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Institute of Nutrition, Mahidol University Thailand Risk Assessment and Surveillance Center (TRAC)



Mahidol University Institute of Nutrition **Outline of presentation** 1. Introduction 2. Objectives

- 3. Method of study
- 4. Results of the study
- 5. Conclusion and recommendation



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Research team



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1. Introduction

Sweeteners, particularly those low or no caloric value, have been approved by various organizations including CODEX. Some of them were used widely as food additives in many countries around the world.

The additives became more popular as the health awareness amongst consumers grew



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The obesity is increasing as a global trend, leading to the increase in NCDs. The consumption of energy dense food (high consumption of sugar from food and drink) is one of the important factors due to consumer preference for sweet taste.

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Alternative sources of sweetness are being sought for use in place of sugar in various foods.

Low/non caloric sweeteners (LNCS) became more popular and are used widely, particularly drinks and other food items as the low calorie options. The use of LNCS has been growing rapidly in recent years



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The process of approval for use of LNCS as food additive has been conducted by the regulatory agencies, through the use of risk analysis concept set by CODEX.

The risk assessment is applied in setting the maximum use level of sweeteners in combination with the food consumption data of the population in the country. In Thailand, the Thai FDA has been using the national food consumption data surveyed in 2006 (ACFS). The data set does not cover some of the food items developed in the recent years.

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Therefore, the dietary exposure of three important sweeteners (aspartame, acesulfame-k and sucralose) has been studied in Thai consumers.

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2. OBJECTIVES

General:

To determine the usage and potential/actual exposure of consumers to Low/No Calorie sweeteners (LNCS: focus on Aspartame, Ace-K and sucralose)

Specific:

- 1. Market survey of product containing LNCS (follow CODEX category for screen, industrial information and ACFS list of foods)
- 2. To determine the household use of LNCS sweetener in foods/beverages containing sweeteners and others sources as mentioned above which consumed at home.

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- 3. To determine the consumption of LNCS sweetener in foods/beverages containing sweeteners and others sources as mentioned above which consumed outside the home by individual consumers.
- 4. To determine the levels of LNCS sweetener in foods/beverages containing sweeteners or dishes and processed foods available to consumers
- 5. To evaluate the total exposure of LNCS sweetener from the data obtained from survey studies.





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Objective 1:

Market survey of product containing LNCS (follow CODEX category for screen, industrial information and ACFS list of foods)



Mahidol University Institute of Nutrition **Results of "Market survey"** LNCS sweetener items could be separated in to 2 items,

1. Add in food type and

2. Mixed in food type.

LNC sweetener products in Thailand markets

Food groups	Number of Products	Number of Brands
1. Add in food	15	11
2. Mixed in food	12	
2.1 General food	13	5
2.2 Specific food	39	14
2.3 Snack	0	0
2.4 Beverage		
2.4.1 Coffee/Tea/Co-co/Chocolate/Ginger/Herb	85	32
2.4.2 Cereal	2	2
2.4.3 Soft drinks	70	23
2.4.4 Energy drinks	5	4
2.5 Candy	59	16
2.6 Chewing gum	41	6
2.7 Seasoning	2	1
Total	331	114

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3) Market survey Market survey places

✓ Nakhon Pathom province

- Lotus (Salaya)
- 7-11 (Sa haporn branch at Salaya)
- Food land (The Biro Salaya)
- Max value (Salaya Mall)
- TOP Supermarket (Central Salaya)
- ✓ Samut Sakhon province and Phetchaburi
 - CJ (Bann Bor branch)
 - Mae-kim-lite (แม่กิมไล้) (Phetchaburi)
- ✓ Bangkok
 - Gourmet Market (Siam Paragon)
 - Home Fresh Mart (The Mall Bangkhae) and
 - Villa Market (Soi Aree)



survey Record brands of LNCS products Buy some products

The activity in market

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- for taking a
- photograph

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n	ผถิตภัณฑ์	หน่วย บริโกค	(กรัม)	<a< td=""><td>A</td><td>>A</td><td>นานๆที 1-3 ครั้งค</td><td>(ก็ศ 1-2</td><td>ป่อย รั่ง/สัปด 3-4</td><td>าษ์) 5-6</td><td>บ่อยมาก/ ทุกวัน (ถื่อรั้ง/วัน)</td><td>. หมาย เหตุ</td></a<>	A	> A	นานๆที 1-3 ครั้งค	(ก็ศ 1-2	ป่อย รั่ง/สัปด 3-4	าษ์) 5-6	บ่อยมาก/ ทุกวัน (ถื่อรั้ง/วัน)	. หมาย เหตุ								
1	ผถิตภัณฑ์ D-ee วัลอุให้ความหวานแทนน้ำลาล	หน่วย บริโภก	(กรัม)	<a< td=""><td>A</td><td>>A</td><td>นานๆที 1-3 ครั้ง/ค</td><td>(ที่ศ 1-2</td><td>ปอย รั่ง/สัปด 3-4</td><td>าษ์) 5-6</td><td>ป่อยมาก/ ทุกวัน (ถื่ครั้ง/วัน)</td><td>ทมาย เหตุ</td></a<>	A	>A	นานๆที 1-3 ครั้ง/ค	(ที่ศ 1-2	ปอย รั่ง/สัปด 3-4	าษ์) 5-6	ป่อยมาก/ ทุกวัน (ถื่ครั้ง/วัน)	ทมาย เหตุ								
1	ผถิตภัณฑ์ D-e: วัดถุให้ความหวาหแทหห์าตาล วัตถุให้ความหวานแทนน้ำตาล ชนิดผง	หน่วย บริโภค 1 ชอง	(กรัม) 0.9	<a< td=""><td>A</td><td>>A</td><td>นานๆที่ 1-3 ครั้ง/ค</td><td>(ที่ศ 1-2</td><td>ปอย รั๋ง/สัปด 3-4</td><td>าษ์) 5-6</td><td>ป่อยมาก/ ทุกวัน (ถื่ครั้ง/วัน)</td><td>. หมาย เหตุ</td></a<>	A	>A	นานๆที่ 1-3 ครั้ง/ค	(ที่ศ 1-2	ปอย รั๋ง/สัปด 3-4	าษ์) 5-6	ป่อยมาก/ ทุกวัน (ถื่ครั้ง/วัน)	. หมาย เหตุ								
1	ผถิตภัณฑ์ D-er วัดอุให้ความหวามแทนน้ำตาล วัดอุให้ความหวานแทนน้ำคาล รนิดคง ทรูสาลน จูคราโลส (TRUSLEN SUCRALOSE)	หน่วย บริโภค 1 ซอง	(กรัม) 0.9	<a< td=""><td>A</td><td>>A</td><td>นานๆที 1-3 ครั้งค</td><td>(ก็ค 1-2</td><td>ป่อย รั่ง/สัปด 3-4</td><td>าษ์) 5-6</td><td>ป่อยมาก/ ทุกวัน (ดื่ครั้ง/วัน)</td><td>เหตุ</td></a<>	A	>A	นานๆที 1-3 ครั้งค	(ก็ค 1-2	ป่อย รั่ง/สัปด 3-4	าษ์) 5-6	ป่อยมาก/ ทุกวัน (ดื่ครั้ง/วัน)	เหตุ								
1	ผถิตภัณฑ์ D-ec วัดอุให้ความหวามแทนน้ำตาล วัดอุให้ความหวานแทนน้ำตาล รนิดคง ทรูสาลน จูดราโดส (TRUSLEN SUCRALOSE) วัดอุให้ความหวานแทนน้ำคาล รนิดคง	หน่วย บริโภค 1 ซอง 1 ซอง	 (กรัม) 0.9 1	<a< td=""><td>A</td><td>>A</td><td>นานๆที 1-3 ครั้งด</td><td>(fir 1-2</td><td>ป่อย รั่ง/สัปด 3-4</td><td>กษ์) 5-6</td><td>ป่อยมาก/ ทุกวัน (ถื่ครั้ง/วัน)</td><td>ทมาย เหตุ</td></a<>	A	>A	นานๆที 1-3 ครั้งด	(fir 1-2	ป่อย รั่ง/สัปด 3-4	กษ์) 5-6	ป่อยมาก/ ทุกวัน (ถื่ครั้ง/วัน)	ทมาย เหตุ								
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Appendix 2.1 - General

question

Appendix 2.3-24-hr

dietary recall

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Appendix 2.2-Food

Frequency

Questionnaire (FFQ)

Appendix 2.4-Photo

book

he La	สำคัญที่ แบบสอบถามการบริโภกสารให้ความหวามแทนน้ำตาล อายุ 3 ปี 40+ ปี
evelopi	ment מטוויז א אוועץ או גאראין באסטערי א איירי א אווער א איין א אייר א אווער א איין א אייר א אווער א איין א איי
	(เถพาะเจ้าหน้าที่กรอก)
อายุ ⊡ วันที่ ธถานที่	1. 3-9 ปี □2. 10-18 ปี □3. 19-39 ปี □4. 40-59 ปี □5. 60+ ปี เวลาเริ่มน. เวลาสิ้นชูดน. รังหวัด
ชื่อผู้สัมภ	าษณ์
1. ผู้ตอบเ	แบบสังกาษณ์
— •	สมเอง
1 ,	บุคคลอื่น (ระบุ) ความเกี่ยวข้อง
2. 3180=1	เอียดเพี่ยวกับผู้ถูกสัมภาษณ์
ชื่อ	มามธกุล
ามอร์โทรส	กัพท์
ที่อยู่: เลข	เพื่ซอยพมู่บ้าน/หมู่ที่
ถมน	ช้ำบล/แขวงช้ำเภอ/เขต
ขังหวัด	รหัสไปรษณีย์
วัน/ เดือน	<i>เ เ</i> ป็เกิดมี
LINEAL CONTRACT	🗀 1.ขาย 🔲 2. หญิง น้ำหนัดถ่วนสูงถ่วนสูง
ไรคประจั	กตัว [] 1. โรคเบาหวาน [] 2. โรคหัวไข [] 3. โรคความต้นไลหิดสูง [] 4. ไม่มี [] 5. อื่นๆ
สาสนา	🔲 1.พุทธ 🔲 2.อิสลาม 🛄 3. คริสต์ 🔲 4. อื่นๆ
ระดับการ	เพ็กษา 🔲 0.ไม่ได้รับการฟักษา 🔲 1.ประถมฟักษา 💭 2.มัชยมฟักษา 🔲 3.ปวช-ปวส. 🔛 4.ปรียอยาตรี 💭 5.สงกว่าปรียอยาตรี

🗌 6. อื่นๆ..

LNCS





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Selection of study areas



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The study was conducted in comparison between urban area (Bangkok) and rural area (Suphanburi).

Area cluster random sampling was used to select study areas •



✓ Muang Suphanburi District

- 4 sub districts
- ✓ Doembang-nangbuat District
 - 4 sub districts

- Khet Pathum Wan 1) Khet Bang Khen 2)
- Khet Bang Khae 3)
- Khet Lat Krabang 4)

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The study age groups

The study population were separated into 5 age groups

- 1. Children at primary school (3-9 y)
- 2. High school (10-18 y)

3. University and Young adults (19-39 y)

4.Adults (40-59 y)

5.Elderly (≥ 60 y)



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Study population

The household and population size to be studied were calculated statistically from the available literature data and from the statistic of population size in each area.

The estimation of sample size using below equation

$N = Z2 P(1-P) (DEFF)/d^2$	1.9
N = 1.962 x 0.5(0.5)(2)	P = 1-I
0.052	d :

96 = Z value (∞ = 0.05) or 95% confidence level = estimated prevalence of LNCS sweetener consumption = 0.5 P = estimated prevalence of not consume LNCS sweetener = 0.5 EFF = Estimated design effect = in this study estimate as 2 = tolerable error = 5 %

Required number of participants = 768.32 cases ~ 770 cases

Estimated sample size

Sample size = 770 cases + 10% non response Sample size =770 + 77 = 847 cases that could be divided into age groups

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Training of interviewers

In order to standardize the four questionnaires; general questionnaire, food frequency questionnaire, and the 24-hour recall, the interviewers were trained to follow the protocol to complete the all questionnaires.



The interviewers were trained by Lect. Wanphen Wimonpeerapattana.



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Pretest

✤ After the design of the questionnaires are completed,

they were pretested in our target group.

 While the participants were completing the questionnaire, we asked them to think out loud.

- Each times they read and answered a question they should tell us exactly what came into their mind.
- We took notes on their feedback and modified the questionnaire accordingly to improve it according to the results.



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Pilot study

Before the final questionnaire form was constructed, we also conducted a pilot study to determine if the items were yielding the types of information that was needed. At Nakhon Pathom province, Thailand, thirty people with all range of age group of interest were interviewed.



Pilot studies at Institute of Nutrition, Mahidol University







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Results: Consumption Survey of Suphanburi province, Thailand

The total number of study population in Suphanburi province were **814 cases**.

- Muang Suphanburi District 420 cases,
- Doembangnangbuat District 394 cases

Number of study population in Muang Suphanburi District

Age groups	Urban		R	ural	Total of Age groups		
(years)	male	female	male	female	male	female	
3-9	12	19	20	24	32	43	
10-18	17	21	25	37	42	58	
19-39	44	18	3	18	47	36	
40-59	13	34	17	31	30	65	
≥60	12	22	18	15	30	37	
Tetal of Assess	98	114	83	125	181	239	
Total of Areas	2	212	2	08	4	20	

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Results: Consumption Survey of Bangkok province, Thailand



Thailand

		Areas (district)								
Age groups (years)	Pathumwan		Bangkhen		Bangkhae		Ladkrabang		- rotar of Age groups	
	male	female	male	female	male	female	male	female	male	female
3-9	15	28	15	24	38	45	19	26	87	123
10-18	23	25	18	32	15	20	23	19	79	96
19-39	35	8	13	38	22	8	33	18	103	72
40-59	10	31	6	32	10	31	2	26	28	120
≥60	1	1	7	13	11	27	3	35	22	76
T	84	93	59	139	96	131	80	124	319	487
Total	1	77	1	98	2	27	2	04	8	06

Total number of study population in Bangkok province were **806 cases**. Number of study population by age group in Bangkok



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Results: Consumption Survey of Suphanburi province, Thailand

Number of study population in Doembangnangbuat District

Age groups	Urban		R	ural	Total of Age groups		
(years)	male	female	male	female	male	female	
3-9	28	23	23	8	51	31	
10-18	28	26	35	37	63	63	
19-39	12	21	5	16	17	37	
40-59	9	23	15	47	24	70	
≥60	9	14	6	9	15	23	
T-4-1-6 A	86	107	84	117	170	224	
1 otal of Areas	1	.93	2	01	(3	94	



Required number of participants = 768.32 cases ~ 770 cases per area

Estimated sample size per area

Sample size = 770 cases + 10% non response

Sample size =770 + 77 = 847 cases that could be divided in to age group

 From the estimation of sample size per area, so total cases of study population: 847 X 2 = 1694

No plus with Non response = 1540

Total population in this study: <u>1620 cases</u>



• Total population in this study: 1620 cases







To fulfill the objective 3, the following activities were done.

- Samples containing LNCS were collected from the market and were sent to laboratory for determination of LNCS by HPLC.
- Some data of actual LNCS concentration were contributed by the company, the member of Thailand Industry Council.



			•		• •	
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(Criteria in se	lection of sam	ples for LNCS analysis a	and re	-analysis	
	Criteria 1 by HPLC	in selection of s	samples for LNCS analysis a	ind re-a	analysis	THAILAND

- 1. Selected items that were consumed more than 1% of eater only (>13 cases consumed that item)
- 2. Re-analysis of the items, which known concentration (data from the company and labelling [% containing])

Criteria 2 used maximum limit (ML) level in foods

1. Items that were consumed less than 1% of eater only and

Candy and chewing gum	CODEX standard (ML)
GENERAL STANDARD FOR FOOD ADDITIVES CODEX STAN 192-1995 Adopted in 1995. Revision 1997, 1999, 2001, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014. 2016	 Depend on food / beverage Aspartame 300-10000 mg/kg Aspartame-Aceusulfame K 200-1000 mg/kg Aceusulfame K 200-2000 mg/kg Sucarlose 30-2500 mg/kg



Concentration data were obtained and were used for exposure or intake calculation

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Results: Mean concentration of LNCS in product groups (mg/g)

Food groups (items)			
i ood groups (nems)	Aspartame	Aceusulme-K	Sucarlose
1. Add in food (sweetener pack, light sugar pack, etc.)	21.800	1.133	6.140
(15)			
2. Mixed in food (316)			
2.1 General food (yogurt, jelly and	0.005	0.258	0.160
sweet fish sauce) (13)			
2.2 Specific food (Supplement/	0.564	0.565	1.393
Medical food) (39)			
2.3 Beverage (162)	0.291	0.279	0.156
2.3.1 Coffee (Can/ 3 in 1) (62)	0.126	0.189	0.265
2.3.2 Tea (3 in 1) (7)	3.235	1.700	0.086
2.3.3 Co-co/ Chocolate and malt (3 in 1) (6)	0.225	0.325	0.150
2.3.4 Ginger/ Cereal and Other (3 in 1) (12)	0.100	0.236	0.200
2.3.5 Soft drinks (Ready to drink) (70)	0.144	0.183	0.068
2.3.6 Energy drinks (Ready to drink) (5)	0.800	0.800	0.025
2.4 Candy (59)	0.958	0.341	0.844
2.5 Chewing gum (41)	3.168	1.041	0.544
2.6 Seasoning (2)	0.000	0.125	0.475

Mahidol University Visidom of the Land Dbjective 5 To evaluate the total exposure of LNCS sweetener from the data obtained from survey studies.

To fulfill the objective 5, dietary exposure assessment activities were done by combining food consumption data with LCNS concentration data





Point estimation or deterministic estimation model for calculation of dietary exposure

- Calculation of an average dietary exposure is the product of the average consumption of the foods of interest and the average residues of the substance of interest in those foods.
 - o All estimated intake from all products were added up to obtain total intake.

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	Aspartame-Pe	er capita	LN	CS intake	
Age groups	Sex	N	Sum of Mean exposure (mg/kgBW/day)	Sum of Percentile at 9 Exposure (mg/kgBW/da	
3-9	Male	170	1.95	8.30	
yr.	Female	197	1.67	6.65	
	Total	367	1.80	-	
10-18 yr.	Male	184	1.77	8.40	
	Female	217	1.07	5.37	
	Total	401	1.39	-	
19-39 yr.	Male	168	0.61	2.99	
	Female	145	0.43	2.53	
	Total	313	0.53	-	
40-59 yr.	Male	81	0.31	1.36	
	Female	255	0.18	0.70	
	Total	336	0.23	-	
≥ 60	Male	67	0.05	0.18	
yr.	Female	136	0.12	0.50	
	Total	203	0.09	-	
Total	Male	670	1.18	-	
	Female	950	0.72	-	
	Total	1620	0.91	_	

Mahidol University Institute of Nutrition TRAC Point estimation model))) THAILAND Example

Table 0.3. Food consumption and concentration levels used in the TAMDI calculations^a

Foods and beverages		Consumption (g/day)	Concentration (mg/g)	UUL = allowed maximum (upper use) levels in the
Beverages (not alcoholic)		324	UUL1	different categories of foods
Foods	97.5th-	133	UUL2	or
Exceptions:	percentile			
- Candy, confectionery	/	27	UUL3	used actual concentration
- Condiments, seasonings		20	UUL4	from laboratory
- Alcoholic beverages	V	20	UUL5	• In case of the detected value
- Soups, savouries		20	UUL6	was specified not detected or
- Other exceptions (e.g. chev	wing gum)	2	UUL7	lower than LOD, used half
TAMDI (mg/day) = (324 × UU UUI 4) + (20 × UUI 5) + (20 ×	JL1) + (133 × UU (UUI 6) + (2 × U	JL2) + (27 × UU	L3) + (20 ×	LOQ

Ref.: The TAMDI was used by the European Scientific Committee onFood (SCF) to assess potential exposure to single flavourings (EC, 2003).

0	Mahidol U Wisdom of the La	University	Institut	Institute of Nutrition				
		Acesultame K		LNCS intake				
	Age groups	Sex	N	Sum of Mean exposure (mg/kgBW/day)	Sum of Percentile at 95 _ Exposure (mg/kgBW/day)			
Ĩ	3-9	Male	170	2.45	10.26			
	yr.	Female	197	2.13	8.56			
		Total	367	2.28	-			
		Male	184	2.09	10.14			
	10-18 yr.	Female	217	1.32	6.76			
		Total	401	1.68				
		Male	168	0.68	3.12			
	19-39 yr.	Female	145	0.60	3.19			
		Total	313	0.64	-			
		Male	81	0.30	1.69			
	40-59 yr.	Female	255	0.19	0.87			
		Total	336	0.22	-			
	≥ 60	Male	67	0.06	0.21			
	yr.	Female	136	0.10	0.46			
		Total	203	0.09	-			

Mahidol Wisdom of the L	University and	Institut	e of Nutrition	CALL STREET
	Sucralose- Per ca	pita	LN	CS intake
Age groups	Sex	N	Sum of Mean exposure (mg/kgBW/day)	Sum of Percentile at 95 Exposure (mg/kgBW/day)
3-9	Male	170	1.01	4.33
yr.	Female	197	0.91	3.70
	Total	367	0.96	-
10-18 yr.	Male	184	0.79	3.80
	Female	217	0.60	2.89
	Total	401	0.69	100 A
19-39 yr.	Male	168	0.32	1.53
	Female	145	0.38	1.91
L	Total	313	0.35	j
40-59 yr.	Male	81	0.23	1.37
	Female	255	0.14	0.61
	Total	336	0.17	-
≥ 60	Male	67	0.04	0.17
yr.	Female	136	0.09	0.38
	Total	203	0.07	-

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Risk estimation from exposure of Low/No Caloric Sweetener

The resulting estimated dietary exposure is used in the fourth step of risk assessment, the risk characterization step.





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	Risk estim Aspartame	ation from	exposure of L	ADI value o	ner f codex 40 mg	g/Kg bw/day		ī
	Age groups	Sex	N	Sum of Mean exposure (mg/kgBW/day)	% of ADI (Codex)	Sum of Percentil at 95 Exposure (mg/kgBW/day)	e % of ADI (Codex)	
	3-9	Male	170	1.95	4.87	8.30	20.76	
	yr.	Female	197	1.67	4.17	6.65	16.62	
		Total	367	1.80	4.50	-	-	
	10-18 yr.	Male	184	1.77	4.44	8.40	20.99	
		Female	217	1.07	2.68	5.37	13.43	
		Total	401	1.39	3.49	-	-	
	19-39 yr.	Male	168	0.61	1.52	2.99	7.47	
		Female	145	0.43	1.07	2.53	6.32	
		Total	313	0.53	1.32	-	-	
	40-59 yr.	Male	81	0.31	0.77	1.36	3.40	
		Female	255	0.18	0.45	0.70	1.76	
		Total	336	0.23	0.57	-	-	
	≥ 60	Male	67	0.05	0.14	0.18	0.45	
	yr.	Female	136	0.12	0.30	0.50	1.24	
		Total	203	0.09	0.23	-	-	
	Total	Total	1620	0.91	2.28			

Mahidol University Wisdom of the Land Aspartame-Eater only > ADI value of				Institute of N dex 40 mg/Kg		TRAC	
	Age groups	Sex	Sum of Mean exposure (mg/kgBW/day)	% of ADI (Codex)	Sum of Percentile at 95 Exposure (mg/kgBW/day)	% of ADI (Codex)	THAILAND
	3-9	Male	3.47	8.68	13.27	33.18	
	yr.	Female	3.11	7.77	8.18	20.45	
		Total	3.32	8.31	-	-	
	10-18 yr.	Male	4.93	12.32	19.61	49.02	
		Female	2.91	7.28	14.92	37.29	
		Total	4.06	10_14	-	-	
	19-39 yr.	Male	2.55	6.38	11.22	28.06	
		Female	1.98	4.94	13.88	34.70	
		Total	2.37	5.92	-	-	
	40-59 yr.	Male	2.46	6.15	1.69	4.22	
		Female	1.63	4.08	1.54	3.84	
		Total	1.93	4.83	-	-	
	≥ 60	Male	1.26	3.14	0.00	0.00	
	yr.	Female	1.18	2.95	1.40	3.50	
		Total	1.66	4.14	-	-	

	Mahido Wisdom of th	ol University Reland	In	nstitute of Nu	trition		
1	Age groups	Sex	Sum of Mean exposure (mg/kgBW/day)	% of ADI (Codex)	Sum of Percentile at 95 Exposure (mg/kgBW/day)	% of ADI (Codex)	ND
	3-9	Male	3.86	25.74	15.67	104.50	
	yr.	Female	3.37	22.48	10.86	72.38	
		Total	3.65	24.30	-		
	10-18 yr.	Male	4.44	29.63	21.15	140.99	
		Female	2.88	19.23	11.98	79.89	
		Total	3.91	26.05	-	-	
	19-39 yr.	Male	2.27	15.15	11.97	79.80	
		Female	2.06	13.73	5.90	39.32	
		Total	2.22	14_81	-	-	
	40-59 yr.	Male	1.65	10.99	2.40	15.98	
		Female	1.14	7.60	2.99	19.91	
		Total	1.37	9.11	-	-	
	≥ 60	Male	1.21	8.08	0.00	0.02	
	yr.	Female	0.97	6.49	1.82	12.13	
		Total	1.46	9.72	-	-	

	Mahic Wisdam a	dol Univer Ethe Land	sity	Institu	te of Nutri	tion	· SQUE	24
Acesulfame K- Per capita ADI v				alue of codex	15 mg/Kg b	w/day.	Т	RAC
	Age groups	Sex	N	Sum of Mean exposure (mg/kgBW/day)	% of ADI (Codex)	Sum of Percentile at 95 Exposure (mg/kgBW/day)	% of ADI (Codex)	ND room
	3-9	Male	170	2.45	16.31	10.26	68.42	
	yr.	Female	197	2.13	14.18	8.56	57.05	
		Total	367	2.28	15.17	-	-	
		Male	184	2.09	13.91	10.14	67.57	
	10-18 yr.	Female	217	1.32	8.83	6.76	45.07	
		Total	401	1.68	11.17	-	-	
		Male	168	0.68	4.52	3.12	20.83	
	19-39 yr.	Female	145	0.60	4.02	3.19	21.25	
		Total	313	0.64	4.29	-	-	
		Male	81	0.30	1.98	1.69	11.30	
	40-59 yr.	Female	255	0.19	1.29	0.87	5.80	
		Total	336	0.22	1.46	-	-	
	≥ 60	Male	67	0.06	0.43	0.21	1.42	
	yr.	Female	136	0.10	0.66	0.46	3.06	
		Total	203	0.09	0.59	-	-	

0	Mahic Wisdom a	dol Univer	sity	Institu	ite of Nutrit	tion	- STATES	-11
;	Sucralose-	Per capi	ta ADI v	value of code	x 15 mg/Kg l	bw/day.	TRAC	
	Age groups	Sex	N	Sum of Mean exposure (mg/kgBW/day)	% of ADI (Codex)	Sum of Percentile at 95 Exposure (mg/kgBW/day)	% of ADI (Codex)	ND Taken
	3-9	Male	170	1.01	6.75	4.33	28.85	
	yr.	Female	197	0.91	6.07	3.70	24.64	
		Total	367	0.96	6.39	-	-	
	10-18 yr.	Male	184	0.79	5.28	3.80	25.36	
		Female	217	0.60	3.97	2.89	19.28	
		Total	401	0.69	4.57	-	-	
	19-39 yr.	Male	168	0.32	2.12	1.53	10.17	
		Female	145	0.38	2.56	1.91	12.73	
		Total	313	0.35	2.32	-	-	
	40-59 yr.	Male	81	0.23	1.54	1.37	9.13	
		Female	255	0.14	0.92	0.61	4.10	
		Total	336	0.17	1.11	-	-	
	≥ 60	Male	67	0.04	0.26	0.17	1.12	
	yr.	Female	136	0.09	0.62	0.38	2.57	
		Total	203	0.07	0.49	-	-	

Session 2-01 Dr. Tanaviyutpakdee-Dietary Exposure of Sweeteners in Thai Consumers

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Sucralo	se(Eater or	lý) ADI valu	e of codex 15	i mg/Kg bw/da	IY. TRAC
Age groups	Sex	Sum of Mean exposure (mg/kgBW/day)	% of ADI (Codex)	Sum of Percentile at 95 Exposure (mg/kgBW/day)	% of ADI (Codex)
3-9	Male	1.71	11.37	8.94	59.57
yr.	Female	1.63	10.90	9.80	65.30
	Total	1.66	11.08	-	-
10-18 yr.	Male	1.98	13.18	8.75	58.32
	Female	1.49	9.93	18.64	124.24
	Total	1.72	11.47	-	
19-39 yr.	Male	1.34	8.93	3.42	22.78
	Female	1.39	9.26	5.95	39.70
	Total	1.33	8.89	-	-
40-59 yr.	Male	1.08	7.18	2.50	16.64
	Female	0.75	5.03	3.16	21.06
	Total	0.87	5.81	-	-
≥ 60	Male	0.47	3.15	0.00	0.01
yr.	Female	1.06	7.04	0.99	6.60
	Total	0.96	6.40	-	-

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Conclusion



- The overall picture shows that the most exposed age group for these three LNCS are 3-9, 10-18, and 19-39 yrs.
- However, it can be seen that the mean exposure to three LNCS is quite far below the ADI assigned by JECFA.
- Some risk of exposure are found in eater only group
 - For Acesulfame K in male with the age group of 3-9 yr and 10-18 yr
 - For Sucralose in female with the age group of 10-18 yr.



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4. Conclusion

- This study is the first study to find the actual consumption of LNCS in Thailand, which focused on aspartame, acesulfame K and sucralose.
- LNCS items in Thailand could be separated into 2 categories, <u>add in food</u> type and <u>mixed in food</u> type. Cover 114 brands, 331 items.
- The top 3 items that frequently consumed by study population were soft-drink or ready-to-drink, energy drink and coffee (3 in 1, can)

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5. Recommendation

It is recommended that these sweetener should be use with caution as some groups of population may be at risk of over exposure. These sweeteners should be used according to the guidelines and GMP principles.

The criteria of the use of food additives is to be use at its lowest level that it is required to exert its functions and not at it maximum limit (ML) level.



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