The New Skinny on Snack Foods

By ACSH Staff — January 1, 1996

The latest news from Washington is both tasty and satisfying: Food and Drug Administration Commissioner David Kessler has agreed with his scientific advisory panel and approved Olestra, the first noncaloric fat replacer, for limited use. Within months we will be able to buy a variety of delectable zero-fat snacks a real-life case of getting something for (almost) nothing.

Dr. Kessler's decision represents a triumph of sound science and common sense over scaremongering with the American consumer the clear winner. Despite the shrill objections of public health nannies the FDA has rejected the sort of government paternalism that argues, "we know what's best for you; and since you might misuse this new product, we are going to withhold it to protect you from yourself."

Olestra is basically made of table sugar and vegetable oil; but because its molecules are much larger than those of ordinary fat, Olestra is not absorbed in digestion. Olestra adds rich taste and texture to food without adding calories. A typical serving of potato chips can be transformed from a snack with 10 grams of fat and 160 calories to one with zero grams of fat and 70 calories.

Since everyone these days seems to be anti-fat, one might be forgiven for assuming that Olestra would be welcomed by everyone. But this has not been the case: The "usual suspects" who routinely condemn products of food technology declared war on Olestra and so did a few respected scientists.

The scientists cited two primary concerns: First, Olestra may cause gastrointestinal distress, Second, it may prevent the absorption of essential fat-soluble vitamins and "carotenoids," a group that includes beta-carotene, a much-hyped dietary component that some people claim offers protection from cancer.

Olestra is not your typical food additive. It is more like a new food ingredient an ingredient that has the potential eventually to replace a substantial portion of the calories we ingest each day. Thus, it is understandable that Dr. Kessler and his advisors chose to take the potential health concerns seriously. But in the end the commissioner and his panel put the charges in scientific context and took into account the probable real-life use of Olestra.

The gastrointestinal effects of eating a substantial amount of Olestra-containing foods are similar to the effects of eating a diet high in fiber. If consumers do not like the effects, they will limit their use of Olestra. Addressing the problem of vitamin absorption, Procter and Gamble, Olestra's manufacturer, solved it by attaching all four fat-soluble vitamins (A,D,E and K) to the Olestra molecule so there would be no net loss.

The carotenoid issue proved to be a bit more difficult to nail down. There are no recommended daily allowances for beta-carotene and its nutrient family members. The only known role that beta-

carotene plays is as a source of vitamin A. (The claim that beta-carotene protects against cancer has never been established. Further, a recent report from the National Cancer Institute concluded that beta-carotene supplementation not only failed to reduce cancer risk but actually boosted risk in some cancer-prone individuals.

The pertinent facts in considering possible carotenoid loss are these:

* Foods interact with each other in complex ways. Nutrients are routinely lost at one meal and regained at another. For example, in a typical high-fiber diet the absorption of beta-carotene is decreased by 50 percent or more.
* Olestra in snack foods would replace just a small portion of the fat in a diet, thus allowing substantial absorption of carotenoids with full-calorie fats.
* The small diminishing effects Olestra could have on beta-carotene-like nutrients would occur only if Olestra-containing snacks were eaten as part of the same meal as carotene-rich foods (potato chips with carrots, for example). There could be a program of public education maybe even a label stressing the advisability of consuming Olestra foods apart from beta-carotene- containing primary meals. This program could be combined with advice to consumers to increase their daily intake of vegetables to compensate for any potential loss.

In the end, the FDA regulators accepted these realities and agreed that an advance in food technology should not be withheld from the majority because a minority might abuse or misuse it.

When the FDA does get down to considering additional uses for Olestra, the agency should follow the same common-sense scientific approach it used in clearing Olestra's first regulatory hurdle. Having concluded that the substance is intrinsically safe, the government should let informed consumers use their own judgment in deciding when and how often to incorporate Olestra into a well-balanced, varied diet.

(From Priorities Volume 8, Number 1, 1996)
