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For inclusion in the CCFNSDU public docket.

02-022N
02-022N-4
B. Sardi

Thank you.
-----Original Message-----
From: BSardi@aol.com [mailto:BSardi@aol.com]
Sent: Wednesday, July 31, 2002 1:37 AM
To: Crane, Nancy T
Cc: BSardi@aol.com
Subject: CODEX Submission

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July 30, 2002

Elizabeth Yetley
And the US Delegation to CCNFSDU

To be entered into the public record

To the CODEX delegates:

The very fact that there are deliberations to establish upper limits on the intake of essential vitamins and minerals is likely to mean some number must be agreed upon by CODEX. There is a false assumption that there is a significant enough health risk to consumers who overdose on food supplements, enough so that limits must be established with some haste.

It can be argued that the overdosage of any substance can produce side effects. While food supplements are not free of side effects, they are relatively safe. They are safer than chlorinated tap water (long-term carcinogen; causes bladder, kidney and rectal cancer), table salt (results in millions of cases of hypertension), aspirin and ibuprofen (causes stomach ulcers which may hemorrhage and result in death), cowâ??s milk (countries with the highest consumption have the highest mortality rates), bacon preserved with nitrates (increases risk of brain cancer more than 10-fold), and acetaminophen (Tylenol, which causes thousands of cases of liver toxicity annually, hundreds of liver transplants and some deaths), all which are non-prescription items.

Efforts to restrict the dosage of food supplements appear to be a misdirected priority.
CODEX convenes at a time when it has become apparent there are more than 150,000 needless deaths from properly prescribed drugs annually in the USA (over 400 preventable deaths per day, equivalent to a fully loaded commercial airliner crashing and killing all on board every day!).
Furthermore, it has become apparent that the biological action of most prescription medications can be duplicated with vitamins, minerals, amino acids and herbal products at far less cost and side effects to consumers.
The public needs to be educated about the health benefits of food supplements, not scared away as is currently the case.

Some of the current restrictions on the dosage of food supplements are

already harming the public. For example, the FDA does not permit more than 99 milligrams of potassium in a food supplement due to a small number of people who may develop potassium overload. Yet consumers can eat a couple of bananas a day, which provides about 700 milligrams of potassium per piece of fruit. This reveals a bias against food supplements that is in urgent need of correction.

In a sense, it could be said that table salt is a food supplement (concentrated, refined sodium). The over-consumption of salt, approximately 4000 milligrams per day in the USA, results in millions of cases of hypertension and hastens the onset of osteoporosis since sodium competes with calcium for absorption. Prepared foods are laced with salt as companies compete for the consumer's palate. So there is little hope that Americans will reduce sodium consumption to recommended levels (4500 mgs per day) without the cooperation of foodpurveyors. Yet not a word is uttered to restrict the dosage of sodium in an unlabeled salt shaker nor in labeled canned food. The antidote to the over-dosage of sodium is potassium, which guards against salt sensitivity. But the dosage restriction on potassium in food supplements prevents most consumers from obtaining a simple and cost-effective answer to the problem. Instead, millions of dollars of ineffective anti-hypertenive drugs are sold in the place of potassium.

The U.S. FDA has taken an untenable position by often scaring the public away from so-called high-dose food supplements. CODEX may make the same mistake. For example, the FDA has repeatedly issued warnings for the public to be wary of high-dose vitamin A supplements. The potential risk is liver toxicity, which only occurs in about 30 people annually in the USA, most whom have pre-existing liver disease. Yet health authorities estimate millions of Americans have low vitamin A levels and exhibit health problems such as diminished night vision and a compromised immune system. Yet to prevent a few from developing liver toxicity the FDA warns millions of adults away from supplemental vitamin A.

For various reasons explained in a memo I addressed to U.S. CODEX delegates two years ago, I believe that limits on the dosage of food supplements will result in significant health problems. The science on vitamins is changing rapidly and the dosage of vitamin D, folic acid, vitamin C needed for optimal health is likely to exceed any proposed upper limits presented to the delegates of CODEX. For example, an upper limit on the dosage of supplemental vitamin D is likely to be harmful to blacks living in northern latitudes who are immune compromised due to their limited ability to produce vitamin D from sunlight exposure.

Sadly, while recent studies reveal nutritional deficiencies at epidemic levels, which result in significant morbidity and mortality, CODEX ponders upper limits for food supplements. Recent studies indicate as much as 80 percent of Americans are deficient in magnesium, 80 percent deficient in essential fatty acids, 40 percent do not consume sufficient amounts of vitamin 812 or vitamin D, and more than 90 percent do not consume the amount of vitamin C that has been conclusively shown to prevent cataracts (300 mgs) and reduce blood pressure (500 mgs). Food supplements could safely and economically remedy these deficiencies, but the public is not alerted. Just the shortage of magnesium in the American diet results in an estimated 340,000 cases of sudden death heart attack annually.

If an outbreak of beri beri due to a vitamin B1 (thiamin) shortage affecting just a few thousand people were to be reported in the news media, health officials would be compelled to correct the problem. Yet millions of Americans today exhibit overt signs of nutritional deficiency while public health authorities point their finger of accusation at the few side effects caused by food supplements which are largely reversible and non-mortal.

CODEX convenes at an historic moment in time when man-made medicines are beginning to fail. Bacteria are now resistant to the â??magic bulletâ?? antibiotics. Over 14,000 Americans now die needlessly in hospitals due to mutated microbes that cannot be killed by the most potent antibiotics. Again, modern medicineâ??s over-reliance upon prescription drugs is the problem. While it has been conclusively shown that carvacrol and allicin, the active ingredients in oregano and garlic, can kill virtually every known bacterium without inducing germ resistance, these natural remedies are

ignored and are often considered nothing more than snake oil. Even needless death does not prompt public health authorities to look at natural alternatives. At a time when there is anxiety over biological terrorism, there is even some evidence that carvacrol and allicin are potent against the anthrax bacterium and the smallpox virus, yet pharmaceutical companies continue to gain the attention of the news media and funding from governmental sources for problematic vaccines that are known to result in significant mortality.

For these and other reasons, I resubmit the letter I wrote to the U.S. **CODEX** delegation two years ago, with hopes it will be read in detail and that the **CODEX** convention will back away from proposed limits on the dosage of food supplements, at least until further research is conducted.

Sincerely,

Bill Sardi