



Note: This letter was sent to additional members of Congress.

June 3, 2008

The Honorable Rosa L. DeLauro
2262 Rayburn House Office Building
United States House of Representatives
Washington, DC 20515

Dear Rep. DeLauro:

The undersigned physicians and researchers are concerned about the effects of food ingredients, especially food dyes, on children's behavior, including children with hyperactivity and attention-deficit/hyperactivity disorder (ADHD), and are troubled by federal inaction.

The first hints that food ingredients could impair children's behavior came in the mid-1970s, when Dr. Ben Feingold publicized his clinical findings. His contentions not only generated great public concern, but also spurred scientists to conduct scientific research. Many of the studies done over the years, in the U.S. and abroad, have confirmed that some children are adversely affected by foods, with food dyes being the ingredients most intensively studied. One of the early studies was actually funded by the U.S. Food and Drug Administration (FDA),¹ and two recent studies were funded by the Food Standards Agency of the British government.²

A 2004 meta-analysis of controlled studies concluded that "our results strongly suggest an association between ingestion of [artificial food colorings] and hyperactivity."³ The researchers stated that "society should engage in a broader discussion about whether the aesthetic and commercial rationale for the use of [artificial food colorings] is justified."

¹ Weiss B, Williams JH, Margen S, et al. Behavioral responses to artificial food colors. *Science*. 1980;207:1487-8.

² McCann D, Barrett A, Cooper A, et al. Food additives and hyperactive behaviour in 3-year-old and 8/9-year-old children in the community: a randomized, double-blinded, placebo-controlled trial. *Lancet*. 2007 Nov 3;370:1560-7. Published online Sept. 6, 2007. The same research group published a study of 3-year-olds that also found an effect of a mixture of four dyes and sodium benzoate on hyperactivity. Bateman B, Warner JO, Hutchinson E, et al. The effects of a double blind, placebo controlled, artificial food colourings and benzoate preservative challenge on hyperactivity in a general population sample of preschool children. *Arch Dis Child*. 2004;89:506-11. The authors stated: "We believe that this suggests that benefit would accrue for all children if artificial food colours and benzoate preservatives were removed from their diet."

³ Schab DW, Trinh N-H T. Do artificial food colorings promote hyperactivity in children with hyperactive syndromes? A meta-analysis of double-blind placebo-controlled trials. *J Dev Behav Pediatr*. 2004;25:423-34.

In contrast to the scientific findings, the FDA publishes (jointly with the food industry's International Food Information Council) a pamphlet on "Food Ingredients and Colors" that asserts that there is "no evidence" of a link between dyes and hyperactivity.⁴ Yet the British government is vigorously urging the food industry to stop using the dyes implicated as problems.⁵ Britons are benefiting from the changes that Kraft, McDonald's, Kellogg, Mars, and other companies are making in Britain. Unfortunately, those multinational companies are not making those changes in the United States. In addition, a committee of the European Parliament recently voted to ban dyes from foods consumed by babies and small children and to require a warning notice on foods containing dyes consumed by older children.⁶

It is important to weigh the risks and benefits of any federal action—or inaction—considering health, economic, and other issues. In the present case, food dyes pose a health risk to many consumers, but no health benefit whatsoever to any consumers. Moreover, the economic benefit to industry appears to be negligible; indeed, some food processors may feel obliged to use dyes only because their competitors use them, but if no one used them, that wouldn't be an issue.

Considering the substantial body of scientific evidence, we urge you to press for measures that would help protect children from unnecessary harm. We suggest the following:

- Investigate what the FDA, National Institutes of Health, and the Centers for Disease Control and Prevention have done to inform the public and protect children from unnecessary exposure to food ingredients that trigger behavior problems and learn the results of any research those agencies have conducted.
- Hold hearings on diet and children's behavior and introduce legislation to end the use of food dyes and other unnecessary food ingredients that adversely affect children's behavior.
- Direct the FDA to revise or withdraw its inaccurate brochure on "Food Ingredients and Colors."
- Fund the Institute of Medicine to (a) review the scientific research and clinical experience regarding food ingredients (especially dyes) and behavioral problems, (b) recommend appropriate further research and child-protective public policies, and (c) advise whether new food additives should be tested routinely for neurobehavioral effects.

We would be pleased to help you however we can.

⁴ www.cfsan.fda.gov/~dms/foodic.html (accessed March 9, 2008). A previous version, "Food Color Facts," is also on FDA's web site.

⁵ www.foodstandards.gov.uk/news/newsarchive/2007/sep/additivesboard (accessed March 9, 2008). The British government is focusing on food dyes and the preservative sodium benzoate, which were mixed together in the studies it sponsored.

⁶ Crowley L. MEPs vote for ban on unnecessary colours for kids. Food Navigator.com—Europe. May 7, 2008. www.foodnavigator.com/news/ng.asp?n=85135&c=4ad7aAzQZOnmdHoqSmGJwQ%3D%3D (accessed May 9, 2008).

Sincerely,

L. Eugene Arnold, M.D., M.Ed.
Professor Emeritus of Psychiatry
Interim Director, Nisonger Center
(University Center of Excellence in
Developmental Disabilities)
Ohio State University
Sunbury, OH

Sidney MacDonald Baker, M.D.
Former Director of The Gesell Institute of
Human Development in New haven
Sag Harbor, NY

David Buscher, M.D.
The Northwest Center for Environmental
Medicine
Redmond, WA

Janet M. Cuhel, D.C., DICCP
Spinal Corrective Center PC
Cedar Rapids, IA

Devra Davis, Ph.D., M.P.H.
Director, Center for Environmental
Oncology
University of Pittsburgh Cancer Institute
Pittsburgh, PA

Donald R. Davis, Ph.D.
Research Scientist (retired), Biochemical
Institute
University of Texas, Austin TX

Joel Fuhrman, M.D.
Board Certified Family physician,
Hunterdon Medical Center
Flemington, New Jersey

Leo Galland, M.D., F.A.C.P., F.A.C.N.
Foundation for Integrated Medicine
New York, N.Y. 10010

Steven G. Gilbert, Ph.D., D.A.B.T.
Institute of Neurotoxicology &
Neurological Disorders
Seattle, WA 98115

Alan Greene, M.D.
Clinical Professor of Pediatrics at
Stanford University School of Medicine
Palo Alto, CA

Stanley Greenspan, M.D.
Clinical Professor of Psychiatry and
Pediatrics, George Washington University
Medical School
Washington, DC

Betsy Hoza, Ph.D.
Professor, Department of Psychology
University of Vermont
Burlington, VT

Karen Lau, Ph.D.
Post Doctoral researcher, Department of
Psychiatry
Washington University School of
Medicine
St. Louis, MO

Bill Manahan, M.D.
Assistant Professor Emeritus
University of Minnesota Medical School
Duluth, MN

Verna MacCornack, Ph.D.
Private practice
New York, NY

John W. Olney, M.D.
Professor of Psychiatry, Neuropathology,
and Neuropsychopharmacology,
Washington University School of
Medicine
St. Louis, MO

David W. Schab, M.D., M.P.H.
Department of Psychiatry, Columbia
University Medical Center; The New
York State Psychiatric Institute
New York, NY

Ted Schettler M.D., M.P.H.
Science Director
Science and Environmental Health
Network
Ames, Iowa

Nhi-Ha Trinh M.D. M.P.H.
PACT team Medical Director, North
Suffolk Mental Health Association
Staff Psychiatrist, Massachusetts General
Hospital

Dr. Bernard Weiss, Ph.D.
Department of Environmental Medicine
University of Rochester School of
Medicine and Dentistry
Rochester, NY

*You may reply via the Center for Science in the Public Interest, Attn.: Michael F. Jacobson,
Ph.D., Executive Director, Washington, DC.*