



# U.K. Aspartame Awareness Campaign

**Methanol**  
**10%**

Remove Methanol from your Diet and improve your Health

PE1376/H

James McDonald

[www.aspartame-awareness-campaign.co.uk/](http://www.aspartame-awareness-campaign.co.uk/)

Mr Fergus Cochrane  
Clerk to the Public Petitions Committee  
TG.01  
The Scottish Parliament  
EH99 1SP

20th February 2011

Dear Mr Cochrane,

## **Petition PE1376**

The answers given by the Scottish Government and FSA to the PPC of 8<sup>th</sup> Feb 2011 do not address my concerns and I am particularly concerned at the stance of the Scottish Government. The FSA has answered the 4 questions put and I would like to answer them first – I request that the petition stays open.

### **FSA responses:**

Q1 “Why did the Advisory Forum delegates at the 36<sup>th</sup> AF meeting reject their own scientific experts recommendation that aspartame was safe”

The FSA have a different view on what the above question means however, the meaning is quite clear from the last 3 lines of their ref to the 36<sup>th</sup> AF Minutes:-

*“The AF took note of the national expert report and the consultation feedback and agreed to defer further consideration of the issue until results of the ongoing pilot study in the United Kingdom become available.”*

### **Comment:**

After a 2 year review of the safety of aspartame the EFSA National Experts recommended that aspartame was still safe. The AF is a forum of 27 delegates from the 27 EU countries the majority of whom did not agree with the experts. As of this moment in time it would be reasonable to conclude that the EFSA has no mandate to declare aspartame safe. NOTE: The FSA did not answer the actual question which was specifically why did the AF not accept the expert’s recommendation? – We believe the issue was the metabolism of methanol which even the experts conceded they did to not know enough about.

Q2 “ What scientific evidence do you have which confirms SFSA’s contention that free methanol is safe to consume in regular daily doses irrespective of quantity”

**“The methanol released from aspartame is the same as that present naturally in food, released from pectin, produced endogenously or used industrially. It is the same chemical formula and structure and there is no chemical or biological precedent for assuming it will behave differently. The most important consideration is the dose consumed.”**

This is the first paragraph of the FSA’s reply – the text in red is the nub of the argument – methanol from aspartame **is** the same but only as far as it carries the same chemical name MEoH. There is certainly chemical and biological proof that they do behave differently in the body; What is not acceptable is FDA’s **assumption** that they don’t - I was looking for science from them to prove that chronic amounts of free methanol in our food daily does us no harm.

### **Comment:**

What we are discussing here is the FSA belief that the body handles Pure / Free methanol in the same way as for methanol found in nature (Fruits and Vegetables) - this belief is not sustainable.

**PURE /FREE methanol:** Without the need for detailed scientific assumptions, It is an irrefutable fact that if you drink as little as (10ml) 3 tablespoonfuls of Pure methanol it could be fatal from methanol poisoning in as little as 48hrs if medical assistance is not received quickly. The only recommended “cure” is to administer carefully measured intravenous doses of antidote - Ethanol or Fomepizole. The objective is to deliver the antidote in time to prevent the methanol metabolising. If the antidote is delivered in time the metabolic process cannot proceed, no Formaldehyde or Formic acid is formed, giving the body time to clear the methanol without harm; this process has been recorded to take up to 50hrs.

**NATURAL methanol:** (We have no objection to this being referred to as dietary methanol) It is another irrefutable fact, that the methanol found in the fruits and vegetables etc which we consume every day does us absolutely no harm at all irrespective of the amount we eat, it is well known that this methanol is **NEVER** found alone and is always bound to an inhibitor (eg. Ethanol or Pectin there are others) This does the same job as the “cure” above, giving the body time to clear the methanol without harm.

Here we have two distinct and different routes for methanol through the body - The free methanol released from aspartame follows the route for pure methanol, the reason for this is the fact that the 10% methyl ester is produced using pure methanol, at a temperature of 86f the methyl ester converts back to pure methanol it is FREE not bound to any inhibitors and has nothing to prevent it following its destructive metabolic pathway -Methanol >Formaldehyde > Formic acid > Co2 > H2o. It is the formaldehyde and Formic acid which is known to cause methanol poisoning.

To use the amount of methanol we can consume by eating fruits and vegetables and relating that to the methanol consumed through aspartame consumption is misleading and meaningless, unless you are of the belief that they are the same. Pure / free methanol is a very dangerous chemical against which the body has no defences, it has never in 150 yrs been intended for human consumption and its very special effect on humans has for at least 50 years been publically available in the manufacturers MSDS - Material Safety Data Sheet (attached ) – The FSA does not believe the MSDS is a suitable document to refer to when considering whether it is safe to consume methanol in small quantities!

**Methanol produced by the body:** The human body does produce a small amount of methanol for its own use, this is tightly controlled by the body and does us no harm.

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Q3 *“It is suggested by the petitioner that the current ADI for aspartame is 35 times higher than it should be because the toxicity of free methanol is not included – your comments please”*

What the FSA contends in their reply is the methanol released by aspartame - **“was not thought to be relevant as comparable levels of methanol were present in foods, notably fruit juices”** – also, although aware of the 10% free methanol released by aspartame, **“this was not thought to be relevant as comparable levels of methanol were present in foods, notably fruit juices”** For the reasons set out in Q2, any comparison between the amount of methanol delivered by aspartame and that contained in fruits and vegetables is totally irrelevant, the body handles each very differently;

#### **Comments:**

Free methanol is a severe metabolic poison in man; it is a cumulative poison following zero order of kinetics therefore consuming even very small chronic doses is dangerous. COT should have known this and established an ADI for methanol as a matter of course. An ADI was established for the other breakdown product of aspartame DKP (Diketopeperazine) estimated at 3-4% of aspartame, an ADI was set at 0.5mg/kg. In the records we can see the work carried out to establish this - why was this not done for the methanol? - **“It was not thought to be relevant”** Because of the belief that Free and Natural methanol are one and the same, the free methanol was relegated to that of a benign by product of aspartame and not worthy of proper toxicological scrutiny?

The FSA when questioned by us about this commented it was not possible to set an ADI for methanol, I had already done so and they had my workings. These are very simple and based on the scientifically accepted toxicity levels in man which are detailed in the MSDS - 10ml will make you blind and 30ml could kill you – using the 10% of the blinding dose as an NOAEL (No Observable Effect Level) the resultant ADI for Methanol was 0.114mg/kg which would make the ADI for aspartame on that basis 1.14mg/kg – fully 35 times lower than the current 40mg/kg. The FSA have until now never mentioned, challenged nor contested this work. Note: again we see FSA

comparisons between the amounts of methanol in nature to that of methanol from aspartame to “prove” a point – it does not hold up.

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Q4 *“The petitioner quotes the current Hull Pilot study as being “”a defining factor in the EFSA’s decision on the safety of aspartame”” could you explain please and what is the current progress of the study”*

As discussed in Q1. The AF did not endorse the National expert’s recommendation that aspartame was safe; they have deferred further consideration of this until the results of the Hull Pilot study are available in 2011. That surely indicates that the AF delegates are undecided and that the result of the Pilot Study will be a significant factor in their final decision - otherwise why wait for it.

To be placed in this position makes the Pilot study assume a significance it was never designed for - At the outset of the study the FSA chief Scientist, when questioned by the manufacturer of aspartame and members of the food industry on why money was being spent on the study said “The study is not to prove the safety or otherwise of aspartame this has already been established and they were looking at anecdotal evidence” - If the study does not produce conclusive results or shows no adverse effects from aspartame, what then?

#### **Scottish Government responses:**

We have Presented to the Scottish government, the possibility of widespread harm amongst the Scottish people through the chronic consumption of free methanol from aspartame in their diet since 1982; also our contention that something looks very wrong with the approval process which allowed aspartame onto the British market. This being a devolved matter I would have hoped the Scottish Government, might have taken steps to independently consider our evidence and reasons behind calling for the ban on consuming methanol, I am concerned that we are simply being referred straight back to the SFSA/FSA with whom clearly we are in dispute.

After attending the Dundee SFSA meeting in 2009 I was concerned at the lack of knowledge the committee had of aspartame and none of them knew it contained methanol. None of the meeting reports from its inception contained any mention whatsoever of aspartame yet since 2000 aspartame safety has been reviewed at least 4 occasions and two of their members sit on the main FSA Board. If the safety a food product is being reviewed, the Scottish People need to be informed so they can make an informed choice whether to consume the product or not - Scotland appears to have abdicated its responsibility in the case of aspartame to London – is this wise?

Our Petition to ban free methanol from our food chain is a cheap and simple resolution to what is a hidden but serious health threat, in the UK today we are seeing more and more anecdotal reports of harm from aspartame consumption, sufferers come to campaign groups for help, because GP’s are unaware that their patients are consuming a daily diet of methanol so are unable to help them - this alone should be of concern to the Health service.

This is not a scientific problem now but a health one, so far we have been denied the opportunity to put our case to health professionals who still do not realise the nation is consuming methanol every day in their diet, we believe they are the ones who should be examining the multitude of evidence available – on this occasion sick people need doctors not scientists.

To take the petition forward I would like to request an opportunity to meet with representatives of the Scottish medical profession and MP’s to present our case for getting methanol out of the food chain. I would suggest a private meeting in the first place and the mix of attendees agreed prior.

We must say something of anecdotal evidence. Anecdotal evidence occurs usually many years (0-20) after someone starts consuming aspartame it is the term used by scientists to describe the personal stories of hundreds of thousands of people worldwide who believe they have been harmed by aspartame consumption (including me) the FSA’s opinion of anecdotal evidence is that it is unreliable, however without exception all the reports follow basically the same pattern:-

The person becomes ill - their doctor is unable to match the symptoms to any specific illness; The patient “discovers” aspartame and stops consuming it; Their symptoms disappear immediately or are much improved in a very short time.

Shortly after aspartame came onto the market in the US the FDA started receiving many complaints about harm from aspartame, from 1984 until 1995 when they stopped recording them they logged over 10,000 individual

complaints covering 92 symptoms - 85% of all food complaints in the period were about aspartame. It should be noted that the ADI of aspartame in the US is 50mg/kg – 25% higher than ours (40mg/kg) this could account for the fact that in the UK we have not yet had the same volume of complaints, another factor is relatively few people particularly our medical practitioners, are aware that aspartame exists and that it contains methanol – the symptoms reported by anecdotal evidence sufferers in many cases is exactly the same as for methanol poisoning.

Anecdotal evidence is the result of long term exposure to aspartame consumption; it is not enough to dismiss the implications just because it offends scientific protocol, it is the health of our children, mothers, parents we are dealing with here, no one is safe. This issue must be honestly, rationally and independently examined by health professionals to ascertain the true merit of the argument – methanol is very bad for your health and should not be consumed in ANY quantity.

Yours sincerely,

James McDonald  
(UKAAC)

Please find below a link to the MSDS for Methanol obtained from the MI (Methanol Institute) website.

<http://www.methanol.org/pdf/MethanolMSDS.pdf>