

February 13, 2013

Margaret Hamburg, M.D., Commissioner  
U.S. Food and Drug Administration  
10903 New Hampshire Avenue  
Silver Spring, MD 20993

Dear Dr. Hamburg:

The undersigned scientists and organizations are concerned about Americans' excess consumption of added sugars and know the Food and Drug Administration and the Department of Health and Human Services are as well. Every edition of the Dietary Guidelines for Americans (going back to 1980) has recommended reducing consumption of added sugars, but Americans are consuming more added sugars (including sucrose, high-fructose corn syrup, corn syrup, and other caloric sweeteners) now than they did in 1980. And that high level of consumption—in everything from sugary drinks and breakfast cereals to baked goods and candy bars—is contributing to serious health problems.

Since publication of the first Dietary Guidelines for Americans, rates of overweight, obesity, and diabetes have soared, and considerable research has demonstrated that sugar-sweetened beverages contribute to those problems.<sup>1,2</sup> People who consume more sugary drinks also have higher risks of heart disease<sup>3</sup> and gout.<sup>4</sup> Furthermore, in the last decade, researchers have found that added sugars, especially the fructose component of sucrose and high-fructose corn syrup, may increase visceral fat, liver fat, blood triglycerides, and small, dense LDL cholesterol, all of which increase the risk of the metabolic syndrome, diabetes, and heart disease.<sup>5,6</sup> Consuming large amounts of foods and beverages rich in added sugars either adds excess calories to the diet or displaces nutrient-rich foods from the diet. In particular, sugary foods could displace fruits, vegetables, and other potassium-

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<sup>1</sup> Hu FB, Malik VS. Sugar-sweetened beverages and risk of obesity and type 2 diabetes: epidemiologic evidence. *Physiol Behav.* 2010(Apr 26);100(1):47–54.

<sup>2</sup> de Ruyter JC, Olthof MR, Seidell JC, et al. A trial of sugar-free or sugar-sweetened beverages and body weight in children. *N Engl J Med.* 2012(Oct 11);367(15):1397–406.

<sup>3</sup> de Koning L, Malik VS, Kellogg MD, et al. Sweetened beverage consumption, incident coronary heart disease, and biomarkers of risk in men. *Circulation.* 2012(Apr 10);125(14):1735–41.

<sup>4</sup> Choi HK, Willett W, Curhan G. Fructose-rich beverages and risk of gout in women. *JAMA.* 2010;304(20):2270–8.

<sup>5</sup> Stanhope K, Schwarz JM, Keim NL, et al. Consuming fructose-sweetened, not glucose-sweetened, beverages increases visceral adiposity and lipids and decreases insulin sensitivity in overweight/obese humans. *J Clin Invest.* 2009;119(5):1322–34.

<sup>6</sup> Stanhope K, Bremer AA, Medici V, et al. Consumption of fructose and high fructose corn syrup increase postprandial triglycerides, LDL-cholesterol, and apolipoprotein-B in young men and women. *J Clin Endocrinol Metab.* 2011;96:E1596–605.

rich foods that can lower blood pressure or low-fat milk that can strengthen bones.<sup>7</sup> And, of course, sugary foods also contribute to dental caries.

In view of the evidence that current intakes of added sugars are detrimental to the public's health, the Dietary Guidelines for Americans and the American Heart Association recommend that a person consuming 2,000 calories per day should consume only about 32 grams, or about 8 teaspoons, of added sugars per day (allotting half of discretionary calories to sugars).<sup>8</sup> The average American now consumes far more: 18 teaspoons per day according to NHANES studies to the 23 teaspoons per day estimated by the U.S. Department of Agriculture. Upwards of 40 million Americans, especially teenagers and young adults, are getting more than 25 percent of their calories from added sugars.<sup>9</sup>

The food and beverage industries—manufacturers, restaurants, and supermarkets—market high-sugar foods and beverages aggressively and have made little effort to reduce the sales and/or the sugar content of those products. We have seen the same lack of commitment to reducing sodium intake. Therefore, we urge the FDA to fulfill its responsibility for protecting the public's health. Just as the Institute of Medicine and state and local health officials have urged regulatory action to lower sodium consumption, we urge the FDA to (a) adopt regulatory and voluntary measures to reduce the amounts of added sugars in beverages to safe levels; (b) encourage industry to voluntarily reduce sugar levels in and the marketing of other high-sugar foods; and (c) mount, perhaps together with the Centers for Disease Control and Prevention and U.S. Department of Agriculture, a high-profile education campaign to encourage consumers to choose lower-sugar or unsweetened foods and beverages. The overall goal should be to decrease the consumption of added sugars to safe, recommended levels over the next several years. We urge you, as commissioner, to give careful consideration to the Citizen Petition on added sugars filed by the Center for Science in the Public Interest.

Sincerely,

*Please respond via Michael Jacobson at the Center for Science in the Public Interest in Washington, DC.*

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<sup>7</sup> Marriott BP, Olsho L, Hadden L, et al. Intake of added sugars and selected nutrients in the United States, National Health and Nutrition Examination Survey (NHANES), 2003–2006. *Crit Rev Food Sci Nutr.* 2010;50:228–58.

<sup>8</sup> Johnson RK, Appel LJ, Brands M, et al. Dietary sugars intake and cardiovascular health. A Scientific Statement from the American Heart Association. *Circulation.* 2009;120:1011-20.

<sup>9</sup> Welsh JA. *Pers. Comm.* Jan. 10, 2013.

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**American Medical Students Association**  
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