The United States of America has concerns with respect to the World Health Organization’s (WHO) plan to conduct overlapping reviews of the food additive aspartame (INS 951, CAS No. 22939-47) in two WHO bodies: the International Agency for Research on Cancer (IARC) and the Joint Food and Agriculture Organization/WHO Expert Committee on Food Additives (JECFA). In our opinion, JECFA is better suited to assess any risk associated with the consumption of aspartame because it considers all relevant toxicological endpoints, including carcinogenicity. Furthermore, JECFA is the primary source of scientific advice for the Codex Alimentarius Commission (CAC) pertaining to food additives, which is aspartame’s primary use and thus important to Codex Member States that base their food safety measures on Codex Alimentarius food safety standards. For these and other reasons outlined in the US Letter to WHO on Aspartame, we believe that a JECFA review of aspartame would have a greater impact on food safety, and public health, than one conducted by IARC.

On August 12, 2022, Mara Burr, director of the Office of Multilateral Relations in the Department of Health and Human Services’ Office of Global Affairs, sent a letter outlining these concerns to the WHO. She received a reply on September 29, 2022. For transparency, the FDA is posting both documents. See letters appended below.
August 12, 2022

Dr. Zsuzsanna Jakab
Deputy Director-General
World Health Organization
Avenue Appia 20
1211 Geneva 27
Switzerland

Dear Deputy Director-General:

I want to highlight the concerns of the United States of America with respect to WHO’s plans to conduct overlapping reviews of the food additive aspartame (INS 951, CAS No. 22839-47-0) in two World Health Organization (WHO) subsidiary bodies: the International Agency for Research on Cancer (IARC) and the Joint Food and Agriculture Organization/WHO Expert Committee on Food Additives (JECFA). IARC is scheduled to review aspartame during its June 6-13, 2023, meeting in Lyon, France, and JECFA will review aspartame as part of the 96th JECFA meeting in Geneva, Switzerland from 27 June to 6 July, 2023.

In our opinion, a concurrent review of aspartame by both IARC and JECFA would be detrimental to the scientific advice process and should not occur. We believe that JECFA is better suited to assess any risk associated with the consumption of aspartame and should be WHO’s lead entity in assessing and providing public health recommendations about the safety of aspartame in food. A JECFA assessment considers all relevant toxicological endpoints, which include, but are not limited to, carcinogenicity. JECFA reviews all available data, including both public and non-public proprietary data, whereas an IARC recommendation would be limited to the review of public data alone. Thus, an IARC review of aspartame, by comparison, would be incomplete and its conclusions could be confusing to consumers. WHO should only issue public health recommendations based on an assessment of all available data.

1 https://monographs.iarc.fr/monographs/volume-134/
4 At the 52nd session of the Codex Committee on Food Additives (CCFA52) in September 2021, aspartame was added to the “Priority list of substances proposed for evaluation by JECFA” at the highest priority level of 1 (See Appendix XI of the report of the 52nd session of CCFA, REP21/FA: https://www.fao.org/fao-who-codexalimentarius/sh-proxy/en/?lnk=1&url=https%3A%2F%2Fworkspace.fao.org%2Fsites%2Fcodex%2FMeetings%2FCX71-52%2FFinal%252Freport%252FREP21_FAE_revised%2Bon%2B14%2BOctober.pdf
JECFA is the primary source of scientific advice for the Codex Alimentarius Commission (CAC) pertaining to food additives and has over 60 years of experience reviewing the safety of food additives, which is aspartame’s primary use. In addition, the review of aspartame by JECFA was proposed through an open and transparent process at the 52nd session of the Codex Committee on Food Additives (CCFA) in 2021 and subsequently was endorsed by the full CAC, which is comprised of 188 Member Countries and the European Union as a Member Organization. The reviews conducted by JECFA are key to public health decisions made by FAO, WHO, and Codex Member States, that, in particular, base their food safety measures on Codex Alimentarius food safety standards. Consequently, a JECFA review of aspartame would have a greater impact on food safety, and thus public health, than one conducted by IARC.

For the above reasons, and the need for a complete review of aspartame with clear recommendations, we urge WHO to identify JECFA as the sole assessor of aspartame.

If WHO determines that there is utility in IARC and JECFA conducting concurrent reviews, we strongly recommend that IARC delay publication of its findings until after it consults with JECFA so that WHO can coordinate its risk communications to avoid announcing different conclusions by two WHO subsidiary bodies. We are extremely concerned that conflicting determinations presented by IARC and JECFA would seriously undermine the confidence of the scientific process for both bodies and could further inflame the current climate of public skepticism about the validity of science and the scientific process.

The WHO is well aware of the problems that can arise from conflicting scientific determinations and agreed on a policy at the 60th Governing Council (as requested by WHA70.12) that indicated that duplicative reviews with the potential of conflicting determinations by WHO subsidiary bodies should be avoided. In our view, WHO failed to follow this policy for aspartame because the risk of conflicting reviews was not avoided. We urge the WHO to strictly follow this policy (as requested by Member States) in the future to avoid duplicative and potentially conflicting reviews, especially in the case of substances used in food. If it is WHO’s opinion that the policy determined at the 60th Governing Council was followed in the case of aspartame, we recommend a review and appropriate revision of the policy with the aim of effectively preventing conflicting determinations.

In summary, we are deeply concerned that the simultaneous evaluation of the carcinogenic risk of a substance in food by two WHO bodies is duplicative and creates significant potential for inconsistent outcomes. The United States strongly urges WHO and its subsidiary bodies avoid duplication and identify JECFA the sole reviewer of the potential carcinogenic risk of aspartame in food. If it is not possible to avoid duplicative reviews of aspartame by IARC and JECFA, we request that IARC postpone publication of its review until they can consult with JECFA so that

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6 See paragraph 7 of GC/60/13 of the 60th Session of the WHO Governing Council in May 2018: https://events.iarc.who.int/event/46/attachments/110/483/GC60_13_CoordinationWHO.pdf
the agencies can avoid conflicting determinations and provide the public with one consistent, reliable public health recommendation.

Respectfully,

Mara M. Burr, JD, LLM.
Director, Office of Multilateral Relations
Office of the Secretary
Office of Global Affairs

cc: Dr. Soumya Swaminathan, WHO Chief Scientist
    Dr. Elisabete Weiderpass, Director, IARC
29 September 2022

Dear Ms Burr,

I would like to thank you for your letter dated 12 August 2022, outlining your concerns regarding the World Health Organization’s (WHO) implementation of the re-evaluation of the food additive aspartame.

Aspartame is commonly used since the 1980s. Its health effects have been evaluated in 1981 by the WHO/Food and Agriculture Organization (FAO) Joint Expert Committee on Food Additives (JECFA), a programme of risk assessment for chemicals and additives in food. The International Agency for Research on Cancer (IARC) Monographs, a programme of cancer hazard identification conducted according to a published Preamble, has never analysed aspartame. Given the availability of new research results, aspartame was recommended as high priority for evaluation by both the IARC Monographs programme and the JECFA (the priority list of substances proposed for evaluation by JECFA).

In line with the interim standard operating procedure (SOP) established for communication and collaboration between IARC and other WHO programmes, IARC and JECFA have been discussing since October 2021 the complementary evaluations of aspartame by the respective programmes. The two evaluations are complementary. IARC will assess the potential carcinogenic effect of aspartame (hazard identification), while JECFA will update its risk assessment exercise, including the reviewing of the Acceptable Daily Intake and aspartame diet exposure assessment.

The IARC evaluation outcomes will be integrated into the report of WHO/FAO JECFA after independent and transparent review by its experts. IARC’s conclusion represents only a part of JECFA’s comprehensive assessment, as IARC will only address the carcinogenicity of aspartame, other potential adverse effects will be addressed by JECFA, as well as the exposure assessment and the final risk characterization to the consumer of food products containing aspartame. It is understood that food safety management and risk management decisions should be based on the comprehensive scientific advice provided by the WHO/FAO JECFA.

cc: Dr Soumya Swaminathan, WHO Chief Scientist
    Dr Elisabete Weiderpass, Director, IARC
The two programmes are working closely together to prevent divergent scientific opinions. Both teams exercise great vigilance to identify at early stage any potential source of divergence between the two scientific opinions. One of the first sources of divergence is the exclusion by IARC of unpublished scientific data. As one step to address this source of divergence, IARC is now willing to review all publicly available information, including unpublished studies that are made available by public agencies.

IARC’s hazard identification is planned to take place from 6 to 13 June 2023, and JECFA’s risk assessment from 27 June to 6 July 2023. The sequence of these evaluations and the close collaboration between the IARC Monographs and the WHO/FAO JECFA Secretariat will allow a comprehensive evaluation of the health effects of aspartame consumption based on the latest available evidence and facilitate communication efforts during and following the evaluations.

Yours sincerely,

Dr Zsuzsanna Jakab
Deputy Director-General