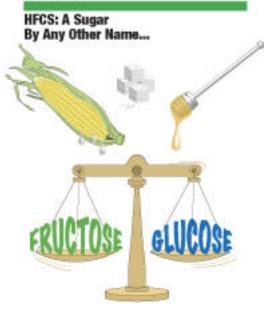
High Fructose Corn Syrup versus Sugar: Nutrition Issues and Concerns

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Discussion Outline

- Fructose and sweetener statistics
- Fructose versus Glucose
- HFCS versus Sucrose

State-of-the-Science on Dietary Sweeteners Containing Fructose

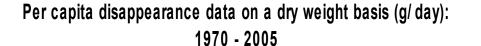
Workshop 18-19 March 2008 Beltsville, MD

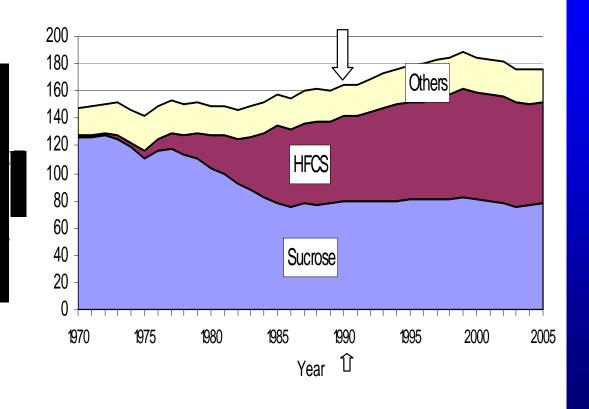
Funding Sources:

ILSI-NA Technical Committee on Carbohydrates
American Beverage Association
Corn Refiners Association
Calorie Control Council
USDA/ARS (in-kind)

ERS Disappearance Data

Year	Total	Suc	HFCS	Other
	(g/d)	(<	% tota	I>)
1970	148	85	0.5	14
1975	142	78	4	17
1980	149	73	12	15
1985	157	50	36	14
1990	165	49	37	14
1995	179	45	40	15
2000	185	44	42	14
2005	176	44	42	14





Sweetness Relative to Sucrose*

Substance

Relative Sweetness

Fructose 117
High fructose syrup – 90 106
Sucrose 100
High fructose syrup – 55 99
High fructose syrup – 42 92
Glucose 67

^{*} From Hanover and White. Am J Clin Nutr 1993;58:724S.

Food Supply Availability-Energy

	1970	2004	Δ
Total energy			
Kcal/day	3,200	3,900	+700
Caloric sweeteners			
lb/year	119.1	141.6	+22.5
% of energy	18.4	17.3	-1.1
% Sucrose	85.4	43.5	-41.9
% HFCS	0.5	42.2	+41.7

Fructose Food Sources

NHANES 1999–2004

Food Group	Added	Total
	% of mean daily intake	
Milk & milk products	4–14	4–12
Fruits & fruit products	<3	8–38
Grain products	11–32	10–25
Sugars & sweets	8–15	7–12
Nonalcoholic beverages	36–73	25–66

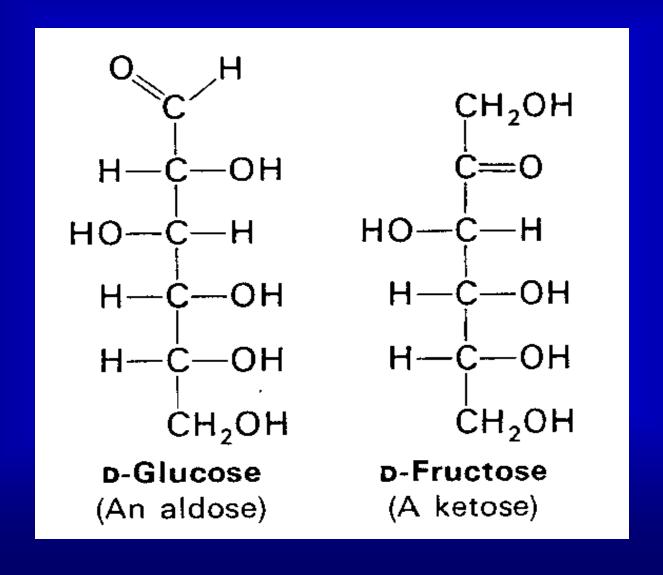
Dietary Fructose Intake

NHANES 1999–2004

	Added	Total
g/day		
Population mean	41	49
Highest mean (M 15–22 y)	67–68	75
Highest 90th percentile (M 19–22 y)	107	117
% of kcal		
Population mean	7.5	9.1
Highest mean (M&F 15–22 y)	10	11–12
Highest 90 th percentile (F 19–22)	15	16

So what is the confusion?

Glucose vs Fructose



Dietary Fructose Reduces Circulating Insulin and Leptin, Attenuates Postprandial Suppression of Ghrelin, and Increases Triglycerides in Women KL Teff. J Clin Endocrinol Metab 2004;89:2963-2972.

12 normal weight, healthy women consumed for one day meals providing 30% of energy as fructose and, on another day, 30% of energy as glucose.

Blood samples were collected every 30-60 minutes.

On the days after the fructose and glucose study days, ad libitum energy intake was monitored.

AUC above baseline (Teff,et al.)

	High Glucose Diet	High Fructose Diet	P value
Plasma Glucose	43.4 + 5.2	23.9 + 3.7	< 0.003
(mmol/L x 23 h)			
Plasma TG	-2.1 + 1.6	13.8 + 6.4	< 0.01
(g/L x 23 h)			
Plasma Insulin	6,658 + 496	3,262 + 309	< 0.001
(pmol/L x 23 h)			
Plasma Leptin	301 +31	219 + 23	< 0.01
(ng/ml x 24 h)			
Plasma GLP-1	46 +20	113 + 33	< 0.01
(pg/ml x 23 h)			

Teff, et al (cont.)

Hunger ratings were not different between high glucose and high fructose diets.

Ad libitum food intakes on days 2 were not different.

Sucrose vs HFCS

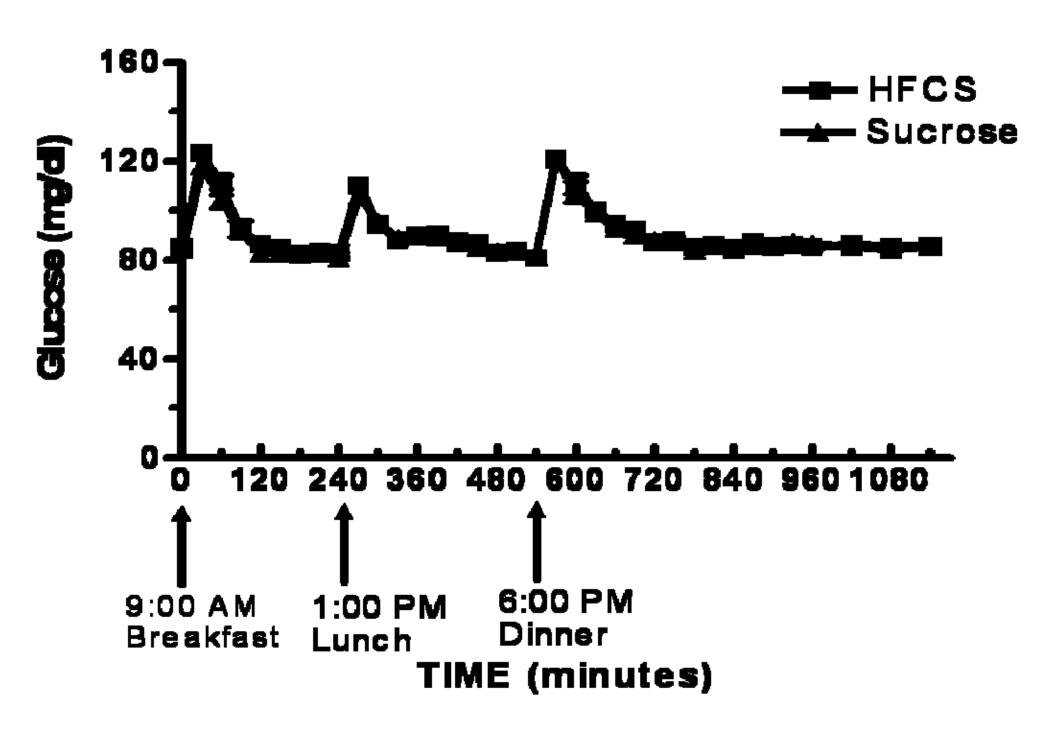
Short-term Responses of Postprandial Triglycerides, Uric Acid, and endocrine mediators of Energy Balance following Consumption of High Fructose Corn Syrup or Sucrose Beverages with Meals.

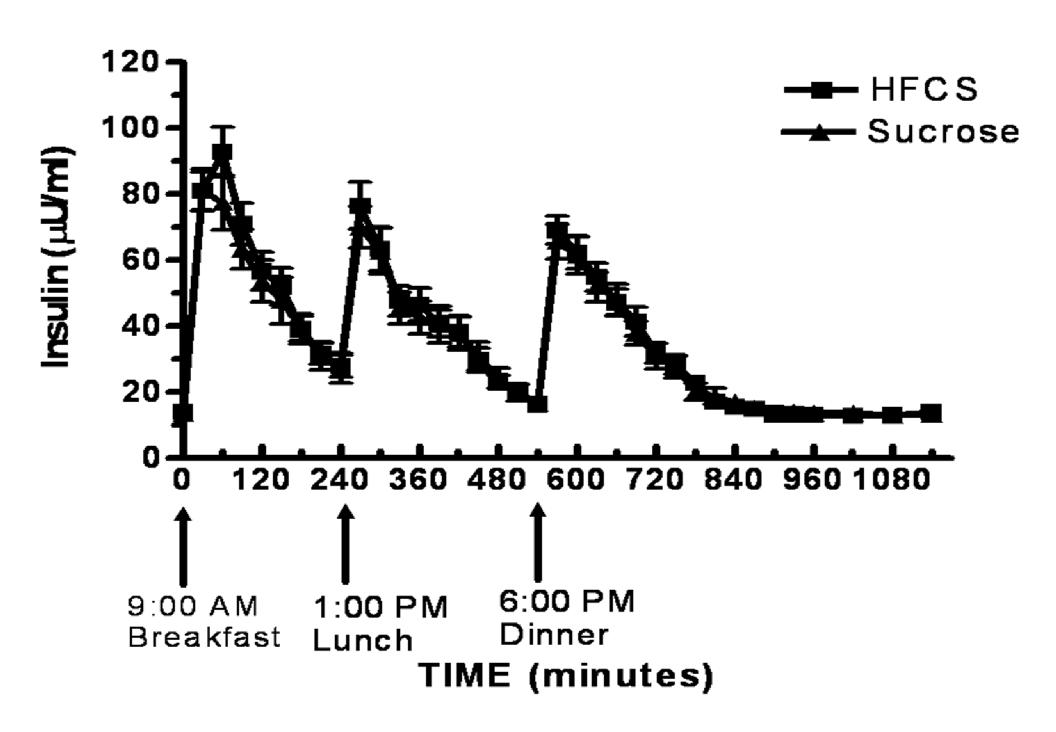


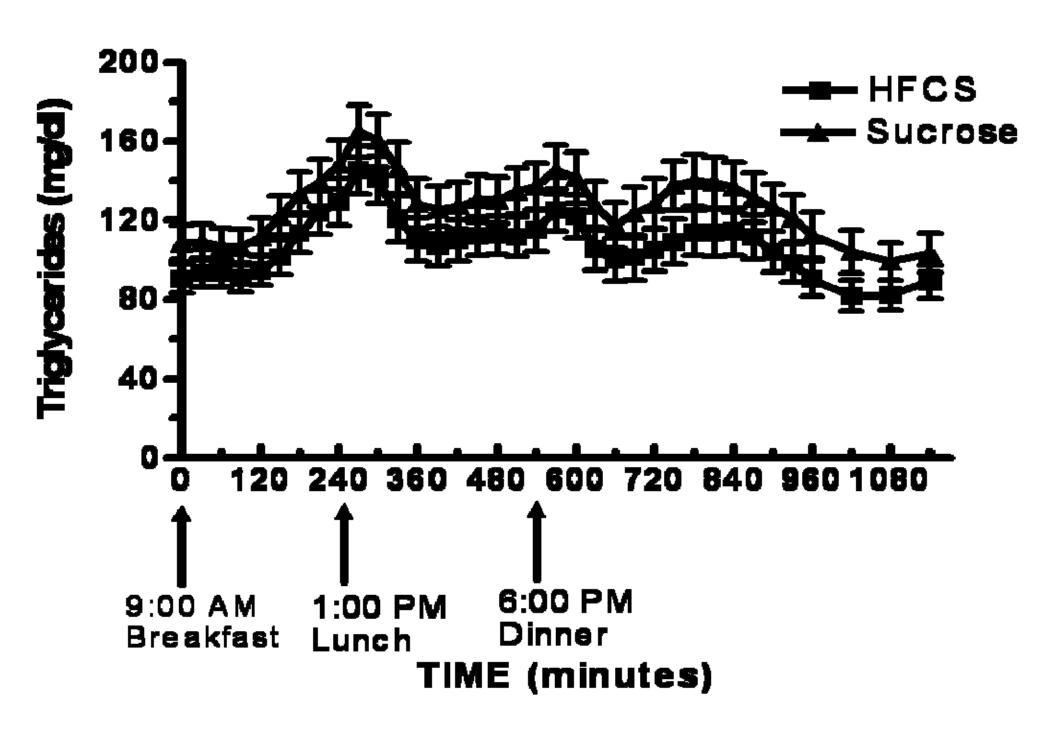
March 18, 2008

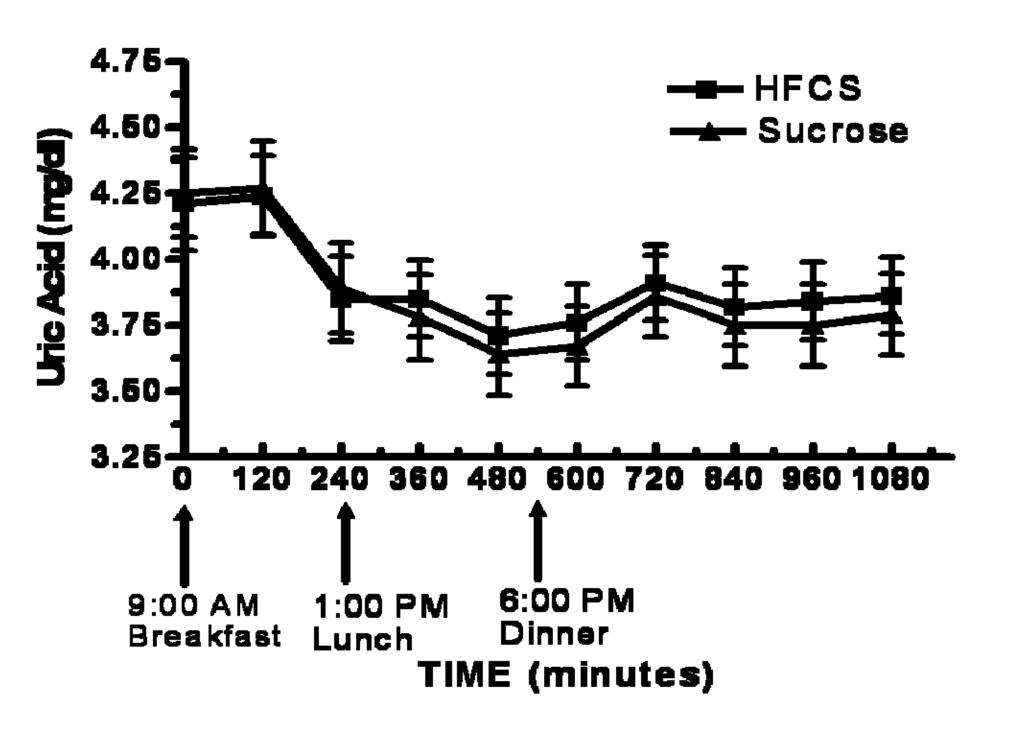
Purpose and Objectives

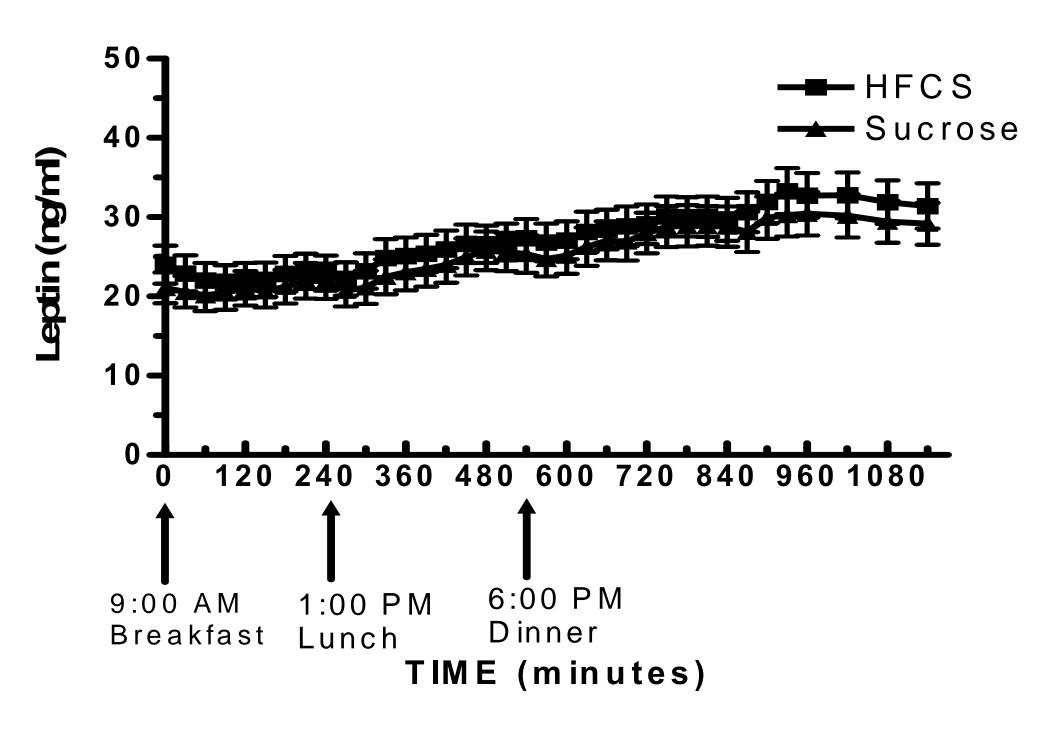
- The purpose of this study was to compare the effects of HFCS-55 (55% fructose) versus sucrose (50% fructose) on 24-hour circulating levels of hormones regulating body weight and appetite (insulin, leptin and ghrelin) and lipid levels (postprandial triglycerides and free fatty acids)
- The primary objective was to explore the impact of HFCS-55 or Suc when consumed as part of mixed meal, on postprandial triglycerides and uric acid levels in a controlled metabolic environment

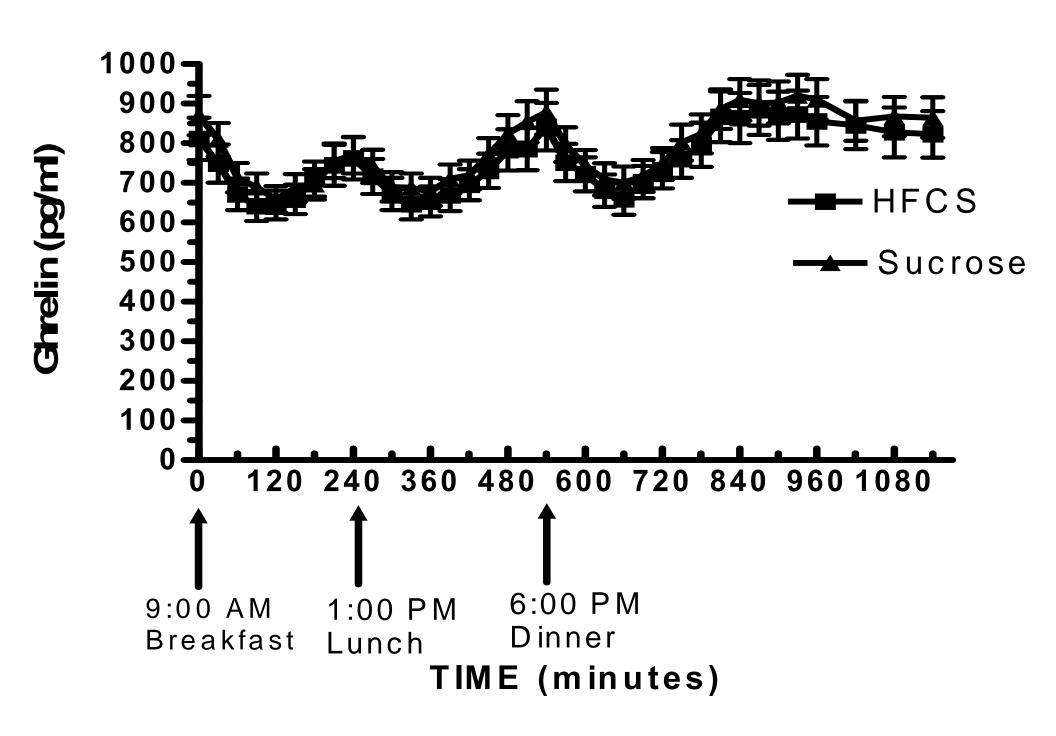












Net Area Under the Curve

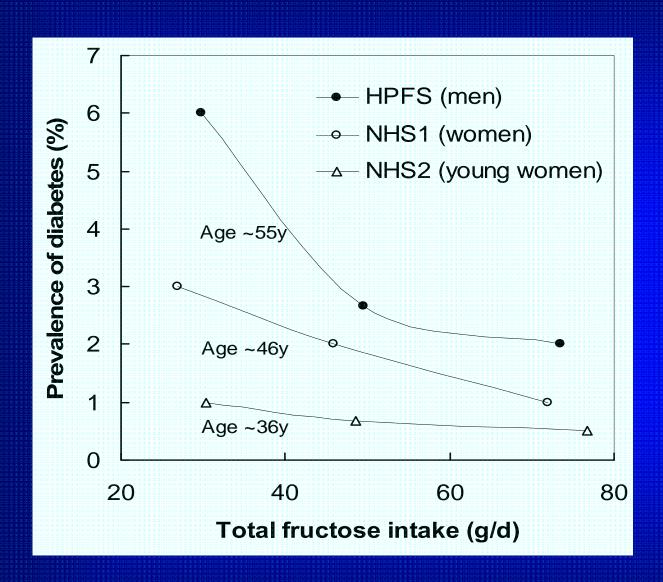
	HFCS	Sucrose	p
Glucose (mg/dl*22 h)	104.53 ± 195.96	77.14 ± 171.31	p>0.05
Insulin (µU/ml*22 h)	510.33 ± 321.43	460.27 ± 263.03	p>0.05
Triglycerides (mg/dl*22h)	304.92 ± 469.92	348.01 ± 524.79	p>0.05
Leptin (ng/ml*22h)	157.98 ± 91.75	153.20 ± 113.33	p>0.05

Conclusions

- Both HFCS and sucrose consumption resulted in similar responses of glucose, insulin, leptin and ghrelin.
- These two sweeteners do not differ significantly in their glycemic or insulinemic responses when consumed with foods, despite their slight difference in fructose content.

Type 2 Diabetes

Cross-sectional data



Limitations:

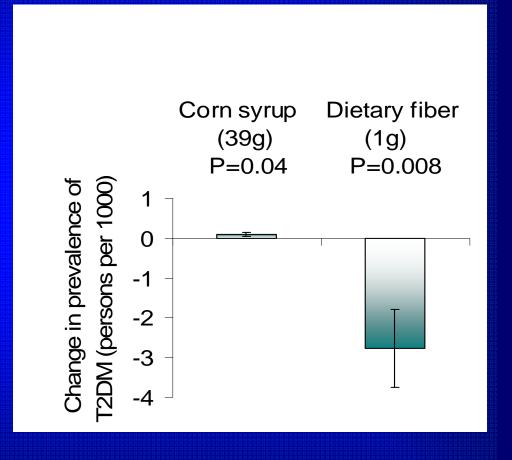
Diabetics eat less
sugar or
report they eat less
sugar or less
sugar contributes to
diabetes or
fructose may be
protective or all
of these.

Again, no suspicion that fructose causes type-2 diabetes

Ecological data: type-2 diabetes and fructose intake

Gross et al, AJCN 2004;79:774-9

Dietary fibre appears 1000 x more preventative than 'high fructose corn syrup' is promotive of type 2 diabetes



Dietary fibre more than HFCS associates with type-2 diabetes

Conclusions

Conclusions

- Fructose is a naturally occurring sugar with a pleasant taste.
- Fructose produces a smaller postprandial rise in plasma glucose than other carbohydrates.
- Fructose appears to have adverse effects on plasma lipids, particularly triglycerides.

Conclusions (cont.)

- Adding large amounts of free fructose to the diet may be undesirable.
- Both HFCS and sucrose consumption resulted in similar glycemic and endocrine responses

Dietary Guidance

- Telling consumers to eat less fructose is not practical
- Focus on added sugars messages from Dietary Guidelines for Americans

"To lengthen thy life, lessen thy meals"

Benjamin Franklin 1733

"and quicken thy heart with exercise"

Questions