Added Sugars Working Group

Mary Story
Miriam Nelson
Cheryl Anderson
Wayne Campbell
Frank Hu
Marian Neuhouser
Alice H. Lichtenstein
Barbara Millen
Scope

• To inform potential recommendations for added sugars by:
  ▪ Examining the relationship between the intake of added sugars and health
  ▪ Evaluating the amount of added sugars that can be consumed while meeting nutrient needs within the USDA Food Patterns

• To consider the evidence on low-calorie sweeteners, which have been used to replace added sugars in some foods and beverages
Added sugars intake in 2001-04 and 2007-10 by age/gender group in comparison to added sugars limits in the USDA Food Patterns

Added Sugars Working Group
Food sources of added sugars

- Snacks and Sweets: 31%
- Soft Drinks: 25%
- Fruit Drinks: 11%
- Sport and Energy Drinks: 3%
- Alcoholic Beverages: 1%
- Coffee and Tea: 7%
- Sugar Sweetened Beverages: 39%
- Beverages (not milk or 100% fruit juice): 47%
- Condiments, gravies, spreads, salad dressings: 2%
- Vegetables: 1%
- Grains: 8%
- Mixed dishes: 6%
- Protein foods: 0%
- Dairy: 4%
- Fruits + Fruit Juice: 1%

Source: What We Eat in America, NHANES 2009-10

Added Sugars Working Group
Added Sugars: Sugars that are either added during the processing of foods, or are packaged as such, and include sugars (free, mono and disaccharides), syrups, naturally occurring sugars that are isolated from a whole food and concentrated so that sugar is the primary component (e.g., fruit juice concentrates), and other caloric sweeteners. This would include single ingredient foods such as individually packaged table sugar. Sugar alcohols are not considered to be added sugars.

Names for added sugars include: Brown sugar, corn sweetener, corn syrup, dextrose, fructose, fruit juice concentrates, glucose, high-fructose corn syrup, honey, invert sugar, lactose, maltose, malt sugar, molasses, raw sugar, turbinado sugar, trehalose, and sucrose.

Proposed definition from FDA in the Proposed Rule to the revision of the Nutrition and Supplement Facts Label (March 2014)
Invited Experts and Consultants

Invited Experts
Individuals invited by the SC, usually on a one time basis, to provide their expertise to inform the SC’s work. Invited experts do not participate in decisions at the SC level.

Consultant SC Members
Individuals sought by the SC to participate in SC discussions and decisions on an ongoing basis but are not members of the full DGAC. Like DGAC members, consultants complete training and have been reviewed and cleared through a formal process within the Federal government.
Experts & Consultants

Invited Experts (July to Sept 2014)

• Barry M. Popkin, Ph.D., W. R. Kenan, Jr. Distinguished Professor of Nutrition, at UNC-Chapel Hill

Consultant SC Members
N/A
**Question:**
What is the relationship between the intake of added sugars and cardiovascular disease, body weight/obesity, type 2 diabetes, and dental caries?

**Target Population**
Children and adults (2y+), healthy and at risk for chronic disease

**Intervention/Exposure**
Added sugars (including studies on sugar-sweetened beverages)

**Comparator**
Different levels of intake of added sugars

**Cardiovascular Disease**
Approach for answering question: NEL Systematic Review

**Body Weight/Obesity**
Approach for answering question: Existing Reports/Reviews

**Type 2 Diabetes**
Approach for answering question: Existing Reports/Reviews

**Dental Caries**
Approach for answering question: Existing Reports/Reviews

**Analytical Framework:** Added Sugars and Health Outcomes
Sources of Evidence Under Review

• Added Sugars and CVD:
  – Original NEL systematic review
  – Date range: Jan 2000 to Aug 2014
  – Includes 13 intervention studies and 13 prospective cohort studies

• Added sugars and dental caries:
  – WHO commissioned systematic review/meta-analysis

• Added sugars and body weight:
  – WHO commissioned systematic review/meta-analysis supplemented with 2 recent systematic reviews/meta-analyses

• Added sugars and type 2 diabetes:
  – Five systematic reviews/meta-analyses published between Jan 2010 and Aug 2014
Low-Calorie Sweeteners

- Concurrently review evidence on low-calorie sweeteners and health outcomes
- Examples:
  - Acesulfame K
  - Advantame
  - Aspartame
  - Cyclamate
  - Monk fruit
  - Neotame
  - Saccharin
  - Stevia
  - Sucralose
Next Steps

1. Continue reviewing the evidence on added sugars, low-calorie sweeteners, and health outcomes

2. Describe the amount of added sugars that can be consumed within the USDA Food Patterns

3. Recommend multi-level strategies to reduce added sugars intake

4. Recommend strategies for consumers to know and understand the amount of added sugars in foods and beverages