial concluding that aspartame has been demonized unfairly in sections of the press and on the Internet. The BMJ editorial states: Evidence does not support links between aspartame and cancer, hair loss, depression, dementia, behavioral disturbances, or any of the other conditions appearing in websites. Agencies such as the Food Standards Agency, European Food Standards Authority, and the Food and Drug Administration have a duty to monitor relations between foodstuffs and health and to commission research when reasonable doubt emerges. The Food Standards Agency takes public concerns very seriously and thus pressed the European Scientific Committee on Food to conduct a further review, encompassing over 500 reports, in 2002. It concluded from biochemical, clinical, and behavioral research that the acceptable daily intake of aspartame remained entirely safe-except for people with phenylketonuria.

The safety of aspartame has been proven again and again, backed by more than three decades of research and over 200 scientific studies. Recently, several governments and expert committees carefully evaluated the Internet allegations and found them to be false, reconfirming the safety of aspartame. In addition, leading

health authorities, such as the American Medical Association, the American Dietetic Association, and the American Diabetes Association, agree that aspartame is safe. The American Medical Association's Council on Scientific Affairs, the American Diabetes Association, and the American Dietetic Association (ADA) have reviewed research on aspartame and found it to be safe. In fact, the ADA's 2004 updated position paper states, A comprehensive review of the safety of aspartame has recently been published. The review covers previous publications as well as new information that support the safety of aspartame as a food additive and negates claims of its association with a range of health problems...

Links to numerous other health organizations, which have confirmed the safety of aspartame, can be found at www.aspartame.org.

References Cited In the "AGAINST CASE": <http://www.wnho.net> Additional information, references and credits: <http://www.wnho.net/wtdaspartame.htm>

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