

AUG 3 0 2000

Memorandum

Date

From

(Acting) Division Director, Division of Standards and Labeling Regulations, Office of Nutritional Products, Labeling and Dietary Supplement, HFS-820

Subject

75-Day Premarket Notification for New Dietary Ingredients

То

Dockets Management Branch, HFA-305

New Dietary Ingredient:

tree oil phytosterols

Firm:

Date Received by FDA:

90-Day Date:

Novartis Consumer Health, Inc.

June 19, 2000

September 16, 2000

In accordance with the requirements of section 413(a) of the Federal Food, Drug, and Cosmetic Act, the attached 75-day premarket notification for the aforementioned new dietary ingredient should be placed on public display in Docket No. 95S-0316 after September 16, 2000.

Felicia B Satchell

RPT 77



Food and Drug Administration Washington DC 20204

AUG 3 0 2000

Scott Bass, Esq. Sidley & Austin 1722 Eye Street, NW Washington, DC 20006

Dear Mr. Bass:

This is to notify you that the submission you filed on behalf of your client Novartis Consumer Health, Inc. pursuant to section 413(a)(2) of the Federal Food, Drug, and Cosmetic Act (the Act), dated June 16, 2000, concerning the marketing of a substance (i.e., tall oil phytosterols) that Novartis Consumer Health, Inc. asserts is a new dietary ingredient was received by the Food and Drug Administration on June 19, 2000. This submission will be kept confidential for 90 days from the date of receipt and, after September 16, 2000, will be placed on public display at Dockets Management Branch (Docket No. 95S-0316). Commercial and confidential information in the notification will not be made available to the public.

Please contact us if you have any questions concerning this matter.

Sincerely yours,

Felicia B. Satchell

(Acting) Division Director

Division of Standards

and Labeling Regulations

Office of Nutritional Products, Labeling

and Dietary Supplements

SIDLEY & AUSTIN

A PARTNERSHIP INCLUDING PROFESSIONAL CORPORATIONS

CHICAGO

DALLAS

LOS ANGELES

NEW YORK

1722 EYE STREET, N.W. WASHINGTON, D.C. 20006 TELEPHONE 202 736 8000 FACSIMILE 202 736 8711

Hong Kong
London
Shanghai
Singapore
Tokyo

FOUNDED 1866

writer's direct number (202) 736-8684

WRITER'S E-MAIL ADDRESS sbass@sidley.com

June 16, 2000

Office of Special Nutritionals (HFS-450) Center for Food Safety and Applied Nutrition Food and Drug Administration 200 C Street, SW Washington, DC 20204 Roceived 6/19/00 RFP

Re: New Dietary Ingredient Notification

Dear Sir or Madam:

On behalf of Novartis Consumer Health, Inc. ["Novartis"], we submit the attached information, pursuant to section 413(a) of the Federal Food, Drug and Cosmetic Act, in support of Novartis' marketing of the new dietary ingredient tall oil phytosterols (under the trade name ReducolTM). Novartis intends to market this ingredient for dietary supplement use.

Novartis submitted to the Agency on December 13, 1999, a summary of information pertaining to the use of tall oil phytosterols as a food ingredient, in the format outlined in proposed regulation 21 CFR 170.36 [62 FR 18938, Substances Generally Recognized as Safe (GRAS)]. This submission informed the Agency of Novartis' conclusion, and that of its Expert GRAS Panel, that tall oil phytosterols are generally recognized as safe (GRAS) for use in vegetable oil spreads.

On April 24, 2000, the Food and Drug Administration informed Novartis in a letter that, based upon their evaluation of the submission and other available data, the Agency had no questions regarding Novartis' conclusion that tall oil phytosterols are GRAS under the intended conditions of use. The Agency's response, the evaluation and conclusion of an Expert GRAS Panel, and the



SIDLEY & AUSTIN

Office of Special Nutritionals (HFS-450) June 15, 2000 Page 2

scientific information cited in the submission, serve as the scientific basis for Novartis' conclusion that the tall oil phytosterols as a dietary ingredient can "...reasonably be expected to be safe."

Respectfully submitted,

L Scott Bass

cc: Judith Weinstein, Esq.
Associate General Counsel
Novartis Consumer Health, Inc.

New Dietary Ingredient Notification <u>for Tall Oil Phytosterols</u> (Trade Name ReducolTM)

Novartis Consumer Health, Inc.

The name and complete address of the manufacturer or distributor of the dietary supplement that contains the dietary ingredient, or the dietary ingredient.

The distributor of the dietary ingredient will be:

Novartis Consumer Health, Inc. 560 Morris Avenue Summit, New Jersey 07901-1312

Attention:

Judith Weinstein, Esq. Associate General Counsel

The name of the dietary ingredient.

The dietary ingredient is tall oil phytosterols (trade name ReducolTM).

Tall oil phytosterols are derived from the unsaponifiable matter of oil derived from trees. Tree oil is commonly referred to as tall oil. The dietary ingredient contains significant levels of sitosterol, campesterol, and the naturally occurring saturated (stanol) compounds, sitostanol and campestanol. Stigmasterol and other sterols are also found in minor quantities. The phytosterols are in a free non-esterified form.

Description of the dietary supplement or dietary supplements that contain the dietary ingredient including (i) the level of the dietary ingredient in the dietary supplement, and (ii) the conditions of use recommended or suggested in the labeling of the dietary supplement, or if no conditions of use are recommended or suggested in the labeling of the dietary supplement, the ordinary conditions of use of the supplement.

The dietary ingredient, tall oil phytosterols, will be marketed for use in products meeting the definition of "dietary supplement" in section 201(ff) of the Federal Food, Drug and Cosmetic Act. The tall oil phytosterols will be clearly labeled and promoted as dietary supplements. Each serving of the dietary supplement will contain 0.6 g of tall oil phytosterols. Consumption of up to 3 servings per day will be suggested or recommended in the label directions, resulting in maximum daily consumption of up to 1.8 g of tall oil phytosterols. This level of intake is within the level of dietary exposure considered safe for use in food.

The history of use or other evidence of safety establishing that the dietary ingredient, when used under the conditions recommended or suggested in the labeling of the dietary supplement, will reasonably be expected to be safe, including any citation to published articles or other evidence that is the basis on which the distributor or manufacturer has concluded that the dietary supplement will reasonably be expected to be safe.

A summary of information pertaining to the use of tall oil phytosterols as an ingredient in food was submitted by Novartis Consumer Health, Inc. on December 13, 1999 as part of a GRAS notification to the Agency. The information served as the foundation for Novartis Consumer Health's conclusion that tall oil phytosterols are safe (GRAS) for use in vegetable oil spread. Of primary importance was the evaluation and conclusion of the Expert GRAS Panel.

The April 24, 2000 letter from the Food and Drug Administration stated that, following their evaluation of the materials, FDA had no further questions regarding Novartis Consumer Health's conclusion that, at a level of 0.5 g of tall oil phytosterols per serving (referenced to 70 kg bw) of food for up to 3 servings per day, tall oil phytosterols are GRAS for use in food.

The opinion that the dietary ingredient tall oil phytosterols meets the statutory requirement under section 413(a)(2) that it will be "...reasonably expected to be safe..." is based upon the materials and information submitted in support of the GRAS notification, updated to include information available since the December 13, 1999 notification, the Expert GRAS Panel Report, and the April 24, 2000 letter from FDA.

Information provided to support Novartis Consumer Health's conclusion of safety is as follows:

- Attachment 1 Statement of the GRAS Expert Panel.
- Attachment 2 The updated list of scientific articles which form the basis for the opinion of safety. References that have become available since the December 13, 1999 notification, or have been updated with respect to their current publication status, are identified in **bold**.
- Attachment 3 April 24, 2000 letter from the Food and Drug Administration to Novartis.
- A copy of the listed references is included with the original document.

Judith Weinstein, Esq.

Procession and a second sections of

· 🌬 serve serve serve server server

en<mark>e</mark> i malindrejjima ale jimaji mys.

EXPERT PANEL STATEMENT

DETERMINATION OF THE GRAS STATUS OF TALL OIL DERIVED PHYTOSTEROLS USED AS AN INGREDIENT OF VEGETABLE OIL-BASED SPREADS

The undersigned, an independent panel of recognized experts (hereinafter referred to as Expert Panel), qualified by their scientific training and relevant national and international experience to evaluate the safety of food and food ingredients, was requested by Novartis Consumer Health Inc. to determine the Generally Recognized as Safe (GRAS) status of a natural product from tall oil (wood pulp derived). This product, which shall be referred to in this document as PhytrolTM, contains phytosterols and stanols for addition to a vegetable oil-based spread at a level up to 12%. Phytrol™ is manufactured by Forbes Medi-Tech, Inc. and supplied to Novartis Consumer Health Inc. for manufacture of the spread product. The intended purpose of PhytrolTM is to help maintain normal cholesterol levels in blood. Because the phytosterol/stanol ingredients in two similar products, BenecolTM and Take ControlTM, are in many ways the same as PhytrolTM and are currently being marketed for the same intended use with FDA's knowledge and consent, the principal focus of this review and evaluation is on the nature and relevance of any differences between these marketed products and PhytrolTM. A comprehensive search of the scientific literature for safety and toxicity information on phytosterols or stanols and their presence in food was conducted through October 1999 and made available to the Expert Panel. A report by CanTox U.S. Inc. based on this comprehensive literature review and analysis of safety and nutritional studies of phytosterols and stanols aided and facilitated the work of the Expert Panel. The Expert Panel independently evaluated materials submitted by Novartis Consumer Health Inc. and its agent, CanTox U.S. Inc., as well as other materials deemed appropriate or necessary. Following independent, critical evaluation, the Expert Panel conferred and unanimously agreed to the decision described herein.

The composition of PhytrolTM is intermediate between that of the phytosterol/stanols ingredients of Take ControlTM and BenecolTM. Henceforth, for the purpose of this document, these ingredients will be simply referred to as Take ControlTM and BenecolTM. Table 1 compares approximate compositions of the three products. While significant natural variation may occur in specific component content of each product, the data in Table 1 indicate that on average, levels of the individual component phytosterols in PhytrolTM do not significantly exceed the highest level present in either Take ControlTM or BenecolTM. Both of these products are marketed in the US with FDA's knowledge and consent based solely on independent self-GRAS determinations. Thus, in terms of the main phytosterol and stanol components, the Expert Panel concludes that PhytrolTM is substantially the compositional equivalent to a mixture of Take ControlTM and BenecolTM and that the main components are considered GRAS for their intended use in vegetable oil-based spreads at a level not to exceed 12% for any given product or portion size.

Table 1 Comparison of Phytosterol Compositions (% by weight)

Sterol	Take Control TM (phytosterols from Soybean Oil)	PHYTROL TM (Forbes Medi-Tech natural Tall Oil Phytosterols)	Benecol TM (Hydrogenated Tall and Soybean Oil Phytosterols)
Sitosterol	42	47	4
Campesterol	25	14	3
Stigmasterol	18		
Brassicasterol	5		
Sitostanol	2	26	64
Campestanol		5	23
Minor Sterols	8	8	6
Total Phytosterols	98	69	. 13
Total Phytostanols	2	31	87

Take ControlTM uses vegetable sterols esterified with fatty acids. Data are averages of batches from ADM and Cargill. BenecolTM is a mixture of vegetable and tall oil phytosterols that have been hydrogenated and then esterified with fatty acids. The PhytrolTM values are typical of most batches and fit within current specifications. Percentages refer only to sterol content and are approximations. The estimated sterol proportions will vary depending on the methodology used for measurement. The response factors vary between different sterols when compared within the same detection system, e.g. flame ion detection (FID). Further, the response factors vary between detection systems, i.e. FID versus GC/MS or LC/MS. The PhytrolTM phytosterols were quantitated by the use of GC-FID using in-house standards. The figures for Take ControlTM and BenecolTM are area under the curve estimates by GC/MS.

The difference in constituent phytosterol profiles among the three products arises from two main factors: (1) phytosterol source with respect to Take ControlTM and (2) use of hydrogenation processing for BenecolTM. A third difference arises from the use of fatty acid esterification of the Take ControlTM and BenecolTM products to modify their solubility properties for product application purposes.

PhytrolTM, which is derived from tall oil, contains significant levels of sitosterol and campesterol, similar to those occurring in Take ControlTM which is derived predominantly from soybean oil. The specifications for PhytrolTM are given in Table 2. Unlike Take ControlTM, PhytrolTM contains only minor quantities of stigmasterol and brassicasterol but significant levels of the saturated (stanol) compounds, sitostanol and campestanol, as occurs in BenecolTM. BenecolTM, which is also derived from tall oil, utilizes hydrogenation to saturate double bonds present in the sterol components, thus converting most

phytosterols to stanols, predominantly sitostanol and campestanol. However, a minor portion of the phytosterols remain unhydrogenated following hydrogenation processing of BenecolTM as indicated by the data in Table 1. Many of the minor components in each of the three products are unsaturated congeners of the same saturated structures. Consequently, hydrogenation tends to reduce, somewhat, the level and diversity of minor components. However, BenecolTM still contains a low percentage of minor component phytosterols that remain unsaturated, in the range of 2% to 3% (ref. BenecolTM submission).

Table 2

Proposed food-grade specifications for PhytrolTM

Phytosterol content	> 95%
Sitosterol	38% to 60%
Sitostanol	14% to 34%
Campesterol	9% to 18%
Campestanol	2% to 14%
Total major sterols	> 86%
Loss on drying (water)	< 5%
Solvents	< 0.5%
Residue on ignition	< 0.1%
Heavy metals	< 10 ppm
Lead	< 0.25 ppm
Total aerobic count	< 10,000 CFU/g
Combined molds & yeasts	< 100 CFU/g
Coliformes	negative
E. Coli	negative
Salmonella	negative

The phytosterols in Take ControlTM are not hydrogenated and contain up to 8% by weight of minor sterol and non-sterol components (see Table 1). Similarly, PhytrolTM contains a number of minor components primarily representing variations in the position and/or number of double bonds within sitosterol (C29) and campesterol (C28) structures. Also present are trace quantities of C_{15} - C_{25} saturated aliphatic alcohols. These minor, long chain alcohol components are substances commonly found in the diet and the Expert Panel concluded they were not toxic contaminants and their presence does not adversely affect

general recognition of safety of the intended use of PhytrolTM.

The only potential, safety related difference in composition among the three products lies with their minor phytosterol-like components. Comparative analysis of these substances in Take Control™, Benecol™, vegetable sterols (produced by ADM) and Phytrol™ revealed a total of 45 major and minor sterol components. Twenty-two were present in PhytrolTM None were unique to PhytrolTM as all 22 components were found either in Take ControlTM, BenecolTM, or vegetable sterols or reported present in vegetable oils in the scientific literature. Of the 22 phytosterol-like components in PhytrolTM, 15 were found in Take ControlTM, 11 in BenecolTM and 12 in vegetable sterols. Three phytosterol-like components were found in PhytrolTM which were not identified in Take ControlTM. BenecolTM, or vegetable sterols. These were sitosta-4, 6, 22-triene (C₂₉H₄₆), 24methylene lophenol (C₂₉H₄₈O), and alpha-1-sitosterol. All three have been previously reported present in vegetable oils by Mennie et al [1994]; Goad [1966]; Grob et al [1994]; and Bortolomeazzi et al [1996]. The Expert Panel concludes that the presence of PhytrolTM's phytosterol-like minor components in either GRAS products or vegetable oils allays any safety concern about these components under the intended conditions of use of PhytrolTM.

While Take ControlTM and BenecolTM have been esterified and PhytrolTM has not, the Expert Panel, based on the following data and discussion, concludes that their esterification does not affect either the safety or effectiveness of these products.

Table 3: Comparative Effectiveness of Sterol Products in a Margarine Matrix

Product:	Take Control TM	Benecol TM	Phytrol™ in a Margarine Matrix
Dosage	3 g per day 1	2.7 g per day 1	1.5 g/70kg/day ²
Δ Total Cholesterol ³	-8.3%	-7.3%	-9.1%
Δ LDL Cholesterol ³	-13.0%	-13.0%	-15.5%
Δ HDL Cholesterol ³	+0.6%	+0.1%	-4.4%

These data are from the Westrate [1998] study, which indicates that the average body weight of the men was 82.5 kg and for women was 66.8 kg. Converting the dose to an equivalent body weight (bw) basis, the dose of Take ControlTM would have been 2.5 g /70 kg bw in men and 3.0 g / 70 kg bw in women. The same conversion to an equivalent body weight yields a BenecolTM dose of 2.3 g / 70 kg bw in men and 2.9 g / 70 kg bw in women.

² These data are from the Jones et al [1999] study conducted in males, only.

Take Control™ and Benecol™ products have been esterified with common vegetable oil fatty acids to enhance their solubility in a vegetable oil product matrix. Lack of esterification does not detract from the observed equivalence of PhytrolTM phytosterols compared to Take ControlTM and BenecolTM. In fact, the ester forms are rapidly deesterified in vivo through the action of lipase enzymes in order to yield the active free phytosterols. Only the free phytosterol or stanol affect blood cholesterol levels. Thus, equivalence between gut concentrations of the active free phytosterol plus stanols in esterified products (Take ControlTM and BenecolTM) compared to non-esterified (PhytrolTM) is established by clinical studies showing closely similar effects on cholesterol lowering for the time and amount consumed (Table 3). The somewhat lower effectiveness of Take ControlTM and BenecolTM on a gram/day basis is probably a reflection of a less than complete de-esterification of the phytosterol and stanols esters in Take Control™ and BenecolTM following their ingestion. These data demonstrate that the tall oil phytosterols in PhytrolTM are substantially equivalent to the other two products in decreasing total and LDL serum cholesterol values. Furthermore, there is no evidence of any significant effect on plasma HDL levels for any of the three products. In the PhytrolTM study reported in Table 3, decreases in mean HDL values of 6.3 and 10.7 % were reported in the control and treated groups, respectively. The 4.4 % difference between the groups attributable to Phytrol per se was well within the 6.5% coefficient of variation for this assay procedure in the reported study and is not clinically significant.

As with the previous clinical studies involving Take ControlTM and BenecolTM, no adverse effects were observed in any of the subjects in the study by Jones *et al* [1999] including those consuming PhytrolTM.

As PhytrolTM is intended for use as an ingredient in vegetable oil-based spreads at levels of free phytosterols and stanols similar to that of Take ControlTM and BenecolTM, PhytrolTM's use and purpose in food are identical to that of the two currently marketed products, Take ControlTM and BenecolTM. The Expert Panel, based on a critical review of the information assembled and discussed by CanTox U.S. Inc., concludes that plant phytosterols and stanols as described and used by Lipton (Take ControlTM) and McNeil (BenecolTM) in their submissions to FDA of January 11, 1999 and February 18, 1999, respectively, are GRAS by scientific procedures for their intended use in vegetable oil-spreads. The published studies relied upon for this conclusion are listed in Attachment I. In view of these facts and given the compositional equivalency of PhytrolTM to Take ControlTM and BenecolTM, the Expert Panel concludes that the intended use of PhytrolTM does not raise questions concerning safety, including those related to potential, adverse nutritional effects. Such nutritional matters have been addressed and adequately resolved in the course of establishing the self-determined GRAS status of Take ControlTM and BenecolTM based on studies included in Attachment I.

Based on the critical evaluation discussed above, the Expert Panel has determined that PhytrolTM, meeting the specifications cited above, is generally recognized as safe (GRAS) by scientific procedures when used in vegetable oil-based spreads for the purpose of helping to maintain a healthy blood cholesterol level, providing it is used in accordance with current good manufacturing practice (21 CFR § 182.1(b)) in an amount not to exceed 12% phytosterol plus stanol in the finished spread.

W. Gary Flamm, Ph.D, F.A.C.T. President, Flamm Associates

Walter H. Glinsmann, M.D. Adjunct Professor, Georgetown University President, Glinsmann Inc.

K. C. Hayes, D.V.M., Ph.D.
Professor Biology (Nutrition)
Director, Foster Biomedical Research Laboratory
Brandeis University

Based on the critical evaluation discussed above, the Expert Panel has determined that PhytrolTM, meeting the specifications cited above, is generally recognized as safe (GRAS) by scientific procedures when used in vegetable oil-based spreads for the purpose of helping to maintain a healthy blood cholesterol level, providing it is used in accordance with current good manufacturing practice (21 CFR § 182.1(b)) in an amount not to exceed 12% phytosterol plus stanol in the finished spread.

W. Gary Flamm, Ph.D, F.A.C.T. President, Flamm Associates

Walter H. Glinsmann, M.D.

Adjunct Professor, Georgetown University

President, Glinsmann Inc.

K. C. Hayes, D.V.M., Ph.D.
Professor Biology (Nutrition)
Director, Foster Biomedical Research Laboratory
Brandeis University

Based on the critical evaluation discussed above, the Expert Panel has determined that PhytrolTM, meeting the specifications cited above, is generally recognized as safe (GRAS) by scientific procedures when used in vegetable oil-based spreads for the purpose of helping to maintain a healthy blood cholesterol level, providing it is used in accordance with current good manufacturing practice (21 CFR § 182.1(b)) in an amount not to exceed 12% phytosterol plus stanol in the finished spread.

W. Gary Flamm, Ph.D, F.A.C.T. President, Flamm Associates

Walter H. Glinsmann, M.D. Adjunct Professor, Georgetown University President, Glinsmann Inc.

K. C. Hayes, D.V.M., Ph.D. 12/9/99

Professor Biology (Nutrition)

Director, Foster Biomedical Research Laboratory Brandeis University

North Control

REFERENCES

Ambrošová Ž, Vozár I, Ćiernik M, Śvec, P and Kyselovic J. 1999. Effect of a phytosterol mixture diet on the plasma level of fatty acids in hypercholesterolaemic rats (PHHC). Pharmazie 54(4):312-313.

Anderson et al. 1926. J. Am. Chem. Soc. 48, 2987. As cited in: The Merck Index: An Encyclopedia of Chemicals, Drugs, and Biologicals. 12th Edition. Eds: Budavari S, O'Neil MJ, Smith A, Heckelman PE, Kinneary JF. Merck & Co., Inc. Whitehouse Station NJ. p8697.

Ayesh R, Weststrate JA, Drewitt PN, and Hepburn PA. Safety evaluation of phytosterol esters. Part 5. Faecal short-chain fatty acid and microflora content, faecal bacterial enzyme activity and serum female sex hormones in healthy normolipidaemic volunteers consuming a controlled diet either with or without a phytosterol ester-enriched margarine. Food Chem Toxicol 37:1127-1138.

Bae M, Mercer EI. 1970. The effect on long and short day photoperiods on the sterol levels in the leaves of Solanum andigena. Phytochemistry. 9:63-68.

Baker VA, Hepburn PA, Kennedy SJ, Jones PA, Lea LJ, Sumpter JP, and Ashby J. 1999. Safety evaluation of phytosterol esters: Part 1. Assessment of oestrogenicity using a compination of *in vivo* and *in vitro* assays. Food Chem Toxicol 37(1):13-22.

Barber JM, Grant AP. 1955. The serum cholesterol and other lipids after administration of sitosterol. Br. Heart J. 17: 296-298.

Bean GA. 1973. Phytosterols. Adv. Lipid Res. 11:193-218.

Becker M, Staab D, von Bergmann K. 1992. Long-term treatment of severe familial hypercholesterolemia in children: effect of sitosterol and bezafibrate. Pediatr 89:138-42.

Becker M, Staab D, von Bergmann K. 1993. Treatment of severe familial hypercholesterolemia in childhood with sitosterol an sitostanol. J Pediatr 122:292-6.

Best MM, Duncan CH, Van Loon EJ, Wathen JD. 1954. Lowering of serum cholesterol by the administration of a plant sterol. Circulation 10: 201-206.

Best MM, Duncan CH, Van Loon EJ, Wathen JD. 1955. The effects of sitosterol on serum lipids. Am. J. Med. 19: 61-70.

Bhattacharyya A, Connor WE, Lin DS. 1991. Sluggish sitosterol turnover and hepatic failure to excrete sitosterol into bile cause expansion of body pool of sitosterol in patients with sitosterolemia and xanthomatosis. Arteriocsler. Thromb. Vol 11. 5:1287-1294

Bhattacharyya A, Connor WE. 1974. β-sitosterolemia and xanthomatosis: A newly described lipid storage disease in two sisters. J Clin Invest. 53: 1033-1043.

Bhattacharyya A, Connor WE. Familial diseases with storage of sterols other than cholesterol. The metabolic basis of inherited disease, 4th ed., New York, McGrow-Hill, Chapter 31, pp656-669.

Bhattacharyya A and Lopez. 1979. Absorbability of plant sterols and their distribution in rabbit tissues. Biochim. Biophys. Acta 574:146 – 153.

Bhattacharyya, A.K., Connor, W.E., and Lin, D.S. 1983. The origin of plant sterols in the skin surface lipids in humans: from diet to plasma to skin. J.Invest.Dermat. 80, 294-296.

Boberg KM, Einarsson K, Bjorkhem I. 1990a. Apperent lack of conversion of sitosterol into C₂₄-bile acids in humans. J Lipid Res. 31: 1083-1088.

Boberg KM, Lund E, Olund J, Bjorkhem I. 1990b. Formation of C₂₁ bile acids from plant sterols in the rat. J Bio Chem. (263) 14: 7967-7975.

Boberg KM, Skrede S. 1988. Content of sitosterol, cholestanol, and cholesterol in very low density lipoproteins of rat liver perfusate. Scand J gastroenterol. 23: 442-448.

Borgstrom B. 1968. Quantitative aspects of the intestinal absorption and metabolism of cholesterol and β -sitosterol in the rat. J. Lipid. Res. 9:473-481.

Borgstrom B. 1967. Absorption of fats. Proc. Nutr. Soc. 26:34-46.

Bortolomeazzi R, Pizzale L, Novelli A, Conte L. 1996. La Rivista Italiana delle Sostanze Grasse73: 457.

Bouic PJD and Lamprecht JH. 1999. Plant sterols and sterolins: a review of their immune-modulating properties. Altern. Med. Rev. 4(3):170-177.

Burck PJ, Thakkar AL, Zimmerman RE. 1982. Antifertility action of a sterol sulphate in the rabbit. J Reprod Fert 66:109-12.

Cerqueira MT, McMarry Fry M, Connor WE. 1979. The food and nutrient intakes of the Tarahumara Indians of Mexico. Am J Clin Nutr 32:905-15.

Clayton PT, Whitfield P, and Iyer, K. 1998. The role of phytosterols in the pathogenesis of liver complications of pediatric parenteral nutrition. Nutrition. 14, 158-164.

Cobb MM, Salen G, Tint GS. 1997. Comparative effect of dietary sitosterol on plasma sterols and cholesterol and bile acid synthesis in a sitosterolemic homozygote and heterozygote subjects. J Am College Nutr. 16 (6): 605-613.

Cooper EE. 1958. Dietary and pharmaceutical approaches to atherosclerosis; special reference to beta-sitosterol. Texas St. J. Med. 54:29-36.

Crombie WML. 1961. Chemical composition of plant tissues and related data. In Long Biochemist handbook. Spon, ed. pp. 937-1053.

Davis DL. 1971. Sterol distribution within green and air cured tobacco. Phytochemistry:11: 489-494.

Denke MA. 1995. Lack of efficacy of low-dose sitostanol therapy as an adjunct to a cholesterol-lowering diet in men with moderate hypercholesterolemia. Am J Clin Nutr 61:392-6.

Duncan CH, Best MM. 1963. Long-term use of sitosterol as a hypocholesterolemic agent. J Kentucky med. Ass. 61: 45-47.

Farquhar JW, Smith RE, Dempsey ME. 1956. The effect of beta sitosterol on the serum lipids of young men with arteriosclerotic heart disease. Circulation 14:77-82.

Glover J, Green C. 1953. Sterol metabolism 3. The distribution and transport of sterols across the intestinal mucosa of the guinea pig. Biochem. J. 67:308-316.

Goad LJ. 1967. Aspects of phytosterol biosynthesis. In: Terpenoids in Plants. Ed. Pridham JB. Academic Pres Inc. London. pp159-190.

Gould RGI, et al. 1969. Absorbability of β -sitosterol in humans. Metabolism 18:652-662, 1969.

Gould RGI. 1955. Absorbability of beta sitosterol. Trans.N.Y.Acad.Sci. 18, 129-134.

Grob K, Biedermann M, Artho A, Schmid J. 1994. La Rivista Italiana delle Sostanze Grasse 71: 533.

Grundy S, et al. 1969. The interaction of cholesterol absorption and cholesterol synthesis in man. J Lipid Res. 10: 304-315.

Gylling H, Miettinen TA. 1994. Serum cholesterol lipoprotein metabolism in hypercholesterolemic NIDDM patients before and during sitostanol ester-margarine treatment. Diabetologia 37:773-80.

Gylling H, Miettinen TA. 1995. The effect of cholesterol absorption inhibition on low density lipoprotein cholesterol level. Atherosclerosis 117:305-8.

Gylling H, Miettinen TA. 1996. Effects of inhibiting cholesterol absorption and synthesis on cholesterol and lipoprotein metabolism in hypercholesterolemic non-insulindependent diabetic men. J. Lipid Research 37:1776-85.

Gylling H, Radhakrishnan R, Miettinen TA. 1997. Reduction of serum cholesterol in postmenopausal women with previous myocardial infarction and cholesterol malabsorption induced by dietary sitostanol ester margarine. Circulation. No 12. 96: 42264231.

Gylling H, Siimes MA, Miettinen TA. 1995. Sitostanol ester margarine in dietary treatment of children with familial hypercholesterolemia. J. Lipid Research 36:1807-12.

Gylling HK, Puska P, Vartiainen E, et al. Serum retinol, beta-tocopherol, carotens, and lipid peroxide production during serum cholesterol lowering by sitostanol ester margarine in a mildly hypercholesterolemic population (abstract 3379). Circulation 1996; 94 (Suppl 1): 1-578.

Gylling HK, and Miettinen TA. Efficacy of plant stanol ester in lowering cholesterol in postmenopausal women and patients with diabetes. Postgraduate Medicine -A Special Report: New developments in the dietary management of high cholesterol, November 1998, p.39.

Heinemann T, Axtmann G, von Bergmann K. 1993. Comparison of intestinal absorption of cholesterol with different plant sterols in man. Eur J Clin Investig 23:827-31.

Heinemann T, Leiss O, von Bergmann K. 1986. Effect of low-dose sitostanol on serum cholesterol in patients with hypercholesterolemia. Atheroscler 61:219-23.

Hellman L, et al. 1953. Metabolism of cholesterol-4-C14 in hypercholesterolemia. Circulation 8:434-435.

Hendriks HFJ, Weststrate JA, van Vliet T and Meijer GW. 1999. Spreads enriched with three different levels of vegetable oil sterols and the degree of cholesterol lowering in normocholesterolaemic and mildly hypercholesterolaemic subjects. Eur. J. Clin. Nutr. 53(4):319-327.

Hesse D. 1878. Uber phytosterin und cholesterin. Ann. 192, 175-179.

Hepburn PA, Homer SA, and Smith M. 1999. Safety evaluation of phytosterol esters: Part 2. Subchronic 90-day oral toxicity study on phytosterol esters: A novel functional food. Food Chem Toxicol 37(5);521-532.

Hirai K, et al. 1986. Cholesterol, phytosterol and polyunsaturated fatty acid levels in 1982 and 1957 Japanese diets. J. Nutr. Sci. Vitaminol. 32: 363-372.

Iyer KR, Spitz L, Clayton P. 1998. New insight into mechanisms of parenteral nutrition-associated cholestasis: role of plant sterols. J. Ped. Surg. 33 (1) 1-6.

Jenkins DJA and Kendall CWC. 1999. Plant sterols, health claims and strategies to reduce cardiovascular disease risk. J. Am. Coll. Nutr. 18(6):559-562.

Jones PJH, Ntanios FY, Raeini-Sarjaz M, Vanstone CA. 1999. Cholesterol-lowering efficacy of a sitostanol-containing phytosterol mixture with a prudent diet in hyperlipidemic men. Am J. Clin Nutr 69: 1140-50.

Joyner C, Kuo PT. 1955. The effect of sitosterol administration upon the serum cholesterol level and lipoprotein pattern. Am. J. med. Sci. 230: 636-647.

Kojima H, Hidaka H, Matsumura K, Fujita Y, Yamada S, Haneda M, Yasuda H, Kikkawa R, and Kashiwagi A. 1999. Atherosclerosis 145:389-397.

Kris-Etherton PM, Etherton TD, Pearson TA, Phyllips K, Reed R, Windhouser M, Champagne C, Lefevre M. 1998. Stanol supplemented margarine (SM) loweres LDL-C in moderately hypercholesterolemic subjects fed an average American diet (AAD). Experimental Biology Meeting, San Francisco.

Kritchevsky DL, Davidson LM, Mosbach EH, Cohen BI. 1981 Identification of acid steroids in feces of monkeys fed β-sitosterol. Lipids 16: 77-78.

Lees AM, Mok HY, Lees RS, McCluskey MA, Grundy SM. 1977. Plant sterols as cholesterol-lowering agents: clinical trials in patients with hypercholesterolemia and studies of sterol balance. Atheroscler 28:325-38.

Lehmann JH. 1957. Clinical experiences with beta-sitosterol, a new anti-cholesterolemic agent. NW. Med., Seattle 56: 43-46.

Leikin AI, Brenner RR. 1989. Fatty acid desaturase activities are modulated by phytosterol incorporation in microsomes. Bichim et Biophys Acta 1005:187-91.

Lesesne JM, Castor CW, Hoobler SW. 1955. Prolonged reduction in human blood cholesterol levels induced by plant sterols. Univ. Mich. Med. Bull. 21: 13-17.

Lin DS, Connor WE, Phillipson BE. 1984. Sterol composition of normal human bile. Effects of feeding shellfish (marine) sterols. Gastroenterology 86, 611-617.

Ling WH, Jones PJH. 1995. Dietary phytosterols: a review of metabolism, benefits and and side effects. Life Sciences 57:195-206.

Malini T, Vanithakumari G. 1990. Rat toxicity studies with beta-sitosterol. J. Ethnopharma 28:221-34.

Malini T, Vanithakumari G. 1991. Antifertility effects of beta-sitosterol in male albino rats. J. Ethnopharm 35:149-53.

Malini T, Vanithakumari G. 1993. Effect of beta-sitosterol on uterine biochemistry: a comparative study with estradiol and progesterone. Biochem Molecular Biol Int 31:659-68.

Mattson FH, Grundy SM, Crouse JR. 1982. Optimizing the effect of plant sterols on cholesterol absorption in man. Am J. Clin Nutr 35:697-700.

Mellies MJ, Ishikawa TT, Glueck CJ, Bove K, Morrison J. 1976. Phytosterols in aortic tissue in adults and infants. J. Lab Clin Med. Vol 88. 6: 914-921.

Mennie D, Moffat C, McGill A. 1994. Journal of High Resolution Chromatography 17: 831.

Mensink PR, Plat J. October 1998. Studies of effects of plant stanol ester on lipid parameters, vitamin levels, and thrombogenic factors in a normocholesterolemic population. Dallas conference: Plant sterol ester: a new tool in dietary management of cholesterol.

Miettinen TA, Vanhanen H. 1994. Dietary sitostanol related to absorption, synthesis and serum level of cholesterol in different apolipoprotein E phenotypes. Atheroscler 105:217-26.

Miettinen TA, Puska P, Gylling H, Vanhanen H, Vartiainen E. 1995. Reduction of serum cholesterol with sitostanol-ester margarine in a mildly hypercholesterolemic population. New Engl J Med 333:1308-12.

Miettinen TA, Tilvis RS, Kesaniemi YA. 1990. Serum plant sterol and cholesterol precursors reflect cholesterol absorption and synthesis in volunteers of a randomly selected male population. Am J Epidemiol 131:20-31.

Miettinen TA. 1980. Phytosterolemia, xanthomatosis and premature atherosclerotic arterial disease: a case with high plant sterol absorption, impaired sterol elimination and low cholesterol synthesis. Eur J Clin Invest. 10: 27-35.

Moghadasian MH, et al. 1999. Histologic, hematologic, and biochemical characteristics of Apo-E-KO mice E-deficient mice: Effects of dietary cholesterol and phytosterols. Laboratory Investigation 79:355-364.

Moghadasian MH and Frohlich JJ. 1999. Effects of dietary phytosterols on cholesterol metabolism and atherosclerosis: clinical and experimental evidence. Am. J. Medicine 107:588-594.

Morton GM, Lee SM, Buss DH, Lawrence P. 1995. Intakes and major dietary sources of cholesterols and phytosterols in the British diet. J. Hum. Nutr. Diet. 8: 429-440.

Nair P, et al. 1984. Diet, nutrition intake, and metabolism in populations at high and low risk for colon cancer: dietary cholesterol, β-sitosterol, and stigmasterol. Am J. Clin Nutr. 40: 927-930.

Nes WD and Venkatramesh M. 1999. Enzymology of phytosterol transformations. Crit. Rev. Biochem. Mol. Biol. 34(2):81-93.

Nguyen TT. 1999. The cholesterol-lowering action of plant stanol esters. J. Nutr. 129(12):2109-2112.

Phillips KM, Ruggio DM, and Bailey JA. 1999. Precise quantitative determination of phytosterols, stanols, and cholesterol metabolites in human serum by capillary gas-liquid chromatography. J. Chromatogr. B 732:17-29.

Plat J and Mensink R. 1998. Safety aspects of dietary plant sterols and stanols. Postgraduate Medicine -A Special Report: New developments in the dietary management of high cholesterol, November 1998.

Plat J and Mensink RP. 2000. Vegetable oil based versus wood based stanol ester mixtures: effects on serum lipids and hemostatic factors in non-hypercholesterolemic subjects. Atherosclerosis 148:101-112.

Pollak OJ, Kritchevsky D. 1981. Monographs on atherosclerosis. ISBN 3-8055-0568-X.

Pollak OJ. 1985. Effect of plant sterols on serum lipids and atherosclerosis. Pharmac Ther 31:177-208.

Reeves JE. 1959. Hypercholesterolemia: treatment with sitosterol and a low cholesterol diet. Am. Practit. 10: 1193-1197.

Robinson M, Wnorowski G, Dreher M. 1998. Dietary stanols as antihypercholesterolemic agents: a 90-day sub-chronic feeding trial as a safety assessment in the rat. #1202 Abstract from F.A.S.B. meeting in San Francisco. (Nabisco Inc, East Hanover, NJ 07936 and Product Safety Labs, East Brunswick, NJ 08816).

Sachs BA and Weston RE. 1956. Sitosterol administration in normal and hypercholesterolemic subjects; the effect in man of sitosterol therapy on serum lipids and lipoproteins. Archs intern. Med. 97: 738-752.

Salen G, Ahrens EH, Grundy SM. 1970. Metabolism of beta-sitosterol in man. J. Clin Invest. 49:952-967.

Salen G, Kwiterovich PO, Shefer S, Tint GS, Horak I, Shore V, Dayal B, Horak E. 1985. Increased plasma cholestanol and 5α-saturated plant sterol derivatives in subjects with sitosterolemia and xanthomatosis. J. Lipid Res 26: 203-209.

Salen G, Shefer L, Nguyen L, Ness GC, Tint GS, Shore V. 1992. J. Lipid Res 33:945-55.

Salen G, Shore V, Tint GS, Forte T, Shefer S, Horak I, Horak E, Dayal B, Nguyen L, Batta AK, Lindgren T, Kwiterovich PO. 1989. J Lipid Res 30:1319-30.

Schlierf G, Oster P. Heuck CC, Raetzer H, Schellenberg B. 1978. Sitosterol in juvenile type II hyperlipoproteinemia. Atheroscler 30:245-48.

Shefer S, Salen G, Bullock J. 1994. Hepatology 20:213-19.

ShipleyRE, Pfeiffer RR, Marsh MM, Anderson RC. 1958. Sitosterol feeding: Chronic animal and clinical toxicology and tissue analysis. Circulation Research, 6: 373-382.

Shoppee CW. 1964. Chemistry of steroids (London: Butterworth).

Simell O, Tammi A. Gylling H, Pulkki K, Ronnemaa T, and the STRIP Study Group. October 1998. Studies with plant stanol ester in children. Dallas conference: Plant sterol ester: a new tool in dietary management of cholesterol.

Slesinski RS, Turnbull D, Frankos VH, Wolterbeek APM and Waalkens-Berendsen DH. 1999. Developmental toxicity study in vegetable-oil derived stanol fatty acid esters. Regulatory Toxicology and Pharmacology 29: 227-233.

Subbiah MTR. 1971. Subject review: Significance of dietary plant sterols in man and experimental animals. Mayo Clin Proc. 46: 549-559.

Subbiah MTR and Kuksis A. 1973. Differences in metabolism of cholesterol and sitosterol following intravenous injection in rats. Biochim et Biophys Acta 306:95-105.

Swell, et al. 1954. Sterol specificity of pancreatic cholesterol esterase. Proc. Soc. Exp Biol. Med. 87:21-218.

Sylven C and Borgstrom B. 1969. Absorption and lymphatic transport of cholesterol and sitosterol in the rat. J. Lipid Res. 10: 179-182.

Turnbull D, Frankos VH, Leeman WR, and Jonker D. 1999. Short-term tests of estrogenic potential of plant stanols and plant stanol esters. Regulatory Toxicology and Pharmacology 29:211-215.

Turnbull D, Frankos VH, van Delft JHM, and deVogel N. 1999. Genotoxicity evaluation of wood-derived and vegetable-oil derived stanol esters. Regulatory Toxicology and Pharmacology 29: 205-210.

Turnbull D, Whittaker MH, Frankos VH, and Jonker D. 1999. 13-week oral toxicity study with stanol esters in rats. Regulatory Toxicology and Pharmacology 29:216-226.

Uusitupa M. October 1998. Study of efficacy of plant stanol ester in subjects consuming NCEP diets. Dallas conference: Plant sterol ester: a new tool in dietary management of cholesterol.

Vanhanen HT, Blomqvist S, Ehnholm C, Hyvonen M, Jauhiainen M, Torstila I, and Miettinen TA. 1993. Serum cholesterol, cholesterol precursors, and plant sterols in hypercholesterolemic subjects with different apoE phenotypes during dietary sitostanol ester treatment. J. Lipid Res 34:1535-44.

Vanhanen HT, Kajander J, Lehtovitra H, and Miettinen TA. 1994. Serum levels, absorption efficiency, fecal elimination and synthesis of cholesterol during increasing doses of dietary sitostanol esters in hypercholesterolemic subjects. Clin Sci 87:61-7.

Vanhanen HT and Mietinen TA. 1992. Effects of unsaturated and saturated dietary plant sterols on their serum contents. Clin Chim Acta 205:97-107.

von Bergman K and Lutjohann D. November 1998. Review of the absorption and safety of plant sterols. Postgraduate medicine: A Special Report: New developments in the dietary management of high cholesterol.

Waalkens-Brendsen DH, Wolterbeek APM, Wijnands MVW, Richold M, Hepburn PA. 1999. Safety evaluation of phytosterol esters. Part 3. Two-generation reproduction study of phytosterol esters in rats. A novel functional food. Food Chem Toxicol 37(7):683-696.

Weisweiler P, Heinemann V, Schwandt P. 1984. Serum lipoproteins and lecithin: cholesterol Acyltransferase (LCAT) activity in hypercholesterolemic subjects given β -sitosterol. Int J. Clin Pharmacol Therapy Tox 22:204-6.

Weststrate JA and Meijer GW. 1998. Plant sterol-enriched margarines and reduction of plasma total- and LDL cholesterol concentrations in normocholesterolemic and mildly hypercholesterolemic subjects. Eur J. Clin Nutr 52: 334-343.

Weststrate JA, Ayesh R, Bauer-Plank C, and Drewitt PN. 1999. Safety evaluation of phytosterol esters. Part 4. Faecal concentrations of bile acids and neutral sterols in healthy normalipidaemic volunteers consuming a controlled diet either with or without a phytosterol ester-enriched margarine. Food Chem Toxicol 37:1063-1071.

Whittaker MH, Frankos VH, Wolterbeek APM, and Waalkens-Berendsen DH. 1999. Two-generation reproductive toxicity study of plant stanol esters in rats. Regulatory Toxicology and Pharmacology 29:196-204.

Williams CL, Bollella MS, Strobino BA, Boccia L, and Campanaro L. 1999. Plant stanol ester and bran fiber in childhood: effects on lipids, stool weight and stool frequency in preschool children. J. Am. Coll. Nutr. 18(6):572-581.