Half the American population is over the age of 40. That means half of us remember what it was like when most children were healthy, full of energy and had no problems keeping up in class. That also means about half of us have grown up in a world where it is increasingly common for children to suffer chronic health problems, develop learning disabilities and adopt antisocial behavior patterns.

For half of us, normal was normal; for the other half, abnormal IS normal. One thing is for sure, half of us never received even one microgram of aspartame before the age of 18 while today’s infants and children are getting plenty—every day.

Who are these men and which one went on to prove that political muscle trumps public health and safety in the product approval game?
See page 3

Aspartame:
Harmless synthetic sweetener or government-approved poison?

Long before achieving FDA approval for use in foods, beverages and drugs, the safety of synthetic sweetener aspartame has been the subject of much controversy. It has even been characterized as a poison linked to a variety of ailments (See FDA list of complaints/symptoms page 10).

A growing body of scientists, doctors and laypeople insist aspartame disease is an ignored epidemic and an underlying cause of chronic ill-health throughout the world. Conversely, aspartame producers, food and beverage industry trade associations, government regulators and some scientists and physicians claim aspartame is safe and its worst characteristic is that it is non-nutritive.

Are aspartame and other synthetic sweeteners like saccharin, Splenda and Neotame harmless? Or are they government-approved poisons?

The answers to these questions are found in scientific research and thousands of testimonies from current and former aspartame consumers.

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**Food additives and child behavior**

A team of researchers from the University of Southampton in Great Britain recently confirmed the findings of studies in 2000 and 2004 regarding the effects of food additives on children. “The consequences can be very serious for both children and adults... The reaction in children can be horrendous in terms of mood swings with crying, screaming, inability to sleep... There can also be physiological reactions such as difficulty in breathing and skin rashes. For a young person there is also a risk of quite angry mood swings,” commented Sally Bunday, an advocate for hyperactive children.

Regarding the studies, industry spokesmen claim that government-regulated additives they use have been proven to be safe.

Initial reports of the studies indicate the main focus was on food colorings and preservatives. However, consumer advocates believe the study proves that all artificial additives should be removed from foods and beverages marketed to children.

**U.S. food and drug administrators’ curious approval guidelines: Money**

The U.S. Food and Drug Administration (FDA) was commissioned to enforce the Safe Food and Drug Act of 1906. According to the FDA, its “mission is to promote and protect the public health by helping safe and effective products reach the market in a timely way, and monitoring products for continued safety after they are in use.”

For decades people have alleged that the FDA commonly approves for human consumption foods and drugs of questionable safety and denies approval of foods, supplements and drugs proven to be safe.

A lot has happened in the field of biochemistry since the FDA protected the public from real snake oil salesmen and unsanitary food packaging processes. By the year 2000, Americans were spending some $117 billion annually on pharmaceutical drugs. The FDA has approved the use of thousands of drugs that mask the symptoms of chronic conditions such as cancer, diabetes, obesity, anger, depression, heart disease, asthma, Parkinson’s, lupus, multiple sclerosis and AIDS—just to name a few.

According to FDA Criminal Investigations official Don Liggett, the key to product approval is money. “...[T]he majority of firms that have drugs approved in the United States are international in scope... fantastically wealthy and able to invest the resources...”

These large multinational pharmaceutical companies can spend up to $230 million to achieve approval of their wares. Subsequently, many of these drugs were only recently “discovered.” It is impossible for them to have undergone scientific studies proving long-term risks—or benefits.

If the approval of aspartame is any indication of tests conducted in lieu of FDA approval, we can infer that many have accomplished the expensive feat of drug approval with flawed science.

The proof is in the damage caused by FDA-approved drugs. A congressional committee found that nearly 100,000 people die each year from taking approved drugs per manufacturer’s recommendations; American Medical News reported in 2000 that 28 percent of hospital admissions are the result of adverse reactions to prescribed drugs.

There are so many FDA-approved drugs entering the marketplace it is impossible for doctors, or the FDA, to know which drugs will work together to produce therapeutic results with which drugs will recombine to produce toxic and potentially fatal results.

**Common prescription drugs contain aspartame**

Aspartame is a common ingredient in medications for children and adults. If your doctor has prescribed aspirin, antibiotics, vitamins, electrolytes or other medications for you or your child, make sure you check the ingredient list in the package insert or on product labels.

We are also receiving reports that epileptics taking reformulated anti-seizure drugs such as Dilantin are experiencing sharp increases in seizures. It is suspected that these drugs may now contain aspartame, which is known to cause seizures. Dilantin manufacturer Pfizer denies that aspartame has been added. This “story” is developing while doctors are mystified and epileptics are suffering. Updates as they become available will be posted to [www.mpwhi.com](http://www.mpwhi.com).

**Aspartame “WMD” deployed courtesy of Searle CEO Rumsfeld**

By 1976, the G.D. Searle company’s campaign to achieve the approval of aspartame was mired in controversy. Amid objections to aspartame approval formally filed by consumer advocate attorney Jim Turner and neuroscientist John Olney, MD, the U.S. Food and Drug Administration (FDA) launched an investigation into Searle’s laboratory practices.

The FDA determined that the aspartame developer’s testing procedures were shoddy, producing inaccurate results due to manipulated data. The investigators stated in their 1976 report they, “...had never seen anything as bad as Searle’s testing.”

The FDA report prompted a grand jury investigation led by U.S. Attorney Samuel Skinner. Six months later, Skinner left the U.S. attorney’s office to take a position at Searle’s law firm Sidley & Austin.

By March, 1977 Searle had hired former Illinois congressman and former Secretary of Defense Donald Rumsfeld as its CEO. By Dec., 1977, the statute of limitations had run out on the grand jury investigation and charges against Searle were dropped by the U.S. attorney’s office. Even though opposition to aspartame approval was increasingly being supported by independent scientific studies, Rumsfeld’s political muscle prevailed. On July 15, 1981, in one of his first official acts as FDA commissioner under Ronald Reagan, Dr. Arthur Hull Hayes, Jr., approved aspartame for use in dry food products.

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Sweet Slavery: A brief history of the international sugar trade

Whether in cubes dropped in cups of coffee; in 100 pound sacks grandma had in the pantry for her cakes, pies, jellies and jams or; unseen in soda pop, ice cream, processed breakfast cereals and candy, refined sugar has been a mainstay of the “civilized” diet for the last two centuries. Only recently have sugar (and now artificial sweetener) consumers become aware of health risks associated with its consumption. But contemporary health concerns come centuries after the sweet story began.

The international sugar trade is a story of slavery—slaves planted and harvested the canes and addicted people became slaves to their sweetness. Following is a brief look into the history of sweet slavery. Understanding how 300 years of refined sugar commerce shaped history will give us a much clearer understanding of the economics and politics of today’s synthetic sweetener marketplace.

by Don Harkins

In the beginning

For thousands of years, refined forms of sugar were unknown to man: From the Garden of Eden to the New Testament and the Koran, there is no mention of what we now know as sugar.

Ancient Chinese medical texts make no reference to sugar; the Ancient Greeks did not even have a word for it. But, in 325 B.C., Admiral Nearchus, sailing in the service of Alexander the Great, described “a kind of honey” that comes from canes.

Peoples native to where sugar cane grows would press the cane and drink its sweet juice, or simply cut it into bite-sized pieces and chew it (juice from the sweet cane would not keep, however, and would quickly ferment).

William Duffy, in his classic #1 bestseller “Sugar Blues (1975)” identified the technological development that marked the beginning of the international sugar trade and sweet slavery. “The school of medicine and pharmacology at the University of Djondisapour, the pride of the Persian Empire, is credited with the research and development of a process for solidifying and refining the juice of the cane into solid form that would last without fermenting. Transportation and trade were now possible. This happened sometime after 600 A.D. when the Persians began growing the sweet cane on their own.”

The fall of the Arab Empire

The Persians began exporting “loaves of stone honey,” or “saccharum” to the Orient. When the Persian Empire was overrun by the armies of Islam and fell...
in the 9th century, A.D., Arabs took control of the saccharum trade. The Arab world discovered sugared food, sugared drinks and fermented sugar beverages. The Arab world also discovered many new diseases.

Duffy believes sugar played a key role in the decline of the Arab Empire. He interprets the notes of German botanist Leonhard Rauwolf as indicating he viewed the sugar addiction of the sultan’s armies in the same light modern observers viewed American forces in Viet Nam who became addicted to heroin. The sugar-addicted Turks and Moors, “...are no longer the intrepid fighters they had formerly been,” Rauwolf observed.

Similarly, a Japanese philosopher told Duffy in 1965, “If you really expect to conquer the North Vietnamese, you must drop army PXs on them—sugar, candy and Coca-Cola. That will destroy them faster than bombs.”

**Europeans wrestle for control of the sugar trade**

The European sugar trade was largely controlled by the Portuguese by the mid-1400s—but the Spaniards were yapping at their heels.

The Portuguese captured negroes from the west African coast and set them to slavery on sugar cane plantations in Valencia and Grenada.

By 1510, the Portuguese had expanded their sugar production to South America and were importing negro slave labor to grow and harvest sugar cane in Brazil. Rather than keep lawbreakers imprisoned at home, they shipped them to the New World where they were encouraged to breed with natives and produce half-breeds capable of working the sugar cane plantations.

The Spaniards, following Christopher Columbus, had exterminated the natives in the West Indies by 1596 (per a 1555 decree by Emperor Charles V) and brought in African slaves to work their fields of cane.

Sugar profits were largely responsible for the rise of the Spanish and Portuguese empires. Sugar addiction and the diseases and immorality that accompany it, was also, arguably, a contributing factor in their fall.

British and Dutch interests had control of West Indies sugar production by 1648. During this era, the rum trade began to flourish: Enough rum was being imported into the American colonies for the annual consumption of “every man, woman and child” to be “four gallons,” wrote Duffy.

Ships loaded with rum were exchanged for blacks who were traded to British plantation owners in the West Indies in trade for molasses that was sold to rum makers in the colonies to satisfy the colonists’ growing thirst for distilled spirits.

Rum was also being traded to Indians for furs at tremendous profit to the white traders and at tremendous social and economic loss to the Indians.

**Millions of slaves**

The 1860 census population of negro slaves in the U.S. was 4,441,830; it is estimated that some 20,000,000 negroes survived the voyage to become slaves in the Western World. “It will be no exaggeration to put the tale and toll of the slave trade at 20 million Africans, of which two-thirds are to be charged against sugar,” wrote British historian Noel Deerr in “The History of Sugar” (1949).

Planting, tending and harvesting sugar cane is backbreaking work performed in the hot, humid climates cane prefers to grow. Negroes are the only human race able to survive under the yoke of sweet servitude. According to Deerr, it took some 13.2 million negro slaves to produce enough raw sugar cane to satisfy the western world’s demand.

By the 1800s, France and Great Britain were wrestling for control of the international sugar trade. “No cask of sugar arrives in Europe to which blood is not sticking. In view of the misery of these slaves, anyone with feelings should renounce these wares and refuse the enjoyment of what is only to be bought with tears and death of countless unhappy creatures,” wrote French Philosopher Claude Adrien Helvetius in the 1850s while his nation was profiting immensely from the sugar trade.

On the eve of the American Civil War, sugar and slavery were as solidly linked together as two sides of the same coin. **Colonists could have had a sugar party**

England was so addicted to sugar, as a substance and as a commodity of unparalleled profitability, it amended its Navigation Acts in 1660. American colonists were banned from trading sugar, indigo and tobacco with any other country except England, Ireland or another British colony. In 1664, the Acts were again amended so British colonies could only receive foreign goods via England. The Boston Tea Party in 1773 was a colonial response to the Navigation Acts.

**The queen’s addicted subjects**

When sugar was first introduced to Great Britain in the 1300s, only the upperclass could afford the exotic treat. By the mid-1600s, the nation was importing 16 million pounds of sugar annually; 20 million pounds by 1700 and, by 1800, the British were consuming 160 million pounds of sugar—72 pounds per person—each year.

It was about this time that the British Empire began crumbling.

**Sweet slavery in America**

According to Dr. Nancy Appleton, author of “Lick the Sugar Habit,” the U.S. Department of Agriculture (USDA) reported that, between 1970 and 1995, Americans increased their sugar and corn sweetener consumption by 22 percent.

The USDA reported in 2000 that Americans consumed nearly 22 million tons—about 151 pounds each—of sugar and corn, glucose and dextrose sweeteners in 1999. Americans derive 36-40 percent of their carbohydrate intake from sugar.

Since 1984, Americans have gotten in the habit of drinking more soda pop than water. The number of 12-ounce cans of soda produced in 1997 was 580 per person—about 1.5 cans a day per person—a figure that has doubled since 1974; seven-fold since 1942. Twelve ounces of soda contain about 9 teaspoons of sugar.

**The myth of sugar substitutes**

The main argument in support of providing non-caloric, sugar substitutes for the sweet-toothed consumer is to diminish their intake of sugar. Health officials have determined that America’s addiction to sugar causes obesity, tooth decay, diabetes, heart disease and behavioral problems.

Sugar consumption in the U.S. continues to increase regardless of the marketplace presence of sugar substitutes such as aspartame, which itself has skyrocketed in use since 1982 (see chart page 5).

We are also experiencing in this country epidemics of chronic ailments historically associated with sugar addiction. The problem appears to be compounded by the world’s new addiction to aspartame.

**Conclusion:** Our self-destructive demand for sweets has been shaping human history for centuries.
How aspartame causes damage to the body

When a matter is in controversy, the fair and civilized manner of solving it allows both parties of a dispute to bring their evidence before an impartial body. Once both sides have presented their evidence, the impartial body is adequately prepared to settle the matter based upon facts. Were such a forum used to determine the safety of aspartame, the substance would no longer be an item of controversy that is poisoning a trusting public.

Prior to and since its 1981 FDA approval, an international who’s who of scientific minds has been producing peer-reviewable reports warning against the dietary use of aspartame. To my knowledge, not one of these studies has been duplicated and scientifically determined to be in error.

What this means is that, until new, peer-reviewable science is published to the contrary, aspartame is linked to the FDA’s list of 92 reported symptoms (see page 10). It also means that anyone who consumes aspartame is a candidate for a broad spectrum of physiological and psychological complications that include blindness, insanity and/or death.

But there will be no new, credible, peer-reviewable science to reveal that aspartame is safe. There wasn’t any in 1965, 1981, 1983, 1985 or at any time since then. If you take a look at “Aspartame: Point/Counterpoint” pages 7-8, you will see that published science and field experience easily refute claims promoting aspartame safety.

The argument in support of aspartame approval

Aspartame developer Searle conducted studies that are difficult to find and impossible to duplicate because they were scientifically flawed. Manipulated data were used to arrive at preconceived conclusions. Based upon these studies (for which Searle was being investigated for fraud), aspartame was initially approved by the FDA for use in dry goods only. As of 1993, it has been approved for use in any product consumed by people living in the U.S.

European Union officials recently approved the use of aspartame and labeling requirements per recommendation of the FDA, World Health Organization and the American Medical Association.

The argument in opposition to aspartame approval

This section will take a little work on our part, the laypeople, to understand. Brilliant men and women have independently performed studies, largely at their own expense and personal sacrifice, to save your life and the lives of those close to you. Please honor their commitment to your health by reading this article with a dictionary close to you, if necessary.

Aspartame and the BBB

As of 1995, aspartame accounted for 75 percent of adverse reactions (see page 10) reported to the FDA.¹

Aspartame is comprised of 40 percent aspartic acid, 50 percent phenylalanine and 10 percent methanol. Some of the metabolites of aspartame are methanol, formaldehyde, formic acid and diketopiperazine.

The body protects the brain from chemical imbalances through the blood brain barrier (BBB). However, the BBB matures during childhood, is compromised by illness and often allows substances to pass while functioning properly.

Aspartic acid

The body produces aspartic acid that serves as a neurotransmitter, facilitating the transition of information from neuron to neuron. Excess aspartic acid (an amino acid) creates too many neurotransmitters in certain areas of the brain. This excess damages or kills neurons by overstimulating them—hence the term “excitotoxin.”

Excessive amounts of aspartate over time begin to destroy neurons. Significant populations of people who consume aspartame develop a variety of symptomologies commonly diagnosed as multiple sclerosis, Alzheimer’s disease, Parkinson’s disease and Lou Gehrig’s disease. Undiagnosed, aspartame users commonly experience memory loss, sexual dysfunction, blindness, heart irregularities, headaches, loss of hearing, seizures, blood sugar anomalies, irritability and varying degrees of dementia.

Naturally, populations most vulnerable to excitotoxic neurological damage are infants and developing children, pregnant women, the elderly and the chronically ill.

Phenylalanine

Phenylalanine is also an amino acid produced in the body. Phenylalanine from aspartame can cross the BBB and cause an imbalance of it in the brain, causing serotonon to decrease. This leads to emotional disorders. Elevated phenylalanine levels have been seen in the blood and in areas of the brain of human subjects who chronically use aspartame.² Dr. Louis Elsay showed Congress that such levels are dangerous to fetuses and infants. He also showed that lab rats metabolize phenylalanine more efficiently than humans.³

Neurosurgeon Russell Blaylock shows earlier studies indicating concentrations of phenylalanine accumulate in the hypothalamus, medulla oblongata, and corpus striatum areas of the brain. Previous science has determined that phenylalanine build up in the brain can cause schizophrenia or increase susceptibility to seizures.

Can we infer that aspartame use is partially responsible for increased sales of Prozac and other psychotropic drugs?

1981

On January 21, 1981, the day after Ronald Reagan was inaugurated as president of the United States, G.D. Searle resubmitted its petition for FDA approval of aspartame.

According to former G.D. Searle salesperson Patty Wood-Allott, G.D. Searle President and former Secretary of Defense Donald Rumsfeld circulated a memo among his sales people stating that, if necessary, “he would call in all his markers and that, no matter what, he would see to it that aspartame would be approved that year.”


True to his word, aspartame was approved for use in dry products July 15, 1981.

Sources: USDA Economic Research Service (1947-87); Beverage Digest (1997-2004)

Enough soda is produced for each American to consume 557 12-ounce servings (208 gallons) annually. One-third of the sodas consumed by Americans are “diet” and sweetened with aspartame. It’s no wonder that aspartame-related symptoms are epidemic in America.
How diet soda becomes poison

In 1997, 11-year-old Jennifer Cohen saved her babysitting money for lab tests to measure how aspartame breaks down in cans before ingestion by consumers. With $1,250 this young girl was able to produce peer-reviewable results. Searle, Monsanto and the FDA, with their $multi-million budgets, state-of-the-art testing facilities and scientists, could not.

On January 21, 1997, Jennifer Cohen bought a case of Diet Coke. She put seven cans in the refrigerator (36 degrees F.), seven cans in her bedroom (69 degrees F.) and seven cans in an incubator set at 104 degrees F. She checked the temperatures daily for 10 weeks. The remaining cans she took to Winston Laboratories in New Jersey. The cans were found to contain .06 percent aspartame.

Prior to conducting her experiments, she discovered that aspartame was being consumed by over 100 million Americans and that aspartame has a shelf life of 262 days at 77 degrees F.

Her research also revealed that the FDA gets more complaints about aspartame than any other substance and; that aspartame use has been linked to brain tumors, seizures and symptoms mimicking multiple sclerosis and Alzheimer’s disease.

On April 1, 1997, Cohen took the refrigerated, room temperature and incubated cans of pop to Winston Labs for analysis. The refrigerated cans showed aspartame diminished to .0058 percent with .001 percent DKP and 53.5 parts per billion (ppb) formaldehyde. The room temperature samples showed .0051 percent aspartame, .002 percent DKP and 231 ppb formaldehyde. The incubated samples showed .026 percent aspartame, .010 percent DKP and 76.2 ppb formaldehyde.

The higher the temperature, the more DKP; room temperature produced the highest levels of formaldehyde.

Cohen also conducted a double-blind taste test and found that “fresh” Diet Coke was preferred and the incubated samples scored the lowest.

“The FDA says, ‘we believe, based upon all the information we received to date, that this is a safe product,’” Cohen wrote.

“I say, ‘Decide for yourself,’” she concluded.

Cohen’s entire 1997 study can be found at www.dorway.com

Aspartame Timeline

The process of aspartame’s federal approval and subsequent mass marketing is a study in the triumph of political power over science and public health. The following timeline was compiled by longtime consumer advocate Attorney Jim Turner

♦ December 1965—While working on an ulcer drug, James Schlatter, a chemist at G.D. Searle, accidentally discovers aspartame, a substance that is 180 times sweeter than sugar yet has no calories.

♦ Spring 1967—Searle begins the safety tests on aspartame that are necessary to apply for FDA approval of food additives.

♦ Fall 1967—Dr. Harold Waisman, a biochemist at the University of Wisconsin, conducts aspartame safety tests on infant monkeys on behalf of the Searle Company. Of the seven monkeys that were being fed aspartame mixed with milk, one dies and five others have grand mal seizures.

♦ November 1970—Cyclamate, the reigning low-calorie artificial sweetener, is pulled off the market after some scientists associate it with cancer. Questions also raised about safety of saccharin, the only other artificial sweetener on the market, leaving the field wide open for aspartame.

♦ December 18, 1970—Searle Company executives lay out a “Food and Drug Sweetener Strategy” that they feel will put the FDA into a positive frame of mind about aspartame. An internal policy memo describes psychological tactics the company should use to bring the FDA into a subconscious spirit of participation with them on aspartame and get FDA regulators into the “habit of saying, ‘Yes.’”

♦ Spring 1971—Neuroscientist Dr. John Olney (whose pioneering work with monoamine oxidase inhibitors) forms Searle that his studies show that aspartic acid (one of the ingredients of aspartame) causes holes in the brains of infant mice. One of Searle’s own researchers confirmed Dr. Olney’s findings in a similar study.

♦ February 1973—After spending tens of millions of dollars conducting safety tests, the G.D. Searle Company applies for FDA approval and submits over 100 studies they claim support aspartame’s safety.

♦ March 5, 1973—one of the first FDA scientists to review aspartame safety data states that “the information provided (by Searle) is inadequate to permit an evaluation of the potential toxicity of aspartame.” She says in her report that in order to be certain that aspartame is safe, further clinical tests are needed.

from previous page

Methanol

Methanol is a well-known neurotoxin. The EPA recognizes it as a “cumulative” poison and that “methanol is oxidized to formaldehyde and formic acid; both of these metabolites are toxic.” Methanol is slowly released in the small intestine when aspartame encounters the enzyme chymotrypsin. Methanol metabolizes faster as “free” methanol which is created when aspartame is heated above 86 degrees F. In 1993, the FDA approved the use of aspartame in a wide variety of food items that would always be heated above 86 degrees F.

The symptoms of methanol poisoning include headaches, tinnitus, dizziness, nausea, digestive disturbances, weakness, vertigo, chills, vision problems, renal damage and blindness, memory lapses, numbness and shooting pains in the extremities, behavioral problems and neuritis.

Humans, lacking a couple of key enzymes, are many times more sensitive to the toxic effects of methanol than animals. Therefore, animal studies with regard to the effects of methanol in the body are of no value.

Aspartame enthusiasts are quick to mention that many common foods such as fruit juices and alcoholic beverages contain methanol. However, in these instances, ethanol is always present, usually in higher amounts. Ethanol serves as an antidote to methanol.

Aspartame contains no ethanol.

Formaldehyde

Formaldehyde, a known carcinogen, causes retinal damage, interferes with DNA replication and causes birth defects.

Diketopiperazine (DKP)

A by-product of aspartame metabolism, DKP has been associated with the formation of brain tumors. DKP has been found to form in aspartame-containing beverages during prolonged storage, particularly above 86 degrees F.

Gulf War troops drank copious amounts of aspartame-sweetened sodas that had been stored for extended periods in the hot Arabian sun.

Conclusions

Science has shown how the components of aspartame are metabolized in the body. Aspartame’s three main ingredients are themselves problematic and break down into substances already known to be toxic to the human body.

Tests conducted by Searle to support claims that aspartame is safe do not withstand peer review and the company was being investigated for fraud prior to aspartame being approved by the FDA for use in foods and beverages.

This article was largely taken from the article “The Bitter Truth About Artificial Sweeteners” by Mark D. Gold as it appeared in two parts (Nexus Magazine, Oct/Nov., 1995 and Dec/Jan., 1996). References available upon request.
Aspartame: Point/Counterpoint

The National Diabetic Association and the International Food Information Council (IFIC) maintain that the government-approved artificial sweetener aspartame is safe for use in foods, beverages and medicines. Below are answers to frequently asked questions regarding aspartame safety. The questions are first answered (in italics) as posed by the IFIC then refuted (in normal typeface) with analyses supported by published scientific and medical literature. The original 1995 IFIC article, “Everything you need to know about aspartame,” as rebutted by Mark Gold (complete with fully cited references to published scientific reports), is available in its entirety at www.dorway.com.

What is aspartame made of?
Aspartame is made by joining two protein components, aspartic acid and phenylalanine, and a small amount of methanol. Aspartic acid and phenylalanine are building blocks of protein and are found naturally in all protein-containing foods, including meats, grains and dairy products. Methanol is found naturally in the body and in many foods such as fruit and vegetable juices.

Aspartame-containing products also contain breakdown products of aspartame such as beta-aspartame (Lawrence 1987, Stamp 1989) and aspartylphenylalanine diketopiperazine (DKP) (Tsang 1985).

Because the amino acids are not bound in proteins, they are absorbed quickly and spike the plasma aspartic acid and phenylalanine to high levels. Even industry researchers admit that these amino acids are metabolized differently than those found in foods (Steigink 1987a, Steigink 1987b). Methanol is found in available form in much greater quantities in aspartame than in real foods (Monte 1984). Methanol taken orally is extremely toxic to humans. Even though a small amount is found in the body, as little as one can of diet soda can spike the plasma methanol levels significantly (Davoli 1986).

How is aspartame handled by the body?
Aspartame is digested just like any other protein. Upon digestion, aspartame breaks down into its basic components and is absorbed into the blood. Neither aspartame nor its components accumulate in the body over time.

Formic acid (a toxic metabolite of methanol) likely can accumulate in the organs (Liesivuori 1991). No one knows if DKP or a metabolite of DKP accumulates in the body over time. Proper tests have not been conducted. Aspartic acid may accumulate for a significant amount of time like another excitotoxin amino acid, glutamic acid (Toth 1981). Much of the damage caused by aspartic acid and glutamic acid ingested orally is clearly laid out by Dr. Russell Blaylock, Professor of Neurosurgery, in his well-referenced book, “Excitotoxins: The Taste That Kills.” Either way, gradual damage can be caused by aspartame breakdown products even when they do not accumulate. A chemical does not have to accumulate to cause damage.

Can aspartame be used in cooking or baking?
Aspartame’s components separate when heated over time, resulting in a loss of sweetness. Therefore, aspartame is not recommended for use in recipes requiring lengthy heating or baking. It may, however, be added at the end of the cooking cycle in some recipes. If a food containing aspartame is inadvertently heated, it would still be safe, but would simply not provide the desired sweetness.

Any heating, even at the end of cooking, will cause DKP and free phenylalanine to quickly form. Significant amounts of DKP are formed when aspartame is stored in liquid form at room temperature. Heating will speed that process considerably. See Tsang (1985) discussed above.

Is aspartame safe?
As a governmental agency charged with safeguarding the American food supply, the FDA has concluded that aspartame is safe for the general public, including diabetics, pregnant and nursing women, and children. Persons with a rare hereditary disease known as phenylketonuria (PKU) must control their phenylalanine intake from all sources, including aspartame. These persons are diagnosed at birth by a blood test performed on all babies. Products sweetened with aspartame carry a statement on the label that they contain phenylalanine.

In 1981 the FDA’s Public Board of Inquiry, made up of scientists (including the President of the American Association of Neuropathologists), voted unanimously against approval of aspartame. The board believed the brain tumor data was “worrisome.” As the pages of the AS Times will demonstrate, aspartame’s FDA approval was secured by the political influence of Donald Rumsfeld, not as a result of safety-proving science.

How much aspartame may people consume?
The FDA uses the concept of an Acceptable Daily Intake (ADI) for many food additives, including aspartame. The ADI represents an intake level that, if maintained each day throughout a person’s lifetime, would be considered safe by a wide margin. The ADI for aspartame has been set at 50 milligrams per kilogram (mg/kg) of body weight.

In 1995 the Department of Health and Human Services listed the reported symptoms for people who claimed they suffered symptoms after consuming aspartame. The report did not present symptoms in a clear and comprehensive way. There were no data about the quantity of aspartame consumed by those who reported symptoms. It also did not list the percentage of people who consumed aspartame. Some of the symptoms listed have been studied in the scientific community and others have not. The report also did not include the number of people who consume aspartame for comparison.

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April 20, 1995

DEPARTMENT OF HEALTH AND HUMAN SERVICES
SYMPTOMS attributed to ASPARATEME in complaints submitted to the FDA

continued next page
How much aspartame are people actually consuming today?

The FDA monitors the amount of aspartame that Americans consume through ongoing dietary surveys. The average daily intake of Americans who consume aspartame has remained fairly constant since July 1984, averaging less than 2 percent of the FDA guideline for acceptable consumption. The most frequent consumers of aspartame are consuming only 4 percent to 7 percent of the ADI.

Children have been shown to consume far more than the FDA's ADI on an ongoing basis and even overweight adults can consume more than half of the FDA's ADI on an ongoing basis (Frey 1976, Porikos 1984). The steady increase in consumption of aspartame since 1984 indicates the mathematical impossibility of IFIC claims (see chart page 5; other charts available online—see “Resources” page 23).

How was aspartame tested before it was approved for use in foods?

Aspartame is one of the most thoroughly studied ingredients in the food supply. It was tested in more than 100 scientific studies prior to its approval by the FDA in 1981. These tests were conducted in animals and humans, including normal adults and children, lactating women and persons with diabetes, obesity and special genetic conditions. Aspartame was tested in amounts many times higher than individuals could consume in the diet. Today scientists continue to conduct new studies on this sweeter as they do many other ingredients used in the food supply. The FDA also monitors and evaluates all research on this and other food ingredients.

If the studies to which IFIC refers exist, they are not part of the public record. IFIC has not provided copies of or even citations for these “more than 100 scientific studies” for peer review.

Have independent physicians and dietitians reviewed the safety of aspartame?

Yes. The American Medical Association’s Council on “Scientific” Affairs, in 1985, merely restated comments made by FDA Commissioner Hayes in the Federal Register when he ignored the Public Board of Inquiry ruling and his own scientific team of experts in 1981. The American Dietetic Association (ADA), which receives generous contributions from Monsanto, admitted that NutraSweet assists in the writing of its “fact” sheets (ADA 1993).

Can persons with diabetes consume aspartame?

Yes. The American Diabetes Association has stated that aspartame is acceptable as a sugar substitute and can be included in a diabetic meal plan.

H.J. Roberts, MD, has been studying the effects of aspartame on diabetics for 20 years. He has noticed significant metabolic, neurologic, vision and other problems in diabetics that correct themselves when aspartame is removed from the diabetic diet. Dr. Roberts’ observations can be found in his meticulously referenced work, “Aspartame Disease: An Ignored Epidemic” (see page 23). It was reported in 1995, the American Diabetes Association received generous annual contributions from Monsanto.

Is aspartame safe for people with epilepsy?

Yes. The Epilepsy Institute, an organization devoted to people suffering from seizure-related problems, has concluded that aspartame is not related to seizures among epileptic patients.

The Epilepsy Institute is not the Epilepsy Foundation, but a Monsanto-funded epilepsy center in New York. This entity has never submitted properly conducted tests on aspartame and seizures for peer review. Independent research (Camfield 1992, Elsas 1988, Walton 1986, Walton 1988) has shown that seizures are one of the most common adverse reactions linked to aspartame usage.

Has aspartame been found to affect children’s behavior?

No. Studies have shown that aspartame consumption does not affect the behavior of children, including those diagnosed as hyperactive or with attention deficit disorder.

Scientists who believe children’s behavior might be affected by aspartame and who saw case histories of erratic behavior from children on aspartame believed that it was the medium to long-term use of aspartame that often led to these changes. Some scientists believed it was the constant spiking of plasma phenylalanine levels that led to brain chemistry changes.

Industry “researchers” conducted numerous experiments of very short length, often using encapsulated aspartame (which reduced the plasma phenylalanine spike) and then declared that there was no effect on children. They also averaged the results of all the children in each group so that if a few children were sensitive, their results would get lost in the averages. Independent, double-blind studies on children with behavior problems have yet to be conducted. However, when independent researchers conducted blinded studies of aspartame they invariably found problems.

Can aspartame cause visual damage?

No. Scientists know that only huge quantities of methanol can affect vision. A small amount of methanol is formed when aspartame is digested or when its components separate. However, the amount of methanol one could possibly consume from aspartame is well within safe levels, and is actually less than that found in many fruit and vegetable juices.

The relationship between methanol and blindness has been known for decades. The relationship between macular degeneration and aspartame was explained to Congress in 1987 by methanol expert and eye specialist, Dr. Morgan B. Raiford. Dr. Raiford testified about one of the many persons he had seen with eye damage from aspartame. Per his paper (Raiford 1987), he described how the deterioration of Shannon Roth’s eyes (due to methanol poisoning attributed to NutraSwee) “...was identical to the damage I observed repeatedly in the eyes of individuals whose eyes have been damaged by methyl alcohol toxicity.”

Dr. Raiford’s work was supported in 1991 (Cook and Bergman, et al).

Do some people have adverse reactions to aspartame?

There is no scientific evidence that aspartame is linked to adverse reactions in people. The U.S. Centers for Disease Control (CDC) reviewed some 500 consumer complaints related to aspartame in 1984. CDC concluded that there was no specific group of symptoms clearly related to aspartame consumption. The FDA has investigated all complaints since 1984, and has stated that there is “no consistent or unique pattern of symptoms reported with respect to aspartame that can be causally linked to its use.” Individuals who have concerns about possible adverse reactions to aspartame should contact their physicians.


Note: Aspartame reacts with ALL drugs, vaccines and toxic substances.
Physicians, scientists, laypeople question safety of government-approved synthetic sweetener

People have a natural tendency to believe government-approved-products are safe. However, in the case of aspartame, the product is comprised of substances that are not safe and every phase of its journey through the body produces additional substances of known toxicity. This fact has caused increasing numbers to question its safety as an artificial sweetener.

Aspartame breaks down into substances such as methanol, formaldehyde and formic acid—all known neurotoxins. Our layperson hypothesis becomes: “Aspartame cannot be safe because it breaks down into substances known to be toxic to the human body.”

The next logical step is to locate the science that proves or disproves our new hypothesis.

This is exactly the process that has led thousands of physicians, scientists, attorneys and laypeople to investigate government approval of aspartame. Their investigations reveal a trail of fraud, deceit and power politics—not science and public health considerations—that led to the approval of aspartame.

“Every known metabolite of aspartame is of marked or questionable toxicity and patently unsafe for human use...The only responsible action would be to immediately take aspartame off the market, fully disclose its toxicities, offer full compensation to the injured public and criminally prosecute anyone who participated in the placement of aspartame on the market—that includes those who work so diligently to keep it there as well,” explained James Bowen, MD.

On Nov. 2, 1987, Emory University Professor of Pediatrics and Genetics Dr. Louis Elsas testified before Congress. “Aspartame is, in fact, a well-known neurotoxin and teratogen [causes abnormal embryonic development] which, in some undefined dose, will, irreversibly, in the developing child or fetal brain, produce adverse effects...I am particularly angry at this type of advertising that is promoting the sale of a neurotoxin in the childhood age group,” Dr. Elsas told the nation’s lawmakers assembled on Capitol Hill.

Betty Martini of Mission Possible claims hundreds of peoples’ chronic symptoms have reversed once aspartame is removed from their diets.

Neurosurgeon Russell Blaylock, MD, author of numerous books, including “Excitotoxins: The Taste that Kills,” has declared that aspartame is a toxin like arsenic and cyanide. He has demonstrated that aspartame causes tumors, cancer, seizures and other chronic disorders. He also said it can make people confused, disoriented and is linked to autism and Alzheimer’s disease.

Endocrinologist H.J. Roberts, MD, FACP, has studied the case histories of 1,300 aspartame victims over 15 years. Dr. Roberts has declared aspartame disease a “worldwide epidemic.”

Aspartame’s curious rise to marketplace success

compiled from reports

In 1980, the U.S. Food and Drug Administration (FDA) Public Board of Inquiry ordered that G.D. Searle Company’s petition for aspartame approval be withdrawn. The FDA concluded that it had not been presented with evidence of aspartame safety and “may contribute to the development of brain tumors.”

The order was overturned a year later without the benefit of additional studies proving aspartame safety. Today the artificial sweetener aspartame may be added to all foods, drinks, dietary supplements and medications sold in America without restriction.

FDA labeling requirements no longer require aspartame to be specifically listed as an ingredient.

Considering the controversial history of this synthetic sweetener, blanket government approval for its inclusion in any consumable product is suspect—particularly when it is estimated that the substance can be fatal to the world’s 20 million phenylketonurics (or PKU carriers—those who cannot metabolize the amino acid phenylalanine).

There is mounting evidence that mothers using aspartame during pregnancy or while breastfeeding can pass PKU onto their children. The inability to metabolize phenylalanine can cause mental retardation. The presence of aspartame in our food supply is setting the stage for millions of people to suffer retarded neurological development.

Regardless of the aspartame approval process was mired in controversy and its developer Searle was being investigated by a federal grand jury for fraud, Searle CEO Donald Rumsfeld achieved limited approval for use of aspartame in dry goods by 1981.

Since that time, aspartame has become a multi-billion industry with powerful lobbying influence in Washington, D.C.

There are no independently performed studies regarding the long-term physiological effects of aspartame being cited to support claims that it is a safe substitute for sugar. Yet the general public believes aspartame is safe because it has the seal of government approval.

There are, however, scores of independently performed and published scientific reports and hundreds of case studies available to government regulators in the FDA linking the use of aspartame to the same symptoms described in the FDA’s own list of 92 potential adverse effects associated with the use of aspartame (See page 10).

It is reported that aspartame was once on a list of chemical biowarfare agents the Department of Defense submitted to Congress.

At present, an estimated 200 million Americans consume at least 5,000 products containing 15,000 tons of aspartame each year, making it the most widely distributed and commercially successful biowarfare agent ever produced. It is ironic that then Searle CEO Rumsfeld, after having served as secretary of defense, muscled the approval of aspartame and is, once again, 20 years later, serving as secretary of defense as the disastrous effects of aspartame become epidemic.

Aspartame and Sam Skinner

In 1977 U.S. Attorney Sam Skinner was leading the grand jury investigation into Searle’s fraudulent omission of unflattering aspartame test data.

Skinner left the investigation and accepted a job at Sidley & Austin—the law firm representing Searle. He was later appointed transportation secretary in 1989. This turned out to be a strategic post because aspartame was severely affecting the performance of pilots and Skinner was in an ideal position to conduct damage control in this high-profile area.

During Gulf War I, Skinner became President Bush’s chief of staff. Soldiers from the 1991 Gulf war were supplied with pallets of aspartame-laced soft drinks. It is believed that aspartame (in conjunction with experimental vaccines, nerve agent antidotes and personal insecticides) is playing a critical role in what is now known as Gulf War Illness—a cluster of chronic/fatal symptoms that have affected nearly 250,000 Gulf War I veterans.

Skinner, as Bush’s chief of staff, was again strategically positioned to head off all inquiries related to aspartame and Desert Storm—no matter which agency was fielding them.
Eighty percent of complaints to FDA are aspartame related

According to records provided by the U.S. Food and Drug Administration—the agency responsible for the approval of aspartame as an additive to foods, beverages and medications—adverse reactions to the artificial sweetener comprise about 80 percent of consumer complaints received each year.

The high volume of adverse reactions has prompted the FDA to list 92 symptoms, including death, associated with the use of aspartame (see list at right, table below and table on page 7).

The evidence overwhelmingly indicates that government approval does not necessarily indicate product safety. In the case of aspartame, the FDA has approved a product that its own documents prove can be fatal to those who use it as provided by law.

FDA list of 92 aspartame-related symptoms:
Abdominal Pain, Anxiety Attacks, Arthritis, Asthmatic Reactions, Bloating, Edema (Fluid Retention), Blood Sugar Control Problems (Hypoglycemia or Hyperglycemia), Brain Cancer (Pre-approval studies in animals), Breathing Difficulties, Burning Eyes or Throat, Burning Urination, Can't Think Straight, Chest Pains, Chronic Cough, Chronic Fatigue, Confusion, Death, Depression, Diarrhea, Dizziness, Excessive Thirst or Hunger, Fatigue, Feel Unreal, Flushing of Face, Hair Loss (Baldness) or Thinning of Hair, Headaches/Migraines, Hearing Loss, Heart Palpitations, Hives (Urticaria), Hypertension (High Blood Pressure), Impotency and Sexual Problems, Inability to Concentrate, Infection Susceptibility, Insomnia, Irritability, Itching, Joint Pains, Laryngitis, “Like Thinking in a Fog”, Marked Personality Changes, Memory loss, Menstrual Problems or Changes, Migraines and Severe Headaches (Trigger or Cause From Chronic Intake), Muscle spasms, Nausea or Vomiting, Numbness or Tingling of Extremities, Other Allergic-Like Reactions, Panic Attacks, Phobias, Poor Memory, Rapid Heart Beat, Rashes, Seizures and Convulsions, Slurring of Speech, Swallowing Pain, Tachycardia, Tremors, Tinnitus, Vertigo, Vision Loss, Weight Gain.

Aspartame Disease Mimics Symptoms or Worsens the Following Diseases:
Fibromyalgia, Arthritis, Multiple Sclerosis (MS), Parkinson’s Disease, Lupus, Multiple Chemical Sensitivities (MCS), Diabetes and Diabetic Complications, Epilepsy, Alzheimer’s Disease, Birth Defects, Chronic Fatigue Syndrome, Lymphoma, Lyme Disease, Attention Deficit Disorder (ADD), Panic Disorder, Depression and other Psychological Disorders. Note: The website at www.dorway.com/symptoms.html provides the list of 92 FDA-recognized adverse reactions to aspartame with a link to published medical journal reports describing them.

Aspartame “front groups” claim federal food survey disproves aspartame’s link to cancer

WASHINGTON, D.C.—The Calorie Control Council (CCC) issued a press release April 4, 2006, claiming a 1995 federal food survey proves that aspartame is safe. The move is seen by many as a face-saving gesture by the CCC, a self-described weight-loss advocacy group “representing manufacturers and suppliers” of low-calorie products. The CCC and other aspartame “front groups,” such as the American Beverage Association and the American Dietetic Association, are grasping at non-scientific straws to justify a quarter-century of recommending calorie-conscious consumption of aspartate at a time when more and more people are realizing the substance is a potentially lethal neurotoxic and carcinogenic drug.

The release reported on the “Prospective study of aspartate-containing beverages and risk of hematopoietic and brain cancers,” a presentation by Unhee Lim, et al., delivered April 4, 2006, at the 97th annual meeting of the American Association of Cancer Research. Lim’s team analyzed data from a self-administered baseline food frequency questionnaire filled out by over 500,000 men and women between the ages of 50 and 69 in 1995/96. “Our findings from this epidemiologic study suggest that consumption of aspartate-containing beverages does not raise the risk of hematopoietic or brain malignancies,” Lim et al. state in their abstract.

Mission Possible responded to the release April 11, 2006, by describing the non-scientific nature of the study. See Mission Possible’s response at www.wnho.net.
The human side of aspartame poisoning

While government and industry claim aspartame is safe, millions of people suffer its effects on the human body. These are real people whose chronic symptoms disappear soon after aspartame is eliminated from their diets. On the website at www.dorway.com are hundreds of case histories where extremely sick people were able to identify aspartame as the cause of their ill-health. How? Simple: They began feeling a lot better after eliminating it from their diet. The most compelling evidence that aspartame is a systemic poison is not found in lab tests performed on lab rats or in statistical studies among human populations. It is found in the experiences and testimonies of real people.

David Oliver Reitz, 1947-2003

The Artificially Sweetened Times is dedicated to the memory of Dave Reitz. He is the DOR of www.dorway.com. In 1992 he began suffering the ravages of aspartame. After 21 physicians could not tell him what was causing him to be crippled with joint pain, the Internet provided the answer. Dave found that joint pain was on the FDA’s list of 92 symptoms of aspartame poisoning. After removing aspartame from his diet, his joint pain disappeared.

Dave vowed to give back to others what the Internet gave back to him—his life. He began developing the website at www.dorway.com which has grown to be the world’s most comprehensive collection of aspartame information and the official website of Mission Possible. Dave was also the director of Mission Possible South Carolina. Though most of his aspartame-related symptoms had disappeared many years ago, aspartame, a class-A carcinogen, finally took the life of this incredible humanitarian in the form of prostate cancer.

Dave’s DORWAY to DISCOVERY will continue to grow and his work will continue saving lives until the day our actions lead to the removal of this toxin from the world’s food supply.

Joyce Wilson

The 1991 aspartame-related death of Joyce Wilson marked the beginning of Mission Possible. Described by those close to her as a wonderful wife, mother and friend, Joyce began to use products containing NutraSweet after it was approved by the FDA. Though not overweight, she wanted to stay slim. She began drinking diet sodas, Slimfast and chewing sugar-free gum. She gained 35 pounds and her health began to fail. She also began to lose her vision. Thirty-four doctors could not figure out what was happening. One day she heard how a woman named Shannon Roth became blind in one eye because of her consumption of NutraSweet. She contacted Roth and found that aspartame is a deadly poison. Indeed, this poison destroyed her brain, ravaged her internal organs and blinded her. She suffered headaches, hypertension and developed multiple-sclerosis-like symptoms. In her deteriorating state, she vowed to do everything in her power to warn the world about aspartame. In advance of testifying before Congress in 1986, she told Sen. Howard Metzenbaum, “I feel aspartame is the most dangerous substance introduced for human consumption. Please stop this product now before it is too late for me, but I hope I can help others...”

Joyce successfully got many people off aspartame and watched their health return—an option that was not available to her. Aspartame disease eventually took her memory completely away and she passed away like an Alzheimer’s victim.

The memory of Joyce Wilson lives on as more and more of us become informed about aspartame and become part of the team working to remove this horrible substance from our foods, beverages and medicines.

George Jantz

My name is George Jantz and I am 73 years old. I have visited the www.dorway.com website many times and was extremely impressed. You had expressed the need for ‘hornblowers’ and this is why I am writing to you as I have lived an unforgettable ordeal over the years.

For years, I had consumed a lot of soft drinks containing aspartame. Both of my knees had been replaced in August, 1988, and I was still consuming large amounts of aspartame when, in 1989, I started to fight a severe form of depression that landed me in the Oshkosh Psycho Ward for one week. From there I was transferred to the VA Hospital in Tomah, Wisconsin, and stayed there for a number of months.

After being released in the fall of 1990 from the VA Hospital, I was forced to deal with a separation from my wife Lois for 1 1/2 years. During the 1991 summer I sank into a deeper depression and became psychotic. I had been placed on the medications of Lithium and Depekote. I believe now that it was the combination of these drugs along with my large consumption of aspartame that took at least 15 years of my life causing me to make two suicide attempts and experience many serious health and financial problems.

I have since gotten off of Lithium and Depekote and stopped consuming aspartame. My personal experience, along with witnessing the deteriorating effects of aspartame on three of my personal acquaintances, has left me devastated. My stand against the use of aspartame and sharing with others the effects of aspartame on the human body has alienated me from most of my family and caused much heartache and sorrow.

In closing, it is my sincere hope that you and many others like you, can understand the long-term effects on a person’s life because of the daily use of aspartame as well as prescription drugs. It is my sincere hope that my personal experiences can somehow help others in the future!
Aspartame and sudden death

News of the last few years has been punctuated with reports of world-class athletes and others in generally good health simply dropping dead. What could be causing the rise in incidences of “Sudden Adult Death Syndrome?” Dr. James Bowen has written an in-depth report on aspartame and sudden death (available at www.whale.to/a/sads1.html). It is the editorial belief of The Artificially Sweetened Times that, if the case histories of each one of these untimely and unexpected deaths were to be thoroughly analyzed, the common denominator would be consumption of aspartame over an extended period of time coupled with its metabolic interactions with dietary supplements and medications.

Steve Belcher, 1979-2003

Steve Belcher, a pitcher for the Baltimore Orioles, died at age 23 Feb. 17, 2003, in a Fort Lauderdale hospital. A bottle of ephedra-containing weight-loss supplements was found in his locker. Dr. H.J. Roberts contacted Broward County Medical Examiner Dr. Joshua Perper and found that the official cause of death was hyperthermia because his internal body temperature reached 108 degrees F. to cause multiple organ failure. Dr. Roberts asked how many diet drinks Belcher drank per day. Dr. Perper did not even think to inquire as to the possibility of aspartame poisoning contributing to Belcher’s untimely death.

Dr. Roberts maintains that the ephedra alone could not have caused Belcher, a physically-fit professional athlete in the prime of his life, to die from hyperthermia. He believes that the excitotoxin aspartame must have been consumed by Belcher to achieve the toxicity that led to his death.

Chuck Fleming, 1963-2000

At age 37, Chuck Fleming was a fit, athletic man who habitually consumed a variety of health drinks, health powders, energy bars and muscle mass-building products. On the way home from church in June, 2000, Fleming and his wife Diane stopped at a store to buy a case of Gatorade and a carton of Creatine, a product marketed to help build muscle mass. Chuck and Diane mixed the Creatine into the Gatorade. Chuck misread the directions and mixed tablespoons—not teaspoons as directed—into one bottle of Gatorade. He sipped the mixture and, not liking the taste, put it into the refrigerator and took off to play basketball, as was his custom 2-3 times per week. For a month prior Chuck had been complaining of intermittent nausea and shortness of breath. Diane claims he drank about eight 12-ounce cans of diet pop each day, drank very little water and never drank coffee or tea. He took several pharmaceutical preparations including Prevacid (an antacid), tetracycline (an antibiotic), Naproxen (digestive anti-inflammatory), a multi-vitamin and Vancenase AQ (nasal inhaler for allergies). After returning home from playing basketball, he ate a bowl of ice cream, mixed Creatine in the remaining bottles of Gatorade and went to bed. He awakened the next morning feeling ill but went to work, taking three bottles of mixed Gatorade with him. He drank only a third of one bottle and returned home feeling nauseated. Originally thinking he had a touch of the flu, his condition continued to worsen. By late afternoon the following day, Diane called 911 and Chuck was rushed to the hospital. He lapsed into a coma and was removed from life support three days later. The cause of death was methanol poisoning.

Thirteen months later Diane was arrested for murder and is now serving a 50-year sentence in a Virginia prison for allegedly spiking her husband’s Gatorade with methanol-containing windshield washer fluid while he was off playing basketball.

CDC reports Sudden Cardiac Death nation’s #1 killer

Biochemical evidence indicates aspartame behind this curious epidemic

from Mission Possible

The Centers for Disease Control and Prevention (CDC) reports that Sudden Cardiac Death (SCD), the nation’s #1 killer, prematurely ended the lives of 460,000 Americans in 1999. The numbers appear to be climbing.

When the heart stops abruptly without warning, the diagnosis is SCD. It kills its victims within minutes.

It is estimated that 95 percent of victims die before reaching the hospital. Often SCD happens to outwardly healthy people such as high school, college and professional athletes and thousands of children with no history of heart problems. New York State has mandated automatic external defibrillators (AEDs) be provided for all schools and athletic events on or off campus. Illinois passed a similar law. In California they talk of making defibrillators as common as fire extinguishers.

The Philadelphia Trial Lawyers Association donated 73 AEDS so school gyms and playing fields in their area will be equipped to fight this devastation.

The Philadelphia School District estimates 7,000-10,000 American children and youths die annually from SCD. Chief of Cardiology Victoria Vetter, MD, at Children’s Hospital said, “I diagnose, treat and follow hundreds of children from the Philadelphia region with cardiac issues.”


“Sudden Cardiac Death is not a ‘heart attack’ or myocardial infarction caused by clogged arteries,” explained James Bowen, MD. Dr. Bowen has been researching the effects of aspartame on humans since being poisoned by aspartame in the mid-80s. “[SCD is] an electrical problem in which the cardiac conduction system that generates the impulses regulating the heart suddenly puts out rapid or chaotic electrical impulses, or both. The heart ceases its rhythmic contractions, the brain is starved of oxygen and the victim loses consciousness in seconds,” he added.

CDC reports and statistics are yet another indication the government is aware that aspartame is poisoning the American public, sometimes fatally, but refuses to order its removal from the nation’s food supply.

Detailed analyses of the nation’s new #1 killer and the biochemical pathways implicating the presence of aspartame in most, if not all, cases of Americans simply dropping dead for no apparent reason, are available at www.dorway.com or wnho.net
The effects of aspartame on infants and children

It has been known for centuries that methanol is a neurotoxin. Therefore we should minimize children’s exposure to products containing it. Aspartame not only contains 10 percent free methanol, but additional methanol is created as aspartame metabolizes in the body. No safe limit for methanol has ever been determined. That means any level of exposure to methanol is unsafe. Just imagine the damage daily doses of methanol-containing aspartame could have on the central nervous systems of infants and children. Now go to your nearest grocery store and look at all the aspartame-containing products being marketed to children and ask yourself: Could this be one reason why the numbers of neurologically-impaired and sociopathic children requiring special care and instruction are rising at an alarming rate?

WARNING: School children at risk!

The Institutes of Medicine has declared war on childhood obesity. Opportunists in the beverage industry have responded by declaring war on obese children. To capitalize on the marketplace niche opening as schools ban the sale of sugar drinks on school grounds, beverage companies are marketing whole new generations of artificially flavored, colored and sweetened (carbonated and noncarbonated) beverages for school children. While over consumption of sugar is not healthy and banning sales of sugar-containing junk food on school campuses is a good idea, replacing sugar with aspartame is not the answer. Following is Dr. H.J. Robert’s open warning to parents and schools regarding children’s consumption of aspartame-containing drinks.

The momentum for reducing the amount of soda pop consumed by children, especially from dispensing machines at schools, has increased. It is justified by the documented contribution of the sugar therein to serious disorders, especially obesity and other problems.

Imaginative entrepreneurs now seek to substitute an array of palatable “sugar free, caffeine free,” and “calorie free” drinks having appealing brand names. They plan to actively promote them to students and school systems, using celebrities such as professional athletes as pitchmen.

Unfortunately, there is a major public health problem when aspartame—commonly known as NutraSweet® and Equal®—is the sweetening agent. I have repeatedly stated my professional opinion, based on the scores of children in my database of aspartame reactors, that they should not take aspartame products—including beverages, foods, vitamins, drugs, gum and supplements.

Each of the components of this chemical (phenylalanine; aspartic acid; the methyl ester, which promptly becomes FREE methyl alcohol) and their multiple breakdown products can damage the developing brain.

Aspartame-induced disorders in children include headache, confusion, convulsions, irritability, depression, intellectual deterioration, antisocial behavior, rashes, asthma and unstable diabetes. Addiction to aspartame products also has become a problem. The details appear in my publications, particularly Aspartame Disease: An Ignored Epidemic (www.sunsentpress.com).

There also are reservations about the long term use of sucralose, another popular sweetening agent, in these substitute drinks because of the adverse effects noted in animal studies.

In view of this perceived imminent public health threat, I believe that parents, physicians, other health care professionals, school boards and consumer advocates have an obligation to monitor and guide their communities regarding such exposure. They can expect formidable corporate and bureaucratic resistance, particularly from the FDA and groups supported by this huge industry.

H. J. Roberts, M.D., FACP, FCCP
Palm Beach Institute for Medical Research
West Palm Beach, Florida

Observations from Dr. Miguel Baret Daniel of the Dominican Republic:

A pediatrician friend of mine and I have been giving nutritional support to children with diabetes. Since cow’s milk has a specific protein which causes diabetics, especially in children, I remove milk from their diet.

I removed milk from the diets of about 360 children studying in public schools in my country. Though these 360 children were not diabetics, I removed the milk from their diet for diabetes prevention. At one point my pediatrician friend and I started noticing that a considerable number of these 360 children were exhibiting abnormal levels of restlessness, a lack of concentration, irritability and depression, in some.

At the beginning I suspected it was happening because the extreme heat we were having in my country in those days. But then the weather changed and the situation didn’t get better. So, I took a look at their diet and discovered ALL of them were drinking a lot of one kind of concentrated juice sweetened with ASPARTAME.

They drank some six ounces of that juice twice a day, some times between classes. So, I talked to their parents and asked them to press upon their children that they should not drink that juice anymore for a while.

The results were as astonishing as the very situation I was trying to correct: The symptoms disappeared in 4-5 days in ALL of them.

And be particularly careful with funny-looking humans with long white coats; they could give you cancer!
Got symptoms? Eliminate aspartame and see what happens

Popular awareness that aspartame is not a harmless sugar substitute but a dangerous drug is growing. People are becoming informed, organized and are petitioning their legislatures to ban aspartame. First in New Mexico (2007) and then in Hawaii (2008), key legislators became rightly convinced that aspartame is a potentially lethal systemic, neurotoxic poison and were on record as favoring a ban, then changed their minds at the 11th hour causing both proposed bans to fail. Omnipresent at these proceedings were industry lobbyists whose special interest-based political power and financial resources trumped public health in in two of the nation’s state legislatures. In the meantime, published medical literature is expanding the numbers of increasingly common chronic ailments linked to aspartame consumption. Our representatives in government and industry lobbyists may not (yet) be willing to recognize aspartame trafficking as a public health emergency, but we do.

The proof, for many, is simple to determine: If you are experiencing symptoms of any kind, eliminate aspartame. If symptoms begin to disappear, then reappear with aspartame use and disappear again when aspartame is eliminated from your diet, you can be sure that aspartame is not good for you—regardless of what government and industry say.

Dermatitis, migraines and aspartame

A study entitled “Formaldehyde, Aspartame, and Migraines: A Possible Connection” by Drs. Sharon E. Jacob and Sarah Stechschulte from the University of Miami School of Dermatology and Cutaneous Surgery was published in the May-June, 2008 edition of “Dermatitis.” The study of six dermatitis patients showed a link between aspartame consumption and skin “flares.” It also demonstrated the link between aspartame and migraines.

The report’s “case series” description succinctly sums up the results of the study: “Six patients (ages 16 to 75 years) were referred for evaluation of calcitrant [persistent] dermatitis. By history, five of the patients were noted to have developed migraines following aspartame consumption; the sixth reported dermatitis flares associated with diet cola consumption of 2 liters/day. All six patients had current environmental exposures to formaldehyde or formaldehyde-releasing preservatives in their personal hygiene products and/or regular consumption of ‘sugar-free food’ artificially sweetened with aspartame.”

The subjects were tested using standard allergy testing protocols based upon their medical histories and symptom expressions. The tests produced consistent outcomes among all six subjects. According to the report, “All six patients had positive reactions to formaldehyde, and four had additional positive reactions to formaldehyde-releasing preservatives (FRPs). Expert counseling on allergen avoidance (including avoidance of formaldehyde, FRPs, and aspartame) and alternative product recommendations were provided to the patients.”

Proof that aspartame was a causative factor in dermatitis flares and recurrence of migraines was confirmed weeks later. Per the report, “At their follow-up appointments (between 8 and 12 weeks), all the patients showed clearing of their dermatitis. Four patients (two inadvertently) resumed their consumption of aspartame and subsequently returned for an additional follow-up visit. Three of the first five patients had recurrences of both their migraines and their dermatitis; the sixth patient (who had no migraines) had a positive rechallenge for both dermatitis. These four patients were again counseled on an avoidance regimen.”

Hypertension and aspartame

The report “Resistant Hypertension: Identifying Causes and Optimizing Treatment Regimens” by Drs. Cora Lynn Trewett and Michael E. Ernst (June 13, 2007) stated that, “Hypertension,” or “high blood pressure is the most common primary care diagnosis in the United States, affecting more than 50 million individuals.

“Resistant hypertension, which is becoming increasingly common, is diagnosed when blood pressure cannot be brought under control while receiving a three-drug regimen that includes a diuretic.”

Dr. H.J. Roberts (see “Resources” page 23) reviewed the study and commented by describing his experiences with hypertensive patients and aspartame. In one instance Dr. Roberts recalls 64 people who had no history of high blood pressure before taking aspartame suddenly experience severely elevated blood pressure while using the chemical. “The causative role of aspartame products was indicted by 1) the striking improvement or normalization of blood pressure after stopping aspartame, and 2) the prompt recurrence of hypertension following aspartame resumption,” Dr. Roberts explained.

An overview of the pharmacological/metabolic processes of aspartame is found on pages 5-6; exhaustive analyses can be found in books referenced on page 23. Within that framework, Dr. Roberts’ counsel for hypertensives is lucid: “At the very least, persons with hypertension that resists conventional therapy ought to avoid aspartame products.”

Aspartame Material Safety Data Sheet

Below is safety data as excerpted from an aspartame MSDS sheet generated by the Aldrich Chemical, Co., Milwaukie, Wisconsin

Product Number: 858900
Product Name: L-Aspartyl-L-phenylalanine methyl ester, 96%

Label Precautionary Statements

Harmful. Possible Sensitizer. Wear Suitable Protective Clothing.

Emergency Procedures: In case of contact, flush eyes with copious amounts of water for at least 15 minutes. In case of contact, immediately wash skin with skin and copious amounts of water. If inhaled, remove to fresh air. If not breathing, give artificial respiration. If breathing is difficult, give oxygen. If swallowed, wash out mouth with water provided person is conscious. Call a physician. Wash contaminated clothing before reuse.

Fire fighting measures: Extinguishing media Water spray, carbon dioxide, dry chemical powder or appropriate foam.

Special firefighting procedures: Wear self-contained breathing apparatus and protective clothing to prevent contact with skin and eyes.

Unusual fire and explosion hazards: Emits toxic fumes under fire conditions.

Occidental release measures: Wear NIOSH/MSHA-approved respirator, chemical safety goggles, rubber boots and heavy rubber gloves. Sweep up, place in bag and hold for waste disposal. Avoid raising dust. Ventilate area [with mechanical exhaust] and wash spill site after material pickup is complete. Avoid inhalation. Avoid contact with eyes, skin and clothing. Avoid prolonged or repeated exposure. Wash thoroughly after handling.

Toxicological information: Acute effects: May be harmful by inhalation, ingestion or skin absorption. May cause eye irritation. May cause skin irritation. Prolonged or repeated exposure may cause allergic reactions in certain sensitive individuals. To the best of our knowledge, the chemical, physical and toxicological properties have not been thoroughly investigated.

Warning to persons with phenylketonuria: This material can release phenylalanine.

Environmental considerations: Data not yet available.

Disposal considerations: Dissolve or mix the material with a combustible solvent and burn in a chemical incinerator equipped with an afterburner and scrubber.
Researchers links excitotoxin exposure to worldwide epidemic of subclinical MS

RIDGEFIELD, Miss.—In June, 2004, internationally renowned neurosurgeon Russell Blaylock, MD, published a fully cited and referenced report strongly indicating the existence of a connection between ingestion of excitotoxins (such as aspartame and monosodium glutamate) and the development of a multiple sclerosis (MS)-like syndrome.

In reviewing the medical literature, Dr. Blaylock has found what MS researchers have known since 1996: Excitotoxins cause lesions in the myelin sheath that protect axons (the long outgrowths of nerve cells that transmit impulses to the next nerve cell). The lesions, found in patients diagnosed with MS, are formed when the excitotoxic material causes myelin-producing oligodendroglia cells to die.

Dr. Blaylock explains how excitotoxins that enter the body not only damage myelin-producing cells, but also break down the blood/brain barrier (BBB) which increases the amount of excitotoxins available to damage the nervous system. Dr. Blaylock also mentioned that liquid forms of excitotoxins are more easily absorbed and, therefore, more readily elevate levels of excitotoxins in the body.

The relationship between excitotoxin consumption and MS, as demonstrated in the published medical literature, is impossible to ignore. “Numerous studies have shown that consuming aspartame can significantly elevate the excitotoxin level in the blood. There is a common situation during which the excitotoxin exposure is even greater. When aspartate (as aspartame) is combined in the diet with monosodium glutamate (MSG), blood levels are several-fold higher than normal. With the BBB damaged, as in MS, these excitotoxins can freely enter the site of injury, greatly magnifying the damage. So, we see that dietary excitotoxins, such as aspartame and MSG, can greatly magnify the damage produced in multiple sclerosis,” Dr. Blaylock explained.

There has been an explosion of MS cases in recent years. Excitotoxins in the presence of subclinical MS may be triggering full-blown expressions of the disease.

Based upon autopsy reports among the elderly, we can estimate that 10 percent of the population develops myelin lesions without ever developing visible symptoms of MS. “A diet high in excitotoxins, such as aspartame, can convert this benign, subclinical MS condition into full-blown clinical MS,” Dr. Blaylock warned.

Dr. Blaylock also noted that aspartate is 10 percent methanol—a known neurotoxin—and that the combined toxicity of the aspartate and the methanol can also trigger full expression of typical MS symptoms.

If 1-in-10 Americans are already walking around with subclinical MS, 10 percent of our population is primed to develop the full-blown symptoms of one of the world’s most dreaded degenerative diseases.

Once MS becomes full-blown, further consumption of excitotoxins magnifies the toxicity, increasing the level of dysfunction in the host and the likelihood that his illness will result in death.

“In the face of this connection between excitotoxicity and the pathophysiology of MS, it would be ludicrous to allow further use of this excitotoxin-containing sweetener,” Dr. Blaylock concluded.

EFSA finally reviews Ramazzini rat study

Food safety “experts” in Europe, U.S., ignore scientific proof of aspartame/cancer link; refuse to revise aspartame ADI

The European Food Safety Authority (EFSA) announced April 20, 2009, “…on the basis of all the evidence currently available including the [second] published ERF study that there is no indication of any genotoxic or carcinogenic potential of aspartame and that there is no reason to revise the previously established ADI [allowable daily intake] for aspartame of 40 mg/kg bw/day [milligram per kilogram of body way per day].”

The EFSA announcement came nearly two years after the U.S. Food and Drug Administration (FDA) and the EFSA promised to “review” the European Ramazzini Foundation of Oncology and Environmental Sciences (ERF) studies linking aspartame consumption to various forms of cancer. Since June, 2007, both the FDA and the FSA agreed they would continue promoting the artificial sweetener aspartame as “safe” until being convinced it is not safe.

In March, 2006, ERF released the results of a study entitled, First Experimental Demonstration of the Multipotential Carcinogenic Effects of Aspartame Administered in the Feed to Sprague-Dawley Rats (Soffritti, et al, March, 2006). Dr. Soffritti and his team exposed 1,800 rats to doses of aspartame over 36 months. The study revealed the development of a variety aspartame-induced cancers including leukemia, lymphomas and malignant brain tumors. Though that study solidly linked aspartame consumption in rats to the development of various forms of cancers, the EFSA concluded May 5, 2006, that, “…on the basis of all the evidence currently available, that there is no need to further review the safety of aspartame nor to revise the previously established ADI.”

In April, 2007, ERF released the results of a second aspartame safety study, Lifespan Exposure to Low Doses of Aspartame Beginning During Prenatal Life Increases Cancer Effects in Rats (Soffritti, et al). The second ERF study was conducted on 400 Sprague-Dawley rats. Aspartame was added to the standard rat diet in quantities of 100, 20, and 0 mg/Kg of body weight. Treatment began on the 12th day of fetal life until natural death. The results of the second study show an increased incidence of lymphomas/leukemias in female rats with respect to the first study.

Though the second ERF study had been extensively peer reviewed and confirmed the findings of the first study—which demonstrated that the burden of formaldehyde that accumulates in the tissues of rats fed dietary amounts of aspartame causes cancer in those rats—the EFSA invented deficiencies in the study to conclude that aspartame is not carcinogenic (See the full analysis of the EFSA review at www.mwphi.com). Dr. Morando Soffritti, who led both ERF studies, has noted that so much formaldehyde developed in aspartame-exposed rats that their skin turned yellow. He concluded that aspartate is “…a multipotential carcinogen causing leukemia and lymphatic cancers.”

Dr. Blaylock of Ridgeland, Miss., is a retired, board-certified neurosurgeon with more than 26 years experience and Clinical Assistant Professor of Neurosurgery at the Medical University of Mississippi. Author of 30 scientific papers on various medical subjects, chapters in three medical textbooks and a booklet on multiple sclerosis, he recently completed a booklet on bioterrorism and is the author of "Excitotoxins: The Taste That Kills", "Health & Nutrition Secrets to Save Your Life", and "Natural Strategies for Cancer Patients." He serves on the editorial staff of The Journal of American Physicians and Surgeons, the Journal of the American Nutraceutical Association, and acts as a medical advisor to the American Nutraceutical Association. As editor of the Blaylock Report (blaylockreport.com), he has researched how to therapeutically overcome the ravages of MS and other symptoms of aspartame poisoning. Much of his research can be found at www.russellblaylockmd.com.
“Safe for kids and pregnant women” says industry advocate
Calorie Council attempts to keep USS Aspartame from sinking off Florida coast

MIAMI, Fla.—Beth Hubrich of the Calorie Council, an international association representing the low-calorie and reduced-fat food and beverage industry, recently had comments published in *The Miami Herald* that world-renowned neurosurgeon Dr. Russell Blaylock, author of “Excitotoxins, The Taste that Kills,” believes to be among the most irresponsible public comments ever made.

In response to an article that appeared in *The Herald* Jan. 10, 2004, Hubrich stated, “We appreciate the factual information that you provided. Pregnant women and those with advanced liver disease can consume aspartame, according to the FDA as well as the Council on Scientific Affairs of the American Medical Association. An American Academy of Pediatrics task force, too, has concluded that aspartame is safe for both the mother and developing baby.”

Hubrich went on to explain that aspartame breaks down in the body to phenylalanine, aspartic acid and methanol, which are commonly found in the diets of pregnant and breast-feeding women. “Aspartame never enters the bloodstream and therefore cannot travel to essential organs, including the liver,” Hubrich stated and added, “Those with phenylketonuria can consume products containing aspartame but must limit the amount from all sources.”

Dr. Blaylock disagrees. “There is not one long-term study of aspartame safety ever conducted on the offspring of pregnant women consuming aspartame. Yet, there are numerous studies indicating aspartame could pose a serious danger to both mother and infant.”

Citing a study on maternal PKU, Dr. Blaylock stated “...that fully a third of all babies born to PKU carrier mothers consuming aspartame foods and drinks risk varying degrees of brain damage.”

As for aspartame not entering the bloodstream, Dr. Blaylock noted, “...it is also known that the amount of toxic phenylalanine reaching the baby is twice as high as that in the mother’s blood because the placenta concentrates the toxin.”

Mission Possible sees Hubrich’s willingness to promote the use of aspartame in breastfeeding women, children, people with advanced liver disease and phenylketonurics as a sign that the USS Aspartame is sinking. In her zeal to promote the use of aspartame, “Hubrich even forgot to cite the industry’s own studies cautioning against use of aspartame in the types of individuals she mentioned,” said Mission Possible Director Betty Martini.

Where’s the aspartame?

Aspartame can be found on the ingredients list in the following products:
- Soft drinks, over-the-counter drugs and prescription drugs (very common and listed under “inactive ingredients”)
- Vitamin and herb supplements, tea beverages, instant teas and coffees, topping mixes and wine coolers.
- Please check labels carefully and compare them against the list of “Sweeteners to Avoid” at right. Many people make the mistake of not checking labels carefully and continue to poison themselves. (Note: In some countries such as Australia, the word “aspartame” may not appear on the label, but the phrase “Phenylketonurics: Contains Phenylalanine” appears instead). Also, some drug and supplement manufacturers are allowed to avoid listing aspartame on the label if they state the words, “contains phenylalanine.” In addition, many people do not realize that their children may be given aspartame or other artificial sweetener-containing foods or drugs at school without their knowledge. Talk to the school director and the local PTA to assure that this does not happen.

Excitotoxins

Excitotoxins were discovered in 1957 by two ophthalmologists testing how MSG affects the vision of mice.

A growing number of clinicians and scientists today are convinced excitotoxins play a critical role in the development of neurological disorders such as migraines, seizures, infections, abnormal neural development, certain endocrine disorders, learning disorders in children, AIDS dementia, episodic violence, depression and obesity.

Excitotoxins are also linked to the development of neuro-degenerative diseases such as Parkinson’s disease, Alzheimer’s disease, Huntington’s disease [and multiple sclerosis], wrote neuroscientist Russell Blaylock, MD.

The most commonly consumed excitotoxins are aspartame, monosodium glutamate (MSG) and hydrolyzed vegetable protein (which is commonly listed on product labels as “natural flavors, natural flavoring, spices, yeast extract, textured protein” and “soy protein extract”).

Since 1948 the amount of MSG added to foods has doubled every decade. Over 800 million pounds of aspartame have been consumed in various products since it was first approved in 1981. Hydrolyzed vegetable protein is found in a steadily-increasing array of foods found at the grocery store. Today, at least one of these excitotoxins is present in nearly every packaged food product.

For example, soups often contain three or more excitotoxins in the form of flavor enhancers, and many breads contain L-cysteine as a dough conditioner. In the body, L-cysteine converts to the powerful excitotoxin cystein sulfinic acid.

Additionally, excitotoxins have been found to interact with food additives and pharmaceutical preparations with adverse (even lethal) results.

Dr. Blaylock’s brief description of excitotoxins can be found in his article Excitotoxins, Neurodegeneration and Neurodevelopment, at www.dorway.com. A more detailed analysis is found in his well-referenced book, “Excitotoxins: The Taste that Kills (See page 23).”

Healthy Sweetener Use Guide

**Sweeteners to Use**

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<th>Sweetener</th>
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<tr>
<td>Stevia</td>
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<td>Barley Malt</td>
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<td>Evaporated Cane Juice</td>
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<tr>
<td>Fruit Juice</td>
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<tr>
<td>Rice Syrup</td>
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<tr>
<td>Just like Sugar</td>
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<td>Maple Syrup</td>
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<tr>
<td>Honey</td>
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<td>Licorice Root</td>
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<td>Fructooligosaccharides (FOS)</td>
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<td>Amasake</td>
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<td>Vegetable Glycerin</td>
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<td>Xylitol</td>
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**Sweeteners to Avoid**

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<th>Sweetener</th>
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<tbody>
<tr>
<td>Aspartame</td>
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<td>Neotame</td>
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<tr>
<td>Sucralose (Splenda)</td>
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<td>Saccharin</td>
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<td>Acssulfame-K (Sunette, Sweet &amp; Safe, Sweet One)</td>
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<td>Cyclamates</td>
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<td>Refined Sugar</td>
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<td>High Fructose Sweeteners</td>
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<td>Sorbitol</td>
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<td>Tagatose</td>
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* Safe for diabetics
# Can be used in very small amounts

Source: www.holisticmed.com/aspartame/detox.html

Note: Stevia is a plant-source natural sweetener that is commonly considered by wholistically-minded people to be among the healthiest of the sweetener options available. Stevia, which can be found in most health food stores, is known for aiding in the metabolism of sugar and is, therefore, beneficial to both diabetics and nondiabetics alike.
Kicking the sweet habit

Tips to regain your health through an aspartame detoxification program

compiled by Ingrid Cassel

The first step in any detoxification program is to stop exposure to the toxins causing our health problems. Become an avid label reader and avoid instant or prepackaged food in general. Buy organic grains, nuts, beans, fruits, vegetables and herbs while learning how to cook from scratch.

The second step is to eliminate the craving for the substance causing our ill health. In the case of aspartame, it is essential to restore depleted nutrients by taking a high quality B-complex supplement as well as a multi-mineral supplement. Liquid supplements or supplements in capsules are much more assimilable than supplements in tablet form.

It is also important to drink a minimum of eight glasses of purified water a day while eliminating dehydrating drinks such as coffee, tea, alcohol and carbonated beverages.

Plenty of chlorine and fluoride-free, filtered water is necessary for our bodies to eliminate the accumulation of toxic residues and heavy metals stored in our fatty tissues. A vast majority of the populace is severely dehydrated as Dr. F. Batmanghelidj in his book Your Body’s Many Cries for Water reveals. This is one of the most powerful aspects of any detoxification program. The best resource on the Internet about the importance of water with several case histories cited is www.watercure2.com

In his book, “Health and Nutrition Secrets to Save Your Life,” Dr. Russell Blaylock details an intensive aspartame detox regimen. (see “Resources” page 23)

In the case of aspartame as well as most other toxins, our body’s main filter, the liver, is congested and needs to be supported in the cleansing process. For information on liver cleanses and herbs to support liver function, read Dr. Sandra Cabot’s book, “The Liver Cleansing Diet Book” (888-752-4286).

Also, Dr. Richard Schulze is an expert on natural healing and “saying it like it is” when it comes to how your body works as well as how you can recover naturally from “incurable” diseases. Call 1-800-HERBDUC and ask for Dr. Schulze’s comprehensive newsletter on The Liver or go to his website www.herbdou.com

Colon cleansing is also an essential part of the detoxification process as you will find out from Dr. Schulze and countless other naturopaths.

Other important aspects of detoxification are oxygenation, copious amounts of Vitamin C, consuming lots of raw fruits and vegetables, drinking raw fresh juice made with your own juicer, and proper application of certain types of clay both internally and externally. Dr. Janet Starr Hull, author of Sweet Poison, recommends using French Green clay internally and we know of many people who have excellent results with magnetic clay baths for detoxing from mercury, aluminum and barium, as well as formaldehyde and DKP—the metabolic byproducts of aspartame. Go to www.magneticclay.com

But the most important and most commonly overlooked aspect of any healing program is its spiritual, mental and emotional components, known today as psycho-neuro-immunology.

1. Take control of your life by loving yourself and your life through positive affirmations.
2. Learn to forgive yourself and those around you.
3. Take responsibility for your personal life, cleaning up strained relationships.
4. Meditate, follow your spirit and pray.
5. Help someone everyday.

For books and websites on specific programs for detoxing from aspartame poisoning, refer to the “Resources” listed on page 23. Online support for “Rumsfeld’s disease” sufferers and their dependents can be found at www.mpwhi.com.

Aspartame Reaction Report Form

Available at www.dorway.com/reptrfrm.html is an aspartame reaction report form. The U.S. Food and Drug Administration needs to hear how the poison it approved in 1980 is still out there poisoning people. The form includes all the necessary contact information to send an original to the FDA commissioner and a copy to Mission Possible World Health International. Address aspartame questions and correspondence to:

Dr. Betty Martini
9270 River Club Parkway
Duluth, Georgia 30097
(770) 242-2599
Bettym19@mindspring.com

WANTED: Looking for insider reports. Human subjects in locations all over the world have been used to test aspartame without their knowledge or consent. Mission Possible has obtained some of these shocking reports but knows there are more of them out there. Call (770) 242-2599
The Unofficial History of Neotame

The FDA recently approved the use of Monsanto’s new artificial sweetener Neotame. Though nearly identical to aspartame, Monsanto added 3-dimethyl-ylbutyl! (listed by the EPA as a most hazardous chemical) to create Neotame, which is reportedly 13,000 times sweeter than sugar by weight. Not much is known at this time what it took for Monsanto to accomplish FDA approval for this potent new synthetic sweetener entirely composed of known toxins. But, based on the well-documented history of the aspartame approval process, Mark Gold of the Aspartame Toxicity Center wrote the following satire.

by Mark Gold

In 1993, a former Monsanto scientist was working at a secret army chemical weapons plant when there was an accidental release of a newly-developed chemical weapon, neotox-II. After the alarm sounded, other workers ran to the decontamination room. But this man, having learned at Monsanto that chemicals are not something to be afraid of, stood his ground. On the middle finger of his left hand, there had accumulated a tiny amount of neotox-II.

He put his finger up to his nose to thoroughly investigate this new chemical. It made him intensely nauseous, but there was also a very strong sweet smell. Believing that sweet means safe, no matter how toxic, he licked his finger. Neotox-II was incredibly sweet! The nausea became intense and his body began to convulse. He didn’t seem to care, belting out, “I have found it! I have found it!” at the top of his lungs.

When he was released from the army hospital three weeks later, he knew what he had to do. He placed a call to several Monsanto, NutraSweet executives telling them about the discovery. He had no concern about divulging military secrets as he knew that these Monsanto executives would have no trouble convincing government officials to give the patent and use of neotox-II to Monsanto. “After all,” he reminded himself, “Monsanto executives have had so many official government positions, we essentially run the government!”

Putting together safety data for the FDA was not a serious challenge. The mixture of neotox-II and standard Monsanto fairy dust led to the production of volumes of safety data. The fairy dust did not change the chemical structure of neotox-II, but did cause the name change to “neotame.”

All links between neotame and neotox-II were destroyed...except two. The first clue to the relationship between neotox-II and neotame is the symbol used to identify neotame in the marketplace: It is a picture of the back of the left hand of the former Monsanto scientist, with the finger upon which sweet neotame was first discovered, fully extended for all to see.

The only other link to neotox-II is the secret Monsanto source relaying this story.

Aspartame destroys diabetics

H.J. Roberts, MD, has exhaustively reviewed the metabolic mechanisms of aspartame and their effect on diabetics. He has concluded that the artificial sweetener is extremely destructive to the diabetic. “In my experience and research over the past 20 years, numerous patients with known diabetes and hypoglycemia (“low blood sugar attacks”) have suffered serious metabolic, neurologic, ocular, allergic and other complications that could be specifically attributed to using aspartame products. They include the loss of diabetes control, the apparent precipitation of diabetes, the aggravation or simulation of diabetic complications (particularly neuropathy and retinopathy), the intensification of hypoglycemia, and a profound gain of weight — with dramatic improvement after avoiding aspartame, AND their predictable recurrence shortly after resuming these products,” wrote Dr. Roberts in a letter to the British Medical Association. Meanwhile, The American Diabetic Association continues to recommend aspartame as safe for diabetics. Dr. Roberts is the author of Aspartame Disease: An Ignored Epidemic.

Editor’s comment: An exercise in self-reliance

Admittedly, the research we had already conducted on aspartame convinced us that it is devastating to the human body. Since millions of people consume this government-approved, carcinogenic, mutagenic, neurotoxic, non-nutritive synthetic sweetener every day, we were also convinced aspartame is helping to destroy entire nations. That is the real reason this pamphlet had to be published.

We were not, however, prepared to find absolutely nothing in support of aspartame approval. All claims in support of aspartame use are, at best, utterly false; all publicly available reports in support of aspartame safety actually prove aspartame toxicity—if one takes the time to read them instead of taking for granted what government and industry tell you they say.

We published on pages 6-7 several frequently asked questions about aspartame as posed by the International Food Information Council (IFIC). What the IFIC says about aspartame is what we are supposed to believe about it. The IFIC’s statements are so irresponsible and scientifically unsupportable, they had to be refuted.

The editorial intent of The Artificially Sweetened Times is clear. We want people to (a) stop using aspartame and convince those close to them to stop using aspartame immediately, (b) conduct further research, (c) begin the process of reclaiming their life through an aspartame detox program, and, (d) help remove aspartame, neotame and sucralose from the world’s food supply.

Since we didn’t have to spend much time reviewing credible pro-aspartame science (because there isn’t any), we had time to research the history of sweeteners. Quite surprisingly, “civilized” man has been a slave to his sweet tooth since discovering sugar. So enslaved, in fact, he has been willing to enslave millions to ensure his supply of it.

Imagine our surprise when a revisionist review of history revealed that international commerce from the 1300s to the late 1800s was as influenced by the demand for refined sugar as 20th century commerce is influenced by the demand for gasoline.

Supply and demand: People demand artificial sweeteners, therefore there are suppliers.

But one must wonder, “Why would government approve as safe something that is so obviously unsafe?”

If government can approve one deadly poison for human consumption, what other government-approved poisons are we consuming?

The answers are more than a little disconcerting. We should use the aspartame example as an exercise in self-reliance. We are now equipped to make an informed choice regarding our consumption of aspartame. Government approval of this substance will be of no consequence when enough of us stop buying it. (DWH)
The stakes are very high—for consumers and producers alike

For reasons difficult for most people to fathom, sugar substances known for their ability to damage the human body have been allowed into our food supply as sugar substitutes—with the blessing of government approval.

The stakes are very high—both for those who consume these toxic substances and for those who produce them and promote their use as “safe.”

Consumers who fail to recognize the dangers inherent in aspartame use can look forward to several years of failing health and painful deaths. Worse yet, those in the child conceiving/child rearing years run the risk of prenattally exposing their babies and their growing boys and girls to these toxic substances leaving them vulnerable to lifetimes of learning disabilities, behavioral problems, physical handicaps and chronic illnesses.

For the producers and promoters, the stakes are also high because, if the American people were to demand justice, many fortunes would be lost and a lot of people would spend the rest of their lives in prison for what they have done to harm trusting consumers.

One of the most telling examples of how high the stakes are for the producers and promoters lies in the about face performed by one of aspartame’s most ardent and credentialed critics. Dr. Richard Wurtman of Massachusetts Institute of Technology published several scientific studies on the relationship between dietary phenylalanine and brain function. He testified as to his findings before Congress in 1985. He has since recanted all his work in this area though his findings are supported in other published reports. Dr. Wurtman claims to have been pressured into discontinuing his work relative to aspartame and brain dysfunction.

From Congressional Record:

The Chairman: As I understand it, the amino acid components of aspartame occur naturally in foods. Therefore, why would not individuals show the same effects from consumption of aspartame as they would from consumption of these same amino acids in other food products?

Dr. Wurtman: When you have aspartame, you are not obtaining any of the other amino acids which are present in all proteins (aspartame is not a protein) that block phenylalanine’s ability to pass from the blood to the brain. So even a small increase in blood phenylalanine will cause a very large increase in brain phenylalanine. To my knowledge, no other food that mankind has ever eaten causes the changes in brain chemistry that are provided by aspartame.

[emphasis added]

The Chairman. In view of the fact that phenylalanine occurs naturally in foods, does it follow, that you would recommend that these foods be labeled, also?

Dr. Wurtman. No, no. Because once again, the phenylalanine in foods has virtually no effect on brain phenylalanine levels because those foods also have the other amino acids that keep it from getting into the brain.

Sales of aspartame have generated tens of billions of dollars in revenue for producers. These sales have in turn generated additional billions in revenue for doctors and pharmaceutical companies who provide services, drugs and surgeries to people suffering the ill-affects of “Rumsfeld’s disease.”

The cycle will continue: Aspartame producers, doctors and pharmaceutical companies will get richer and more powerful politically as we become sicker and sicker as an aspartame-consuming nation.

Since government cannot be relied upon to ban the use of aspartame in foods, beverages and medicines and; since industry cannot be counted on to remove profitable products just because they are harmful to consumers, then there is only one thing left for us to do:

Boycott all products containing aspartame and boycott the companies that produce them.

Splenda: Not so splendid

Because people are talking and using The Artificially Sweetened Times to inform one another of the dangers of aspartame, many are switching to Splenda, the trade name for sucralose.

“Made from sugar,” it says on the Splenda package. Sucralose is a chemical perversion of sugar. It is produced by chlorinating sugar, replacing three atoms from the hydroxyl group with three chlorine atoms.

Originally discovered in 1976 by researchers working for British sugar refiners Tate & Lyle, Johnson & Johnson began developing sucralose for the marketplace in 1980. Canada became the first country to approve sucralose for use in 1991 and Diet RC Cola was the first American product to use sucralose after it achieved U.S. approval in 1998.

As with aspartame and now neotame, there are no long-term studies to indicate sucralose’s safety in humans and has been found to contain measureable amounts of lead, arsenic, methanol and chlorinated mono and disaccharides. Animal studies have shown potential problems associated with sucralose intake such as shrunken thymus glands, enlarged liver and kidneys, reproductive anomalies and decreased red blood cell counts.

The unfortunate reality is that we no longer have any idea what type of sweetener is contained in manufactured foods. FDA labeling requirements encourage product manufacturers to disguise the sweeteners they are using with pseudonyms. Some artificial sweeteners are worse than others and all are unsafe in varying amounts depending upon our metabolism and general health. The only way to be certain that the sweet foods and drinks you are consuming contain no adulterated sweeteners is to make them yourself.

Note: Citizens for Health chairman and consumer advocate attorney James Turner petitioned the FDA April 3, 2006, to revoke its approval of sucralose on grounds that it is not safe for human consumption. The FDA has chosen to reject Turner’s petition.
Anecdotes in support of removing aspartame from our food supply

Journal of the Diabetic Association of India
Oct.—Dec., 1995

A thoroughly referenced and researched report entitled, “A HEALTH ALERT: Emerging Facts About Aspartame,” by researchers Dr. J. Barua, an associate ophthalmologist and Dr. A. Bal of the S.L. Raheja Hospital, Bombay, was published in the Journal of the Diabetic Association of India (Oct.—Dec., 1995).

These physicians were alarmed at the dramatic increase in the use of aspartame in the U.S., and how it’s been marketed to diabetics regardless of the dangers and adverse effects of aspartame as established by sound science. “Since in India, its [aspartame’s] use is still limited, we felt it prudent to spread this important information to our colleagues and to the people, so as to prevent its extensive use in the future,” Drs. Barua and Bal stated in the report’s introduction.

The report reviewed 78 papers published in esteemed medical journals from all over the world between 1974 and 1995. Drs. Barua and Bal concluded that, of aspartame’s three components, aspartic acid (40%), phenylalanine (50%) imbalance the body to produce toxic results and methanol (10%) is itself a deadly poison.

The researchers, puzzled that a product so obviously “disharmonious” in the body would enjoy such popularity among consumers, proposed that aspartame’s clean taste, its claims to be nonfattening, consumer confidence in aspartame safety and the political power of a $multi-billion industry are the reasons for its market-place success.

“To conclude,” Drs. Barua and Bal logically observed, “it must be kept in mind that aspartame is not an essential, life-saving drug but a food additive meant to pamper our sweet tooth. Moreover, it does not fulfill its own objectives i.e. controlling weight gain or diabetes.

“We suggest that, until such time that it is proved conclusively that there are no health hazards on prolonged use of aspartame, it will be prudent to refrain from its use.”

Congressional Record
Tuesday, May 7, 1985

Aspartame was approved for use in dry goods in 1981; for use in beverages in 1983. Dr. John Olney and Attorney Jim Turner’s proposed amendment to the FDA’s approval of aspartame in beverages, sponsored by Senator Howard Metzenbaum (D-Ohio), sparked opposition. All the amendment called for was to have the amount of aspartame indicated on product labels. The Congressional Record reveals how corporate profit trumps public health and safety.

Mr. METZENBAUM. “...Now, the National Soft Drink Association in August, 1983, thought that aspartame should not be used in soft drinks. But so many of my colleagues have been called recently and told that they should not vote for this amendment. Yet this amendment does not provide that the product should not be sold, only that people who use the product have a right to know how much of it they are consuming.”

(Metzenbaum then reads an excerpt from an FDA memo dated May 19, 1981. “The first and primary agenda item relates to the brain tumor issue. This was the point on which the Public Board of Inquiry concluded that safety had not been shown,” the memo stated.

Mr. METZENBAUM. “...So what we are talking about is, do we agree that there will be labeling indicating how much aspartame is in the product or do we close our minds to all the questions surrounding this product and turn our backs on the consumers’ right to know.

“I am frank to tell you I stand on the floor and do not have all the answers. But I believe that this body has some responsibility to the children, grandchildren and the adults who are consuming these soft drinks. And all I am asking for here today is that which I consider to be the very minimum, to tell the people who are drinking these diet sodas how much aspartame is in the product.

“My amendment is no big deal. It is not going to save the world. It is not going to solve problems in Nicaragua and it is not going to balance the budget. But it is one little step in the right direction. We will be providing people with the minimum amount of information they deserve about a substance that poses many unanswered questions about basic consumer health and safety.”

The amendment did not pass. Though the FDA, members of Congress, the scientific community and laypeople had concerns about the safety of aspartame and its link to brain tumors, the powerful aspartame lobby was able to defeat this seemingly innocuous bill.

Rumsfeld’s disease?
The spectrum of chronic disorders linked to aspartame have been generically labeled “aspartame disease.” This disease has become so pervasive it deserves a new name. Since Donald Rumsfeld is responsible for aspartame approval, The Artificially Sweetened Times refers to symptoms associated with aspartame poisoning as ‘Rumsfeld’s disease.’
NEOTAME

In 1995 Monsanto sold its sweeter division to J.W. Childs Partnership—aspartame’s current owner. We can imagine that the sale was mostly in name because aspartame was becoming a public relations nightmare for the high-profile Monsanto—a company whose business is manipulating the natural world with chemical killers and genetically modified organisms.

In 1998 Monsanto petitioned the FDA for approval of its new monster molecule neotame. Based upon the aspartame formula, Monsanto added 3-dimethylbutyl (listed by the Environmental Protection Agency as a most hazardous chemical). The addition of this one little chemical allows Neotame to be some 13,000 times sweeter than sugar.

The FDA approved Monsanto’s newest sweet creation—despite formally submitted objections by the Aspartame Consumer Safety Network and other opponents of bio-engineered sweeteners. Long-term effects of this product are unknown. We believe the FDA does not require that neotame be specifically identified on product labels because the amount needed to sweeten a product by percentage falls beneath labeling requirements or may be identified as one of the “natural flavors.”

Aspartame evolves into....

Consumption of aspartame linked to fetal brain damage

June 17, 1985
WASHINGTON (UPI)—Two pediatric and genetic researchers say many pregnant women who consume aspartame, the popular sugar substitute sold as NutraSweet in soft drinks and 70 other products, may have babies with permanent brain damage.

In a contention rejected by NutraSweet’s manufacturer, one of the scientists, Dr. Louis Elsas of Emory University in Atlanta, also said he believes a key aspartame component can cause similar damage to infants if they ingest it in the six months following birth. “There’s no reason why the pregnant female should be taking aspartame,” Elsas said, “and there’s no reason why a child less than six months old should be taking aspartame. Period.” He said the damage may not show up for years.

Meanwhile, lawyers for a five-year-old boy who a research team said became, “uncontrollable and wildly emotional” after drinking NutraSweet products have filed a $2 million damage suit against the product’s manufacturer, G.D. Searle Co. of Skokie, Ill.

“The suit, filed [May, 1985] in Washington [D.C.], charges that aspartame is an “unreasonably dangerous and harmful food additive” that causes permanent affects when combined with glucose and given to children under six years old.

Aspartame a deadly neurotoxin says former FDA investigator

Former FDA investigator Arthur Evangelista, in a letter “To all my neighbors of all nations...” stated, “The problems with aspartame include not only the biochemical nature of this toxin but....also sheds light on the political nature of the players involved.”

Evangelista believes aspartame’s FDA approval was achieved as a result of FDA employees placing the interests of politicians and corporate lobbyists over public health and consumer safety.

“What I can tell you regarding toxicology, histology and biochemistry is that aspartame is neurotoxic. Its components easily transcend the blood-brain barrier, interfering with normal nerve cell function. This affects the glutathione and calcium mechanisms in place, destroying nerve cell integrity. The methanol then breaks down into formaldehyde-formic acid components, which denatures/mutates the DNA—a known scientific fact. The subsequent result from this interaction and from isolates of genetically-modified amino acids and methanol is nerve cell necrosis and subsequent organ system degradation.”

Evangelista cites the 1977 “Bressler Report” describing G.D. Searle’s “despicable” lab practices. This FDA report led to the company being indicted for fraud (The full report and Evangelista’s statement are available at www.dorway.com).

The aspartame approval process “...was further corrupted by politicians involved with corporate constituents. Another name for this, of course, is ‘bribery,’” Evangelista said.

Vaccination Liberation

Did you know that aspartame is listed as an ingredient in package inserts for the oral cholera and typhoid vaccines?

“When we give government the power to make medical decisions for us, we, in essence, accept that the state owns our bodies.” ~U.S. Rep. Ron Paul (R-Texas)

www.vaccinetruth.com

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Forty-two-year NCI study links aspartame to lymphoma, leukemia

On May 14, 2009, the National Cancer Institute (NCI) announced its support of a study confirming the link between formaldehyde exposure and cancer. According to Laura E. Beane Freeman, Ph.D., of the NCI, in an extended analysis of workers exposed to formaldehyde during their careers, formaldehyde was associated with a 37 percent increased risk of death from lymphoma and leukemia.

“The overall patterns of risk seen in this extended follow-up of industrial workers...are consistent with a causal association between formaldehyde exposure and cancers of the blood and lymphatic system and warrant continued concern,” NCI researchers reported online in the Journal of the National Cancer Institute.

According to Kristina Fiore of MedPage Today, “Since the 1980s, the Institute has studied a cohort of 25,619 workers employed before Jan. 1, 1966 in 10 industrial plants that produced formaldehyde in molded-plastic products, photographic film, decorative laminates and plywood.”

The formaldehyde cohort, originally assessed through Dec. 31, 1979, was then updated through Dec. 31, 1994. Researchers have not yet identified the mechanism by which formaldehyde causes leukemia but, Dr. Beane Freeman noted, the pattern is consistent with “a possible causal association, with the largest risks occurring closer in time to relevant exposure.”

She called for further study to “evaluate risks of these cancers in other formaldehyde-exposed populations and to assess possible biological mechanisms.”

“The NCI study confirms the work of Dr. Soffritti,” said Mission Possible Director Dr. Betty Martini. “Now all we have to do is get the NCI to realize that the ‘biological mechanisms’ that cause formaldehyde-induced cancers from workplace exposures are likely to be identical to the ‘biological mechanisms’ that cause aspartame-induced cancers. Fortunately, we can show NCI researchers how formaldehyde from aspartame causes lymphoma and leukemia in both lab rats and people,” Dr. Martini added after citing several studies from the 1970s to present.

Ironically, the NCI and the National Institutes of Health, which also endorse the study, have both recently concurred with the FDA and EFSA position that aspartame is a safe, government approved, non-nutritive, non-caloric artificial sweetener (see page 15).

Science has demonstrated the neurotoxicity and carcinogenicity of aspartame in countless studies since the 1970s (most of which are posted to the websites at www.dorway.com and www.mpwhi.com). What science has unerringly “demonstrated” for 30 years is confirmed by the case histories of people who have suffered chronic ailments and even died from the myriad potential complications of aspartame poisoning. Funny, isn’t it, that 30 years of epidemic, aspartame-induced suffering may come to an end if the NCI were to announce that workplace formaldehyde and dietary formaldehyde may have the same affect on the body with regard to the development of the same types of cancers.

### Questions:

1. If aspartame begins to break down into methanol, a known neurotoxin, at 86 degrees F., how can aspartame be safe for humans whose healthy bodies operate at 98.6 degrees F.?
2. Aspartame is comprised of 40 percent aspartic acid, 50 percent phenylalanine and 10 percent methanol. In the body it converts to methanol (a neurotoxin), then formaldehyde (embalming fluid), then formic acid (insecticide) and DKP (brain tumor agent). How can this substance be safe if all its metabolic conversions are unsafe?
3. Why are most people who drink “diet” pop sweetened with aspartame chronically overweight? Why do slender people who drink “diet” pop sweetened with aspartame have a tendency to gain weight?
4. Why would the FDA list “death” as a “symptom?” Isn’t “death” the cessation of symptoms?
5. Aspartame is described as an “excitotoxin” because it interacts with other drugs. Why does the FDA list it as a benign food “additive” when it could interact with a person’s medications with potentially lethal results?
6. The vast majority of product complaints (between 75 percent and 85 percent) received by the FDA are aspartame related. Why wouldn’t the FDA think this is important?
7. Donald Rumsfeld was the secretary of defense before using his political influence to achieve FDA approval for aspartame as CEO of G.D. Searle. Was aspartame approval considered a matter of national security? Is aspartame’s continued presence in vitamins, drugs and the food supply related to Rumsfeld’s behind-the-scenes influence as a “player” in D.C. power politics?
8. The American people can render answers to all the previous questions moot by simply boycotting products containing aspartame and the companies who produce and market them.
Help remove aspartame from the world’s food supply

Once you understand the toxic reality of aspartame, it is easy to see the damage it is doing to ourselves and those close to us. Now that you know the truth about aspartame, following are ideas for actively warning others.

- Distribute the The Artificially Sweetened Times throughout your community.
- If you see someone with a diet drink, ask if they have had any of the typical aspartame side effects.
- Refer people to the Mission Possible website at www.mpwhi.com or its phone number 770-242-2599.
- Tell your doctor about the scientific research available proving the negative side effects of aspartame.
- Return all food products with aspartame, opened or unopened, to your grocer. Tell him/her the products make you sick. The grocer can return them to the manufacturer for a store refund. The manufacturer should get the message. So will the grocer.
- Spread the word on computer networks and by writing letters to the editors of your local newspapers.
- Publish articles in newsletters at your church, place of work, or neighborhood association.
- Talk to schools and daycare centers. Offer to speak at parent-teacher meetings.
- Register a complaint with the FDA about aspartame poisoning.
- Contact your local, state, and federal government representatives.
- Set a personal example for health and wellness.

Resources:

Books
Russell Blaylock, MD—Excitotoxins: The Taste That Kills
Russell Blaylock, MD—Health and Nutrition Secrets to Save Your Life
H. J. Roberts, MD—Aspartame Disease: An Ignored Epidemic
H. J. Roberts, MD—Sweet’ner Dearest
H. J. Roberts, MD—Aspartame (NutraSweet): Is It Safe?
Michael Barbee—Politically-Incorrect Nutrition
Dennis Remington, MD and Barbara Higa, RD—The Bitter Truth About Artificial Sweeteners
Dr. Richard Schulze—Common Sense Health and Healing: 20 Simple, Easy and Powerful Steps to Create a New Healthy Life
Dr. Richard Schulze—Healing Liver and Gallbladder Disease Naturally

DVDs:
Sweet Misery: A Poisoned Planet and Sweet Remedy: The World Reacts to an Adulterated Food Supply—Sound and Fury Productions (see ad page 20).

Websites:
www.dorway.com - Aspartame activism and document archive
www.aspartamekills.com - Mission Possible Nation’s Capital
www.russellblaylockmd.com - Dr. Russell Blaylock’s website
www.sunsentpress.com - Dr. H.J. Roberts’s website
www.holisticmed.com/aspartame - Aspartame Toxicity Center
www.mercola.com - Dr. Joseph Mercola’s alternative health website
www.wnho.net - World Natural Health Organization
*Dr. Blaylock’s aspartame detox is outlined at www.wnho.net/wtdaspartame.htm

The Idaho Observer

The dividends from activism can pay out over many lifetimes. The Idaho Observer is a monthly, 24-page newspaper dedicated to truth in journalism. For a sample copy* call (208) 255-2307 or email: observer@coldreams.com

www.idaho-observer.com

Timeline from page 21

(General Foods is a major customer of NutraSweet). Burson-Marsteller, Searle’s public relation firm (which also represented several of NutraSweet’s major users), immediately hires Hayes as its senior scientific consultant.

- Fall 1983—The first carbonated beverages containing aspartame are sold for public consumption.
- November 1984—Center for Disease Control (CDC) publishes its “Evaluation of consumer complaints related to aspartame use.”

- 1993—FDA approves expanded uses for aspartame to include foods that are always heated above 86 degrees F.
- 1995—Monsanto sells its sweetener division to J.W. Childs Partnership
- 1996—Monsanto petitions FDA for approval of neotame, reportedly 13,000 times sweeter than sugar.
- July 5, 2002—FDA approves neotame despite formal objections by scientists, physicians and activists.

Jim Turner, a long time Washington D.C. consumer crusader, began his public advocacy career as one of “[Ralph] Nader’s Raiders.” Food safety and the regulatory process were subjects Jim Turner knew a lot about. In the late 60s, he wrote the influential and best selling expose of the food industry called “The Chemical Feast”. Turner established his reputation as a regulatory pit-bull when he fought to have cyclamate taken off the FDA’s Generally Recognized As Safe (GRAS) list. His crusade ultimately led to cyclamate’s removal from the market in 1970.

Turner committed himself to fighting against aspartame’s approval. He took on this battle largely at his own expense because he was convinced that influence-peddling in Washington was the reason behind aspartame’s approval.

Note: A detailed aspartame timeline is available at www.holisticmed.com/aspartame/history.faq. This timeline is an excellent reference from which to begin a comprehensive aspartame investigation or just get a solid understanding of aspartame politics and biochemistry.
Billions of victims or billions of activists

Congress and regulatory agencies have reviewed enough science to know aspartame is a poison. The aspartame-related horror stories all around us prove that we should not subject ourselves to, or be secretly exposed to, aspartame.

If Congress, the FDA, the CDC, HHS and the EPA (and the president, vice-president, the attorney general and [certainly] Donald Rumsfeld) all know that aspartame is poisoning the American people—and nothing is being done; if consumer advocates and trade organizations know aspartame is poisoning the marketplace where aspartame-laden products are purchased—and nothing is being done, then, who is left to keep us from being poisoned?

The painful yet empowering truth about aspartame is that we, the people of the world, are on our own. Right now we are billions of victims. If aspartame is to be removed from our food supply, then we must transform ourselves into activists whose goal is to remove the demand for aspartame by educating everyone we know as to the power politics and biochemistry behind the marketplace success of aspartame.

Aspartame Excusesmatic

Even though The AS Times provides ample proof that aspartame is a neurotoxic and potentially lethal drug, many people prefer to argue that aspartame is “safe” based upon one or more of the following points:

1. It was approved by the FDA
2. Beverage giants would not add poison to their products
3. The American Dietetic, Diabetic and Medical associations endorse it
4. It is the most tested product in history
5. It helps people control their weight

Each of the above is easily refuted:

1. It is common knowledge that FDA-approved drugs must later be banned because they kill people; about half of all FDA-approved drugs have serious or fatal side effects (OMNI magazine, 2/94).
2. The National Soft Drink Association opposed aspartame approval due to its proven toxicity (Congressional Record, 5/7/85).
3. Trade associations are created and funded by special interests to promote special interests and do not qualify as corporate-neutral third parties.
4. On 12/29/96, 60 Minutes reported that, of 164 aspartame studies it found and reviewed, 74 were from aspartame producers showing aspartame was safe; 83 of the remaining 90 studies from corporate-neutral labs reported safety concerns.
5. Aspartame increases the body’s craving for carbohydrates—a recipe for weight gain.

Squirrel Sense

A friend and I were having lunch at the Beach House restaurant in Sandpoint, Idaho, early in October, 2000. We would have ordinarily dined outside on the deck overlooking magnificent Lake Pend Oreille as the empty tables were all set with tablecloths, water glasses and silverware. However, a fall chill was in the air so we decided to enjoy lunch at a table inside.

The hostess seated us at a table that allowed us to look past the deck to the mountains beyond the lake. My friend and I had slipped into conversation when we were interrupted by the antics of a squirrel that had hopped up onto the empty deck table closest to ours but on the other side of the picture window.

The squirrel hopped, as squirrels do in their uniquely squirreline manner, to the center of the table. He began sniffing about the little white ceramic box universally used by restaurants to hold paper packets of the various sweetener options. In this case the options available were refined white sugar, Equal, NutraSweet, Sweet and Low and brown paper packets labeled “Raw Sugar.”

By now our conversation had stopped as we were being totally entertained by the antics of the squirrel. He methodically grabbed a packet of each sweet option in both hands, sniffed it momentarily then threw it a few inches to the left or right, then picked up and sniffed tested a different packet.

Our squirrel rifled through all the packets in this fidgety, yet methodical fashion until he came to the raw sugar. He picked it up and sniffed it over and over again, turning it around several times to sniff the entire packet. Then he licked it a couple of times, nibbled at the paper and licked it again.

Apparently satisfied, he threw it off the table, jumped off the table himself, picked the raw sugar packet up in his little hands, put it in his mouth and hurriedly disappeared under the deck with his booty.

The entire show took less than five minutes, but our conversation about it lasted much longer. We even told the waiter—but he seemed more irritated over the little rodent’s bad table manners than the dietary implications of what we witnessed.

It was obvious to us that, while performing the yearly task of gathering food for the winter, our squirrel had chosen the raw sugar over the other options because he was smart enough to discern, with one quick sniff, that they were poisonous and, therefore, not appropriate items to store for winter use. (DWH)