

February 14, 2007

Dr. S. Godefroy
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Bureau of Chemical Safety
Food Directorate, Health Products and Food Branch, Health Canada
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Dear Dr. Godefroy:

We are pleased to offer comments on the reinstatement of saccharin as a food additive on behalf of the Canadian Diabetes Association and Dietitians of Canada. Both of our organizations are concerned with ensuring that a safe food supply that includes a variety of healthy choices is available for Canadians to encourage consumption of a healthy diet.

Established over 50 years ago, the Canadian Diabetes Association is a charitable organization that has grown to include a presence in over 150 communities across Canada with the support of both lay and professional members. The Association works to prevent and manage diabetes and improve the quality of life for people affected through research, education, service, and advocacy. Our comments are particularly focused on those at risk for or affected by diabetes, but they would be relevant for anyone who is interested in consuming a healthy diet.

Dietitians of Canada (DC) is the national professional association for approximately 5500 dietitians, who are recognized food and nutrition health professionals serving the public as educators, policy makers, researchers, and food service managers. DC leads and supports its members to promote health and well being through expertise in food and nutrition.

We support Health Canada's position of reinstating saccharin as a food additive in Canada. In taking this step, Health Canada is consistent with international standards, as saccharin is permitted as a food additive in the United States, Great Britain, Europe, Australia, New Zealand and many Asian countries, including Japan. It is our understanding that the suggested levels for use are consistent with international standards of use as well.

We are pleased that Health Canada has conducted an extensive assessment of the current evidence on the safety of saccharin. This assessment has examined a number of issues that were raised with respect to the safety of saccharin. This assessment determined that sodium saccharin can safely be consumed by humans. An Acceptable Daily Intake (ADI), the amount

that can safely be consumed daily over a lifetime without appreciable risk—and which includes a wide margin for safety has been established.

There is limited research that has specifically examined the effect of saccharin on people with type 1 and type 2 diabetes, those who are most likely to use products with saccharin. A technical review of the use of non-nutritive intense sweeteners was conducted by the Canadian Diabetes Association in 2004 (1). This paper reviewed these small studies and stated that daily consumption of saccharin, below the ADI had no significant effect on blood glucose concentrations or blood lipids in people with diabetes. However new studies with larger study populations are needed to come to a definite conclusion on the safety of saccharin for those affected by diabetes.

At the present time, saccharin is contra-indicated for pregnant women in Canada. In 2004, the American Dietetic Association (ADA) in a position paper on nutritive and non-nutritive sweeteners (2) stated that saccharin can cross the placenta and may remain in fetal tissues because of slow fetal clearance. Their position at that time, before saccharin was removed from the list of potential carcinogens, was that women should consider carefully the use of saccharin during pregnancy. Is there evidence to change this position going forward? We urge you to consider research in this area to ensure that the safety assessment is complete.

We support consumer choice in the marketplace. The addition of saccharin to the food additives that may be used in Canada will give consumers greater freedom of choice. Saccharin should be treated the same as other intense sweeteners, in that it should be declared on the label and should be included in the list of ingredients. Because of the earlier concern with the safety of saccharin, it may be prudent to conduct some consumer education on how the determination of the safety of saccharin was made and how the ADI was established.

In closing, we support Health Canada's decision to reinstate saccharin as a food additive. We are pleased to have the opportunity to comment on this decision and would be pleased to discuss our comments further with you at your convenience.

Sincerely,



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Chair, National Nutrition Committee
Canadian Diabetes Association



Louise Lefebvre, RD, CDE
Chair, Food & Nutrition
Canadian Diabetes Association



Lynda Corby, MSc, MEd, RD
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(1) Gougeon R, Spidel M, Kristy L, et al. Canadian Diabetes Association National Nutrition Committee Technical Review: Non-nutritive Intense Sweeteners in Diabetes Management. *Can J Diabetes*. 2004;28(4):385-399.

(2) Position of the American Dietetic Association: Use of Nutritive and Nonnutritive Sweeteners. *J Am Diet Assoc*. 2004;104: 255-275.