

ACTION ON SUGAR- ADVOCACY OR ACTIVISM?

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Royal Colleges

Honorary Consultant Cardiologist- Frimley Park Hospital

Special thanks to Professor Simon Capewell, Professor Robert Lustig,
Professor Graham Macgregor, Katherine Jenner



UK: The fat man of Europe?

- 2/3 adults obese or overweight
 - obesity will double by 2050
 - 1/3 children obese or overweight
 - Obesity costs NHS £5billion+
- ↑ ↑£10 billion by 2050

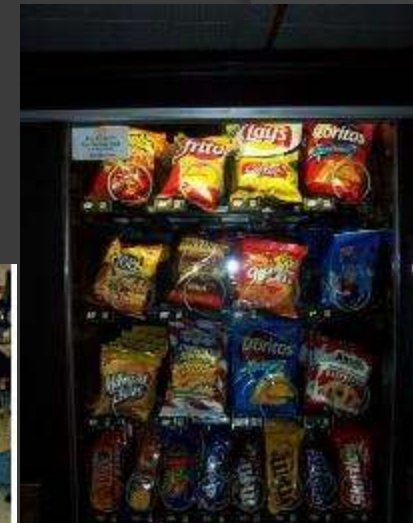




Snack Foods Are Everywhere



- Car washes
- Book stores
- Hardware stores
- Gas stations
- Office buildings (vending machines)
- Health clubs/gyms
- Video stores
- Car repair shops





Guys Hospital
St Thomas Street

200 yards



SUGAR



Why pick
on poor old
SUGAR??



Cola commercials in the 1950s

For a better start in life
start **COLA** earlier!

How soon is too soon?

Not soon enough. Laboratory tests over the last few years have proven that babies who start drinking soda during that early formative period have a much higher chance of gaining acceptance and "fitting in" during those awkward pre-teen and teen years. So, do yourself a favor. Do your child a favor. Start them on a strict regimen of sodas and other sugary carbonated beverages right now, for a lifetime of guaranteed happiness.

The Soda Pop Board of America
1515 W. Hart Ave. - Chicago - ILL.

- Promotes Active Lifestyle!
- Boosts Personality!
- Gives baby essential sugar!

“How soon is too soon?
Not soon enough.....”

“Laboratory test have
proven....”

“.. for a lifetime of
guaranteed happiness”

1972

**PURE
WHITE
AND
DEADLY**

John Yudkin



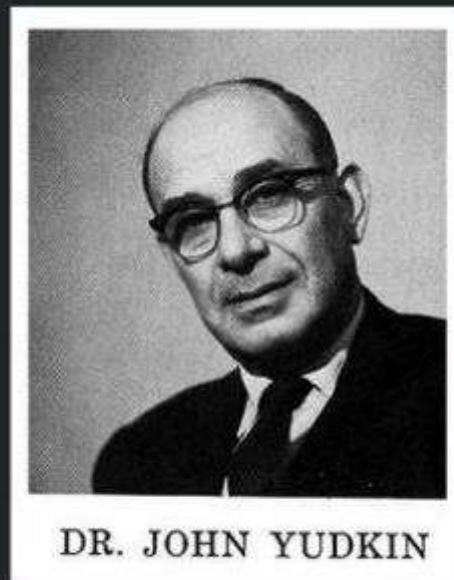
John Yudkin: Hung out to dry



DR. JOHN YUDKIN

John Yudkin *SUGAR; Pure white & deadly* (1972)

- Message not welcomed by sugar & processed food industries
- These INDUSTRIES
 - used various methods to impede Yudkin's work.
(listed in the final Chapter of "Pure, White and Deadly")
 - Interfered with his research funding & publication



John Yudkin *SUGAR; Pure white & deadly*

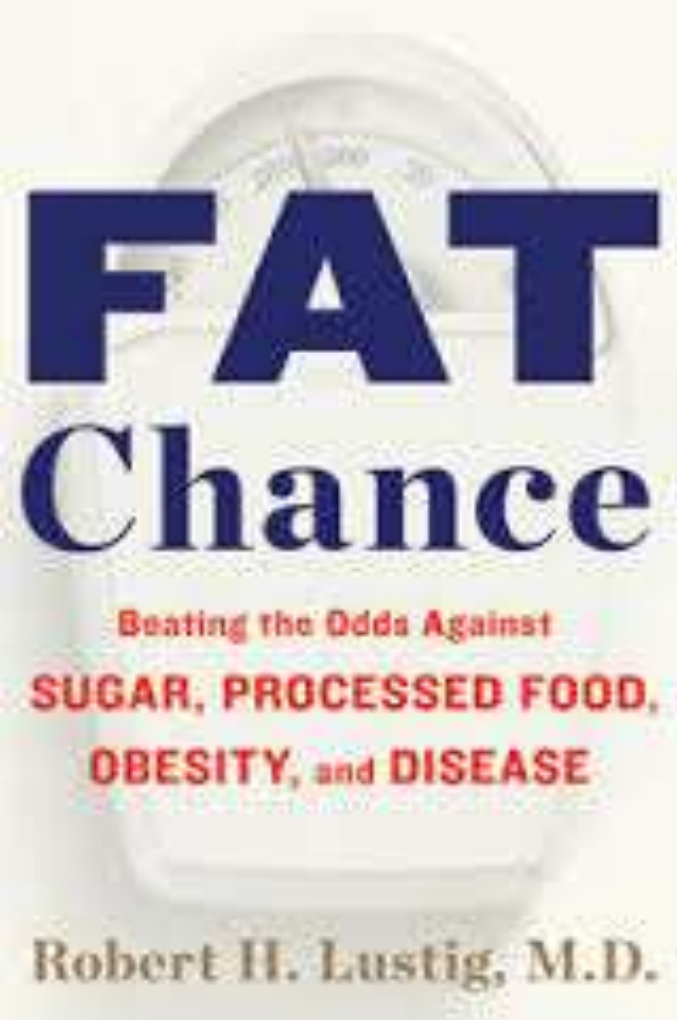
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 - Funded US epidemiologist **ANCEL KEYS**
 - Ancel Keys proposed that saturated fat was primary cause of CHD
 - used rancorous language & personal smears to dismiss the evidence that sugar was the true culprit
- Food industry successfully discredited case against sugar
- Yudkin died in 1995. His warnings were no longer taken seriously



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Robert Lustig

"Sugar: The Bitter Truth"

YouTube (2009) 4,800,000 views

Nutrition Facts

Serving size 1 Teaspoon (4g)

Servings Per Container About 567

Amount Per Serving

Calories 15

% Daily Value*

Total Fat 0g **0%**

Sodium 0mg **0%**

Total Carbohydrate 4g **1%**

Sugars 4g

Protein 0g

*Percent Daily Values are based on a
2,000 calorie diet.

INGREDIENTS: SUGAR

Fructose is not glucose

Common wisdom: A calorie is a calorie, and
“Sugar is just “empty calories”

Elliot et al. Am J Clin Nutr, 2002
Bray et al. Am J Clin Nutr, 2004
Teff et al. J Clin Endocrinol Metab, 2004
Gaby, Alt Med Rev, 2005

Le and Tappy, Curr Opin Clin Nutr Metab Care, 2006
Wei et al. J Nutr Biochem, 2006
Johnson et al. Am J Clin Nutr 2007
Rutledge and Adeli, Nutr Rev, 2007
Brown et al. Int. J. Obes, 2008

Fructose is not glucose

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“Sugar is just “empty calories””

But:

- Chronic fructose exposure promotes liver fat accumulation, which promotes Metabolic Syndrome

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“Sugar is just “empty calories”

But:

- Chronic fructose exposure promotes liver fat accumulation, which promotes Metabolic Syndrome (toxicity)
- Metabolic syndrome (3 of hypertension, dysglycaemia, increased triglycerides, decreased HDL, and increased waist circumference
- 66% of those admitted with acute myocardial infarction have metabolic syndrome with 50% increased mortality or hospital readmission at 1 year.

Elliot et al. Am J Clin Nutr, 2002

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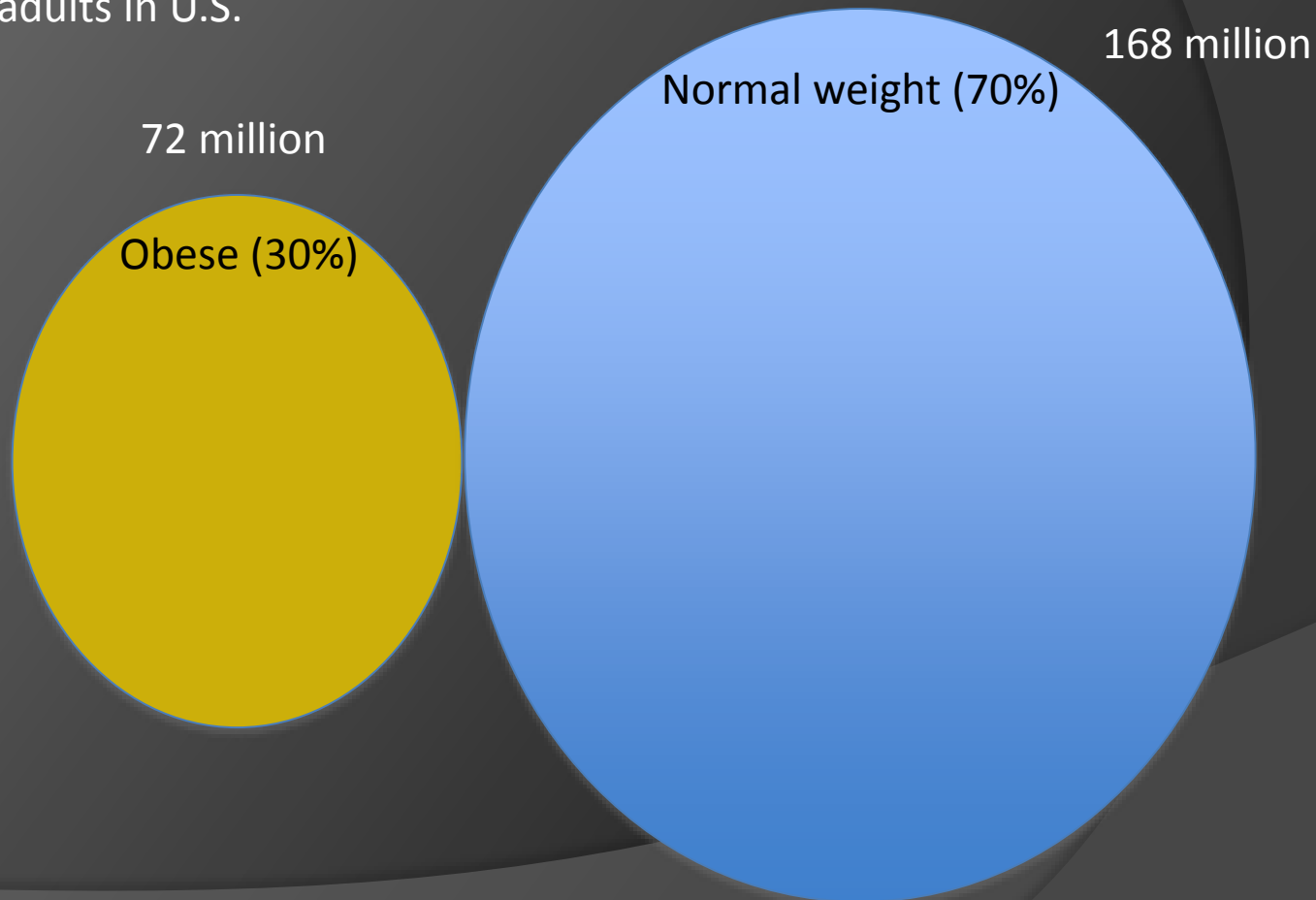
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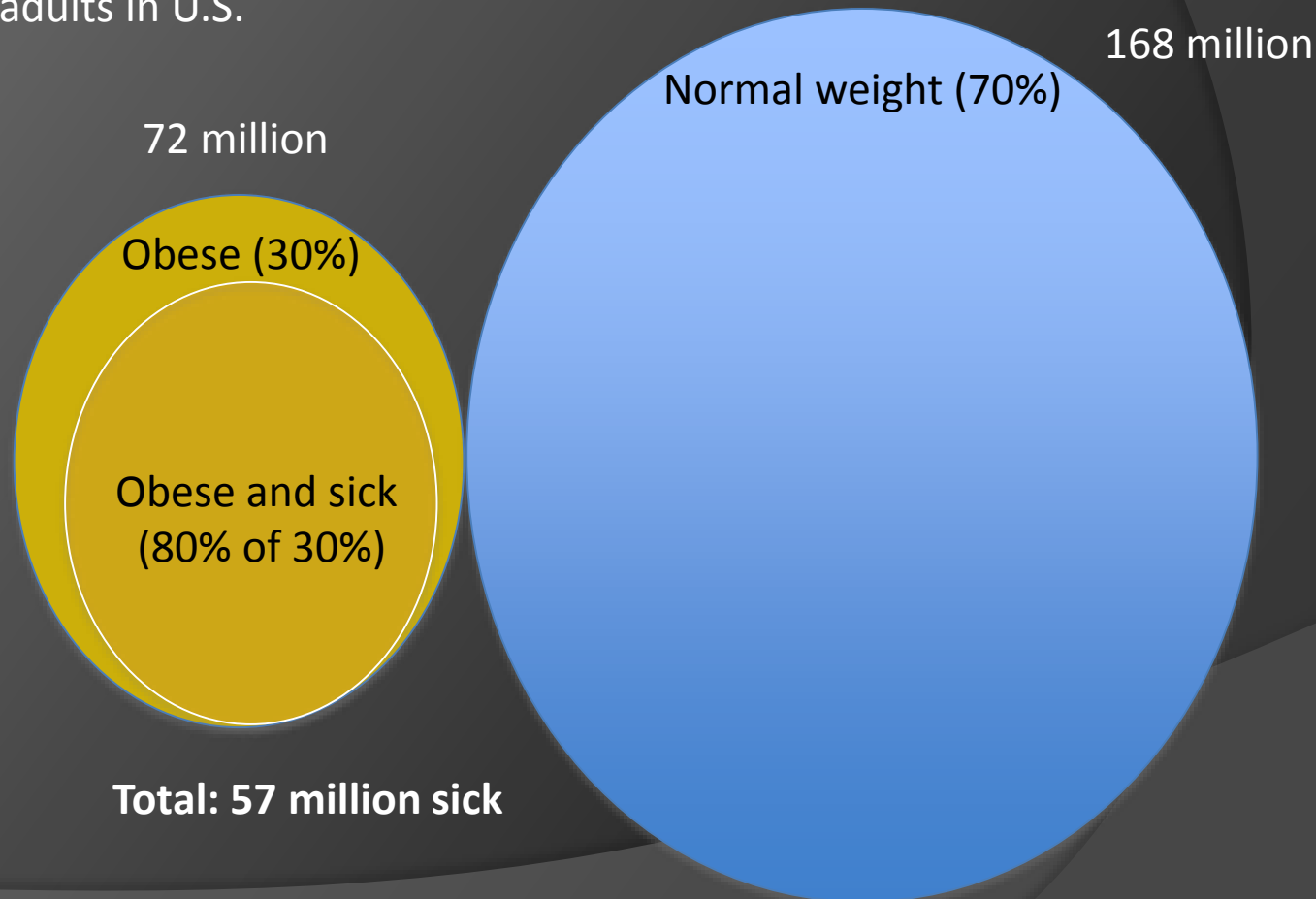
“EXCLUSIVE” VIEW OF OBESITY AND METABOLIC DYSFUNCTION

240 million adults in U.S.



“EXCLUSIVE” VIEW OF OBESITY AND METABOLIC DYSFUNCTION

240 million adults in U.S.



168 million

Normal weight (70%)

72 million

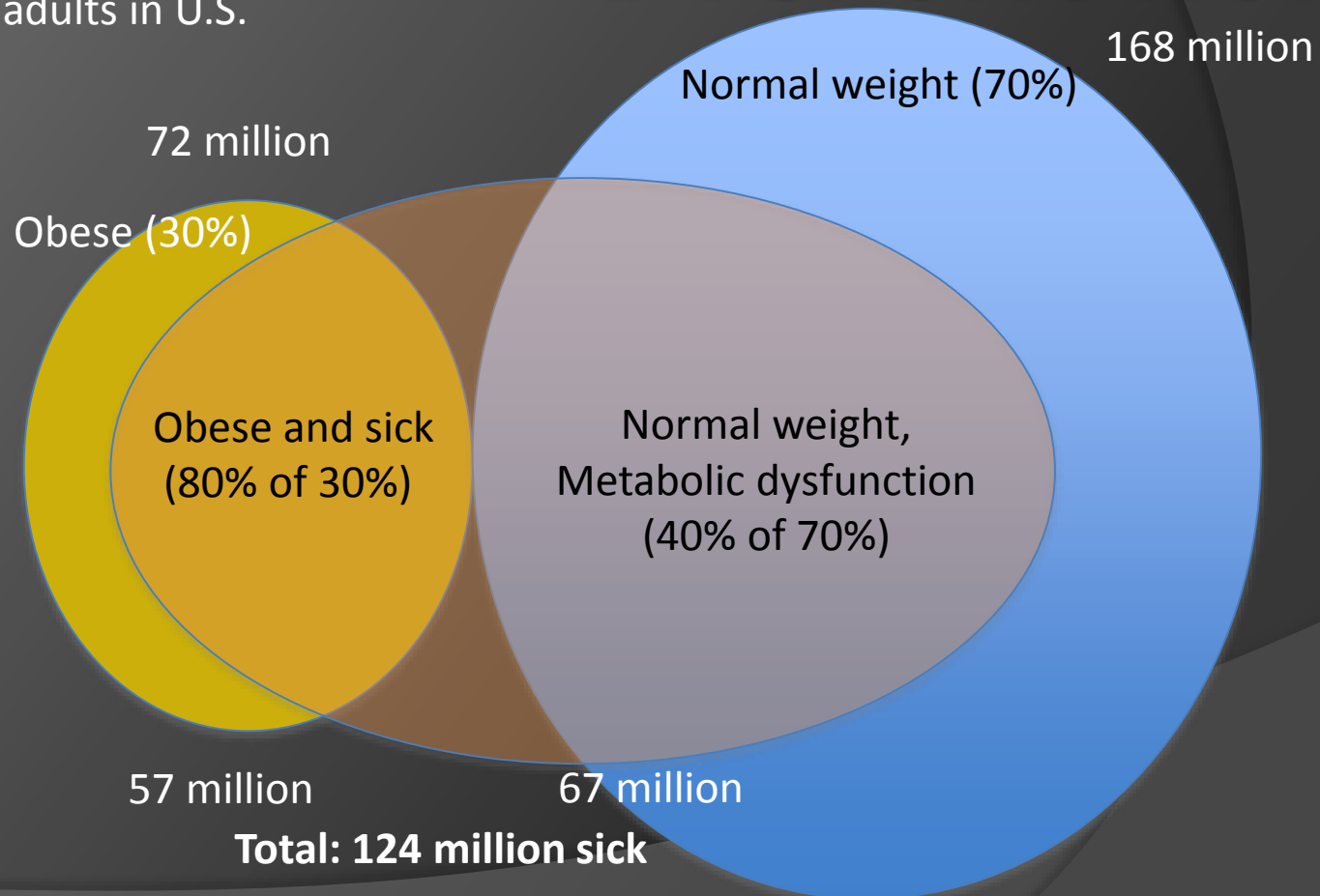
Obese (30%)

Obese and sick
(80% of 30%)

Total: 57 million sick

“INCLUSIVE” VIEW OF OBESITY AND METABOLIC DYSFUNCTION

240 million adults in U.S.



The Fiction

“Beating obesity will take action by all of us, based on one simple **common sense** fact: **All calories count**, no matter where they come from, including Coca-Cola and everything else with calories...”

-The Coca Cola Company, “Coming Together”, 2013



The Science

- ◎ **Some Calories Cause Disease More than Others**
- ◎ **Different Calories are Metabolized Differently**
- ◎ **A Calorie is Not A Calorie**
 - **Fiber**
 - **Protein**
 - **Fat**
 - **Fructose**

Are All Calories The Same?

"It's extremely naive of the public and the medical profession to imagine that a calorie of bread, a calorie of meat and a calorie of alcohol are all dealt in the same way by the amazingly complex systems of the body. The assumption has been made that increased fat in the bloodstream is caused by increased saturated fat in the diet, whereas modern scientific evidence is proving that refined carbohydrates and sugar in particular are actually the culprits."

Professor David Haslam, Guardian 24th January 2013

SSB's and BMI-adjusted risk of diabetes in EPIC-Interact (Europe)

Table 2 HRs (and 95% CIs) for type 2 diabetes according to type and amount of sweet beverage consumption in the EPIC-InterAct study

| Variable and model | <1 glass ^a / month HR | 1–4 glasses ^a / month HR ^b (95% CI) | >1–6 glasses ^a / week HR ^b (95% CI) | ≥1 glass ^a / day HR ^b (95% CI) | <i>p</i> for trend |
|------------------------------------------------------------------------|----------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------|------------------------------------------------------------|--------------------|
| Juices and nectars (median intake, g/day) | (0.0) | (17.1) | (100.0) | (338.3) | |
| No. cases | 5,837 | 1,702 | 3,425 | 720 | |
| Crude model | 1.00 (ref) | 0.88 (0.80, 0.98) | 0.89 (0.83, 0.94) | 0.97 (0.85, 1.11) | 0.64 |
| Adjusted model | 1.00 (ref) | 0.91 (0.80, 1.02) | 0.96 (0.88, 1.04) | 1.00 (0.87, 1.15) | 0.63 |
| Adjusted model+EI | 1.00 (ref) | 0.91 (0.81, 1.02) | 0.96 (0.88, 1.04) | 0.99 (0.86, 1.14) | 0.84 |
| Adjusted model+EI+BMI | 1.00 (ref) | 0.97 (0.86, 1.10) | 1.04 (0.96, 1.13) | 1.06 (0.90, 1.25) | 0.21 |
| Total soft drinks ^c (median intake, g/day) | (0.0) | (20.0) | (95.1) | (413.1) | |
| No. cases | 5,794 | 1,604 | 2,987 | 1,299 | |
| Crude model | 1.00 (ref) | 1.21 (1.07, 1.36) | 1.30 (1.18, 1.43) | 1.78 (1.55, 2.04) | <0.0001 |
| Adjusted model | 1.00 (ref) | 1.21 (1.07, 1.37) | 1.26 (1.13, 1.42) | 1.58 (1.35, 1.84) | <0.0001 |
| Adjusted model+EI | 1.00 (ref) | 1.21 (1.07, 1.37) | 1.27 (1.12, 1.43) | 1.59 (1.35, 1.88) | <0.0001 |
| Adjusted model+EI+BMI | 1.00 (ref) | 1.17 (0.97, 1.42) | 1.11 (0.98, 1.26) | 1.21 (1.05, 1.41) | 0.0005 |
| Sugar-sweetened soft drinks ^d (median intake, g/day) | (0.0) | (19.3) | (94.3) | (425.7) | |
| No. cases | 3,948 | 964 | 1,599 | 605 | |
| Crude model | 1.00 (ref) | 1.14 (0.97, 1.35) | 1.16 (1.05, 1.28) | 1.68 (1.40, 2.02) | <0.0001 |
| Adjusted model | 1.00 (ref) | 1.13 (0.97, 1.31) | 1.04 (0.94, 1.15) | 1.39 (1.16, 1.67) | <0.0001 |
| Adjusted model+EI | 1.00 (ref) | 1.12 (0.96, 1.31) | 1.04 (0.94, 1.15) | 1.39 (1.15, 1.69) | 0.001 |
| Adjusted model+EI+BMI | 1.00 (ref) | 1.19 (0.91, 1.56) | 1.07 (0.94, 1.21) | 1.29 (1.02, 1.63) | 0.013 |
| Artificially sweetened soft drinks ^e (median intake, g/day) | (0.0) | (18.3) | (89.0) | (500.0) | |
| No. cases | 5,242 | 689 | 894 | 291 | |
| Crude model | 1.00 (ref) | 1.09 (0.97, 1.23) | 1.52 (1.36, 1.69) | 1.84 (1.52, 2.23) | <0.0001 |
| Adjusted model | 1.00 (ref) | 1.10 (0.93, 1.29) | 1.46 (1.29, 1.65) | 1.93 (1.47, 2.54) | <0.0001 |
| Adjusted model+EI | 1.00 (ref) | 1.08 (0.93, 1.26) | 1.46 (1.29, 1.65) | 1.88 (1.44, 2.45) | <0.0001 |
| Adjusted model+EI+BMI | 1.00 (ref) | 1.05 (0.81, 1.35) | 1.18 (1.03, 1.35) | 1.13 (0.85, 1.52) | 0.24 |

An international econometric analysis of diet and diabetes

Only changes in sugar availability predicted changes in diabetes prevalence

Every extra 150 calories increased diabetes prevalence by 0.1%

But if those 150 calories were a can of soda, diabetes prevalence increased 11-fold, by 1.1% (95% CI 0.03 — 1.71%, $p < 0.001$)-

Independent of BMI and Physical activity

This study meets the Bradford Hill criteria for Causal Medical Inference:

—dose

—duration

—directionality

—precedence

Recognition at the American Heart Association

AHA Scientific Statement

Dietary Sugars Intake and Cardiovascular Health A Scientific Statement From the American Heart Association

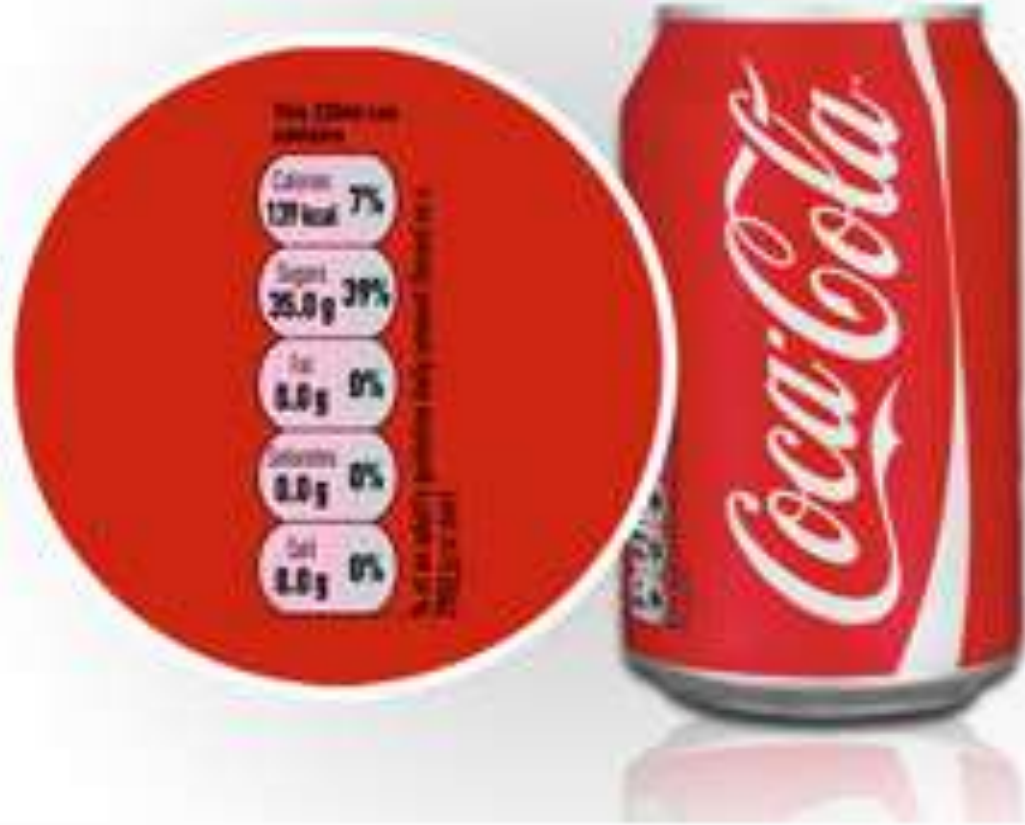
Rachel K. Johnson, PhD, MPH, RD, Chair; Lawrence J. Appel, MD, MPH, FAHA;
Michael Brands, PhD, FAHA; Barbara V. Howard, PhD, FAHA;

Michael Lefevre, PhD, FAHA; Robert H. Lustig, MD; Frank Sacks, MD, FAHA;

Lyn M. Steffen, PhD, MPH, RD, FAHA; Judith Wylie-Rosett, EdD, RD;

on behalf of the American Heart Association Nutrition Committee of the Council on Nutrition,
Physical Activity, and Metabolism and the Council on Epidemiology and Prevention

**Recommends reduction in sugar intake from 22 tsp/day
to 9 tsp/day (males) and 6 tsp/day (females)**



This 120ml can
contains

Calories
120 kcal 7%

Sugar
35.0 g 39%

Fat
0.0 g 0%

Sodium
0.0 g 0%

Salt
0.0 g 0%

The fat and sodium percentages have rounded down to 0%

Sugar Nutritional Labelling Guidelines

- ◉ WHO 2003- Added sugar *No more* than 10% of energy- Intrinsic sugars 10% (whole fruit, vegetables...)
- ◉ But current UK labelling references only total sugars as GDA – 20% of energy or 90g (22.5 tea spoons of sugar)
- ◉ In the United States sugar not considered a nutrient so no equivalent of GDA for sugar.
- ◉ Extremely difficult for consumers to determine how much sugar is added to foods
- ◉ In the United States 1/3 sugar from SSBs, 1/6 from Ice creams, chocolates etc but half of sugar consumption from non-junk foods.
- ◉ US Department of Agriculture recently removed a published database for the added sugar content of selected foods stating “no method can analyse for added sugars so their amounts must be extrapolated or supplied by food companies, many of which are **not willing** to make public such proprietary information.”

OBSERVATIONS

FROM THE HEART

The dietary advice on added sugar needs emergency surgery

Foods that we think of as junk are only half the problem

Aseem Malhotra *interventional cardiology specialist registrar, Royal Free Hospital, London*

Are current guideline daily amounts (GDAs) fit for purpose? With a worsening obesity crisis and increasing prevalence of type 2 diabetes, this is a pertinent question. According to Professor Tom Sanders, head of nutritional sciences at King's College London, "guideline daily amounts enable consumers to make informed choices on balancing their diet by identifying guideline levels for key nutrients and calories consumed each

day. Although a well balanced diet may contain intrinsic sugars in the form of whole fruit, vegetables, dairy products, and many grains, the body does not require any carbohydrate from added sugar. Since the American Heart Association publication, almost four years ago, several randomised controlled trials and observational studies have implicated sugar consumption with increasing rates of obesity and type 2 diabetes.

Coverage

- Supportive quotes from Professor Terence Stephenson, Prof Simon Capewell, Prof Timothy Noakes
- Picked up by UK press, LA Times and BBC Breakfast...

The Corporate Playbook Of Big Sugar

- Emphasise physical activity over diet
- Little change in exercise levels in the past 30 years whilst obesity has rocketed (Pontzer H, Raichlen DA, Wood BM, Mabulla AZ, Racette SB, Marlowe FW. Hunter-gatherer energetics and human obesity. *PLoS One* 2012;7:e40503.)
- Learn from History: 50 years from publication of links between smoking and lung cancer before regulation because Tobacco industry successfully adopted a strategy of planting doubt, denial, confusing the public and even buy the loyalty of scientists- whatever it takes to protect their only interest- profit
- CEOs of every major Tobacco firm went in front of US Congress in 1994 and swore under oath that they didn't believe that nicotine was addictive or smoking caused lung cancer.



BILL TURNBULL “ WE SHOULD ADD THAT WE DID ASK 10 DIFFERENT COMPANIES OR ORGANISATIONS ASSOCIATED WITH CARBONATED BEVERAGES, SUPERMARKETS, SUGAR MANUFACTURERS ETC TO DISCUSS THIS WITH DR MALHOTRA,...ALL OF THEM WERE UNAVAILABLE”

Action On Sugar- Coalition of experts

- Professor Graham MacGregor, Professor of Cardiovascular Medicine at the Wolfson Institute, Queen Mary University of London and Chairman Action on Sugar
- Dr Aseem Malhotra, Cardiologist and Science Director of Action on Sugar
- Professor Andrew Rugg-Gunn, Co-director of the Human Nutrition Research Centre, Royal Victoria Infirmary, NewcastleProfessor
- Aubrey Sheiham, Emeritus Professor of Dental Public Health, School of Life and Medical Sciences, University College LondonProfessor
- David Haslam, Chair at National Obesity Forum
- Professor Jack Cuzick, Institute Director and Head of Centre for Cancer Prevention, Wolfson Institute of Preventive Medicine, Barts & The London School of Medicine, London
- Professor John Wass, Professor of Endocrinology, Oxford University
- Professor Peter Sever, Professor of Clinical Pharmacology & Therapeutics, Faculty of Medicine, National Heart & Lung Institute, Imperial College London
- Professor Philip James, Public Health policy Group and International Obesity Taskforce, London
- Professor Simon Capewell, Professor of Clinical Epidemiology, University of Liverpool
- Professor Sir Nicholas Wald, Professor of Environmental and Preventive Medicine, Wolfson Institute of Preventive Medicine, Barts & The London School of Medicine, London
- Professor Timothy Lang, Professor of Food Policy, City University, London
- Dr Robert Lustig, Professor of Pediatrics in the Division of Endocrinology at University of California, San Francisco, USA
- Dr Yoni Freedhoff, Assistant professor of Family Medicine, University of Ottawa, Canada
- Dr Mike Rayner, Director of the British Heart Foundation Health Promotion Research Group, Nuffield Department of Population Health, University of Oxford
- Professor Jack Winkler, Professor of Nutrition Policy (retired), London Metropolitan University, London
- Malcolm Kane, Cambridge Food Control Ltd, Cambridge
- Neville Rigby, Writer, journalist and NGO consultant, former director of policy and public affairs at the International Obesity Task Force
- Tam Fry, Head spokesperson for the National Obesity Forum
- Professor Peter Whincup, Professor of Cardiovascular Epidemiology, St George's, University of London
- Professor Richard J Johnson, Department of Medicine, University of Colorado Denver - See more at: <http://www.actiononsalt.org.uk/actiononsugar/#sthash.vUrd8x3c.dpuf>

OBSERVATIONS

FROM THE HEART

Saturated fat is not the major issue

Let's bust the myth of its role in heart disease

Aseem Malhotra *interventional cardiology specialist registrar, Croydon University Hospital, London*



Indeed, recent prospective cohort studies have not supported any significant association between saturated fat intake and cardiovascular risk.⁵ Instead, saturated fat has been found to be protective. The source of the saturated fat may be important. Dairy foods are exemplary providers of vitamins A and D. As well as a link between vitamin D deficiency and a significantly increased risk of cardiovascular mortality, calcium and phosphorus found commonly in dairy foods may have antihypertensive effects that may contribute to inverse associations with cardiovascular risk.⁶⁻⁸ One study showed that



Action on Sugar



Setting up the launch

Preparation (late 2013)

Building professional network

Website www.actiononsugar.org

Press release #1

Preparation for interviews

Action on Sugar

Press release #1: key points

- ‘Action On Sugar’ launched by leading experts uniting in call to tackle & reverse the obesity & diabetes epidemic
- Initially targeting huge & unnecessary amounts of sugar currently being added to our food & soft drinks



Action on Sugar

8 January 2014

Action on Sugar

Press release #1: key points

- 'Action On Sugar' launched by leading experts uniting in call to tackle & reverse the obesity & diabetes epidemic
- Initially targeting huge & unnecessary amounts of sugar currently being added to our food & soft drinks

eg Cola has staggering 9 tea spoons of added sugar

Large amounts of sugars hidden in everyday foods: *yoghurts, ketchup, ready meals & bread, vitamin waters, sports drinks*

- Children particularly vulnerable

8 January 2014

Daily Mail

Thursday 9th
January 2014

SUGAR IS 'THE NEW TOBACCO'

Health chiefs tell food giants to slash levels by a third

Action on Sugar

Press release-quotes from 6 members:

“Sugar is the new tobacco”



Action on Sugar

Action on Sugar

Press release: quotes from members:

Actually said:

“Sugar is the new tobacco. Everywhere, sugary drinks and junk foods are now pressed on unsuspecting parents and children by a cynical industry focussed on profit not health.”

Showtime! January 9th

Press coverage excellent

Page 1 in Daily Mail, *and* Mail on line

Food crusaders' new challenge: cut sugar to save NHS £50bn a year

By David Heffernan and Robert Hodge

THE FOOD CRUSADERS have a new challenge. It is to reduce government-subsidised sugar in food. They say it is the only way to save the NHS £50bn a year.

The new campaign is led by the British Dietetic Association (BDA) and the British Nutrition Foundation (BNF). It is a joint effort to reduce the amount of sugar in food and drink. The BDA says that the average British person consumes 110g of sugar a day. This is 10 times the amount recommended by the World Health Organisation (WHO). The BNF says that the average British person consumes 120g of sugar a day. This is 12 times the amount recommended by the WHO.

The campaign is aimed at reducing the amount of sugar in food and drink. The BDA says that the average British person consumes 110g of sugar a day. This is 10 times the amount recommended by the WHO. The BNF says that the average British person consumes 120g of sugar a day. This is 12 times the amount recommended by the WHO.

Obesity experts launch campaign to cut sugar in food by 30%

By David Heffernan

Obesity experts have launched a campaign to cut sugar in food by 30%. The campaign is led by the British Dietetic Association (BDA) and the British Nutrition Foundation (BNF). It is a joint effort to reduce the amount of sugar in food and drink. The BDA says that the average British person consumes 110g of sugar a day. This is 10 times the amount recommended by the WHO. The BNF says that the average British person consumes 120g of sugar a day. This is 12 times the amount recommended by the WHO.

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NewScientist

SUGAR ON TRIAL

What you really need to know about the white stuff

SPECIAL REPORT
STEM CELL REVOLUTION
The breakthrough the world has been waiting for

HOW TO HUMANS
The life of Neanderthal that lay on inside us

ENERGY TELEPORTER
A quantum leap across the universe

MIND MELD
The surprising power of collective thinking

SHOCK TRUTH ABOUT OUR FOOD

HIDE & SWEET

How many spoonsful of sugar in...

1. A large amount of sugar is hidden in many of our favourite foods and drinks. For example, a single can of cola contains 100g of sugar, which is 10 times the amount recommended by the WHO.

2. The average British person consumes 110g of sugar a day. This is 10 times the amount recommended by the WHO.

3. The BDA says that the average British person consumes 110g of sugar a day. This is 10 times the amount recommended by the WHO.

4. The BNF says that the average British person consumes 120g of sugar a day. This is 12 times the amount recommended by the WHO.

Fast food nations

Monday, February 1, 2010 **METRO** 7

Obesity link to fast food 'free-for-all'

OBESITY is a bigger problem in countries with a free-for-all approach to fast food, a US report says. Spending on fast food has increased in every one of the 50 states since 2004. In some states, the increase has been as much as 50 per cent.

The report, by the US Centers for Disease Control and Prevention (CDC), says that the average American consumes 110g of sugar a day. This is 10 times the amount recommended by the WHO.

| Country | Number of fast food outlets per 100,000 people | Per capita consumption (kg per year) |
|---------------------|------------------------------------------------|--------------------------------------|
| Spain | 10.0 | 10.0 |
| USA | 10.0 | 10.0 |
| UK | 10.0 | 10.0 |
| France | 10.0 | 10.0 |
| Germany | 10.0 | 10.0 |
| Italy | 10.0 | 10.0 |
| Japan | 10.0 | 10.0 |
| South Korea | 10.0 | 10.0 |
| China | 10.0 | 10.0 |
| India | 10.0 | 10.0 |
| Brazil | 10.0 | 10.0 |
| Mexico | 10.0 | 10.0 |
| Argentina | 10.0 | 10.0 |
| Colombia | 10.0 | 10.0 |
| Venezuela | 10.0 | 10.0 |
| Chile | 10.0 | 10.0 |
| Peru | 10.0 | 10.0 |
| Ecuador | 10.0 | 10.0 |
| Bolivia | 10.0 | 10.0 |
| Paraguay | 10.0 | 10.0 |
| Uruguay | 10.0 | 10.0 |
| Costa Rica | 10.0 | 10.0 |
| Panama | 10.0 | 10.0 |
| Dominican Republic | 10.0 | 10.0 |
| Honduras | 10.0 | 10.0 |
| Nicaragua | 10.0 | 10.0 |
| Cuba | 10.0 | 10.0 |
| Guatemala | 10.0 | 10.0 |
| El Salvador | 10.0 | 10.0 |
| Haiti | 10.0 | 10.0 |
| Jamaica | 10.0 | 10.0 |
| Trinidad and Tobago | 10.0 | 10.0 |
| Suriname | 10.0 | 10.0 |
| Guyana | 10.0 | 10.0 |
| Belize | 10.0 | 10.0 |
| Paraguay | 10.0 | 10.0 |
| Uruguay | 10.0 | 10.0 |
| Costa Rica | 10.0 | 10.0 |
| Panama | 10.0 | 10.0 |
| Dominican Republic | 10.0 | 10.0 |
| Honduras | 10.0 | 10.0 |
| Nicaragua | 10.0 | 10.0 |
| Cuba | 10.0 | 10.0 |
| Guatemala | 10.0 | 10.0 |
| El Salvador | 10.0 | 10.0 |
| Haiti | 10.0 | 10.0 |
| Jamaica | 10.0 | 10.0 |
| Trinidad and Tobago | 10.0 | 10.0 |
| Suriname | 10.0 | 10.0 |
| Guyana | 10.0 | 10.0 |
| Belize | 10.0 | 10.0 |

Sugar is the 'new tobacco', warn doctors

P6

SUGAR is the 'new tobacco', warn doctors. The World Health Organisation (WHO) has issued a warning that the consumption of sugar is a major cause of obesity and type 2 diabetes. The WHO says that the average British person consumes 110g of sugar a day. This is 10 times the amount recommended by the WHO.

SUGAR IS 'THE NEW TOBACCO'

Health chiefs tell food giants to slash levels by a third

FOOD giants are being told to slash sugar levels by a third. The World Health Organisation (WHO) has issued a warning that the consumption of sugar is a major cause of obesity and type 2 diabetes. The WHO says that the average British person consumes 110g of sugar a day. This is 10 times the amount recommended by the WHO.

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Is Sugar the New Tobacco?

Showtime!

Press coverage excellent

Page 1 in Daily Mail *and* Mail on line

Paper reviews~BBC website & Radio 4

(Paper coverage convinces John Humphries)

“Perfect” interviews on

Today Programme, Sky News, ITN etc

Supportive Public comments on BBC & Mail websites

Is Sugar the New Tobacco? **Showtime!**

Press coverage excellent

Page 1 in Daily Mail

Paper reviews~BBC website & Radio 4

(Paper coverage persuades John Humphries)

“Perfect” interviews on

Today Programme, Sky News, ITN etc

Supportive Public comments on BBC & Mail websites

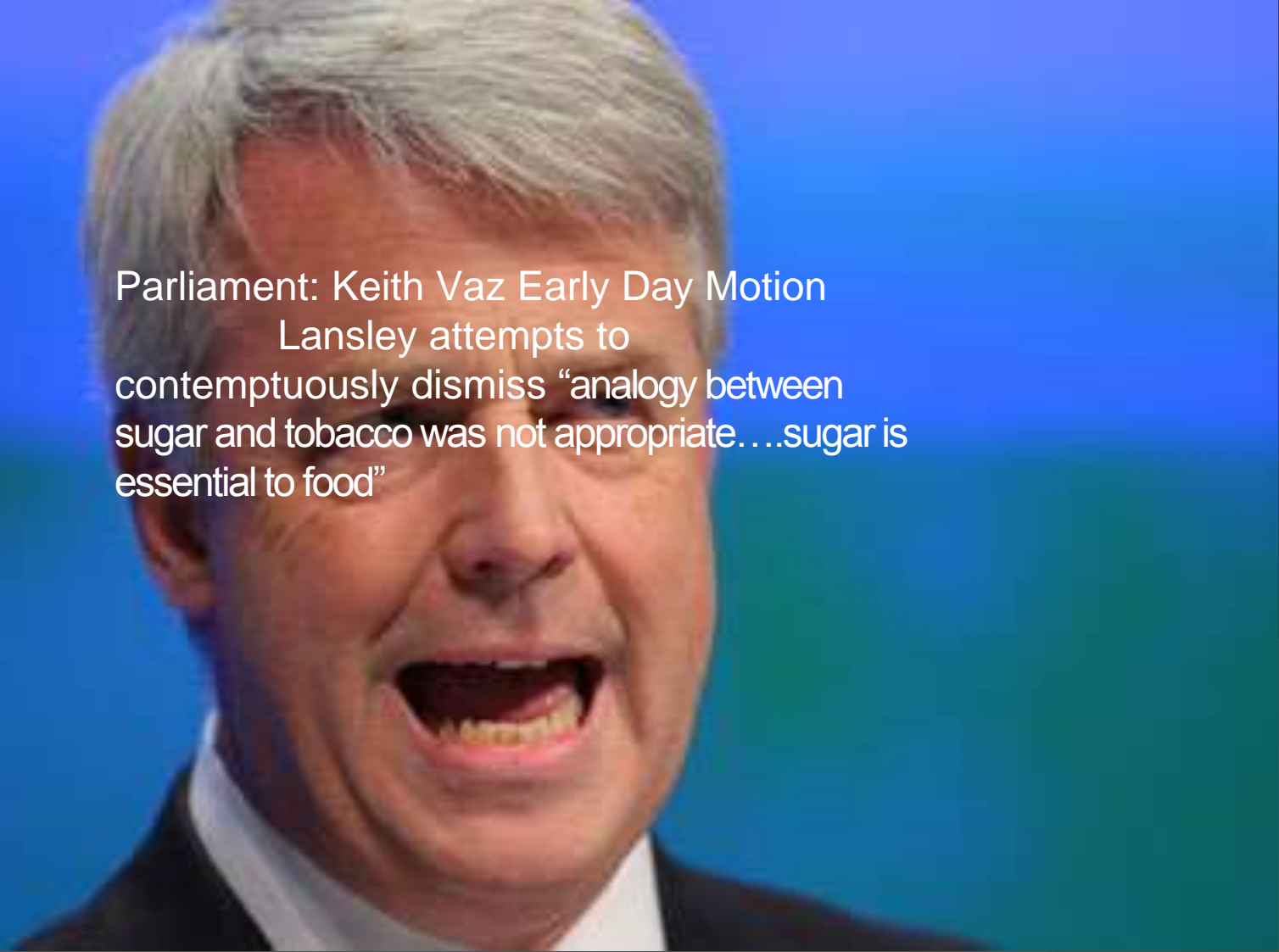
**BUT coverage fading away by midday
then...**

The Empire Strikes Back!



The Empire Strikes Back!

UK government minister Andrew Lansley



Parliament: Keith Vaz Early Day Motion
Lansley attempts to
contemptuously dismiss “analogy between
sugar and tobacco was not appropriate....sugar is
essential to food”

Is Sugar the New Tobacco?

The Empire Strikes back!

Return of the public health Jedis!

Observer Sunday Jan 12th He attempted to rubbish respected public health expert Professor Simon Capewell's statement that sugar is the new tobacco. Lansley then compounded his errors by ignorantly asserting in the House that "sugar is essential to food". It is not. He would have been more accurate in saying "sugar is essential to food industry profits and lining the pockets of its co-opted partners". Lansley was a paid director of marketing company Profero to the end of 2009. Profero's clients have included Pepsi, Mars, Pizza Hut and Diageo's Guinness. Malhotra A

Is Sugar the New Tobacco?

The Empire Strikes back!

Parliament: Keith Vaz Early Day Motion

Lansley attempts to contemptuously dismiss

“analogy between sugar and tobacco was not appropriate....”

but this generated **CONTROVERSY...**

“Lansley backs food sector on sugar”

↑↑media interest...

UK Coverage → international coverage!

→ 2’media: Teen, TV, Womens journals etc

then following week...

Action on Sugar

“Sugar watchdog works for Coca-Cola & Mars”

19 Jan 2014, Sunday Times; then Ch4 Dispatches

***“ The sugar tsars 'in bed' with confectionery giants:
Five of eight members of committee tasked with battling
obesity epidemic have 'worryingly close' ties ”*** (MailOnline)

Action on Sugar

“Sugar watchdog works for Coca-Cola & Mars”

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Five of eight members of committee tasked with battling
obesity epidemic have 'worryingly close' ties”* (MailOnline)

Subsequent Impacts

Grudging praise from PR & Food press

Investment media: FT -thoughtful reactions

Action on Sugar (AoS) consolidates

Festival of Public Health 2014

Wicked Problems #3 OBESITY: Tackling governments and industries?

Sugar Control ~ brief history 2014

Action on Sugar [AoS] launch (January 2014)

BBC & Sunday Times: Sugar watchdog works for Coca-Cola & Mars

WHO (March) NUGAG recommendations sugar ↓10%e ↓ 5%e UK

CMO Sally Davies proposes a sugar tax (April 2014)

AoS Media campaign continues in Feb, March, April, May

BMJ: health warning labels for sugary drinks? (Capewell, May 2014)

Action on Sugar

Further progress

AoS obtains meeting

with **Mr Jeremy Hunt**, Health Secretary (April)

Action on Sugar

Further progress

AoS obtains meeting

with Mr Jeremy Hunt, Health Secretary (April)

Mr Hunt requested ideas for Child Obesity Plan





Action on Sugar

7 point plan (June)



Following a request from Health Secretary *Mr Jeremy Hunt* AoS suggests a government action plan - seven proposed measures:

- ◉ **REFORMULATION: reduce added sugars in food by 40% by 2020**
- ◉ **BAN MARKETING** targeting children (sugary drinks, junk foods)
- ◉ **BAN junk food sports sponsorships (separate exercise from obesity)**
- ◉ **REDUCE** sat fat in ultra-processed foods by 15% by 2020
- ◉ **LIMIT AVAILABILITY of SUGARY DRINKS & JUNK FOOD** (↓portion sizes)
- ◉ **GIVE NUTRITION POLICY** to an **INDEPENDENT AGENCY**
(take it away from Department of Health politics)
- ◉ **INCENTIVISE HEALTHIER FOOD & INTRODUCE A SUGAR TAX**

Sugar Control ~ brief history 2014

Action on Sugar [AoS] launch (January 2014)

BBC & Sunday Times: Sugar watchdog works for Coca-Cola & Mars

WHO (March) NUGAG recommendations sugar ↓10%e ↓ 5%e *UK*

Chief Medical Officer (CMO) Sally Davies (April 2014)

AoS Media campaign continues in Feb, March, April, May

BMJ: health warning labels for sugary drinks? (Capewell, May 2014)

PHE Sugar Reduction Stakeholder Event - 3 June 2014

everyone waiting for the

-SACN report on carbohydrates & sugars (26 June 2014)

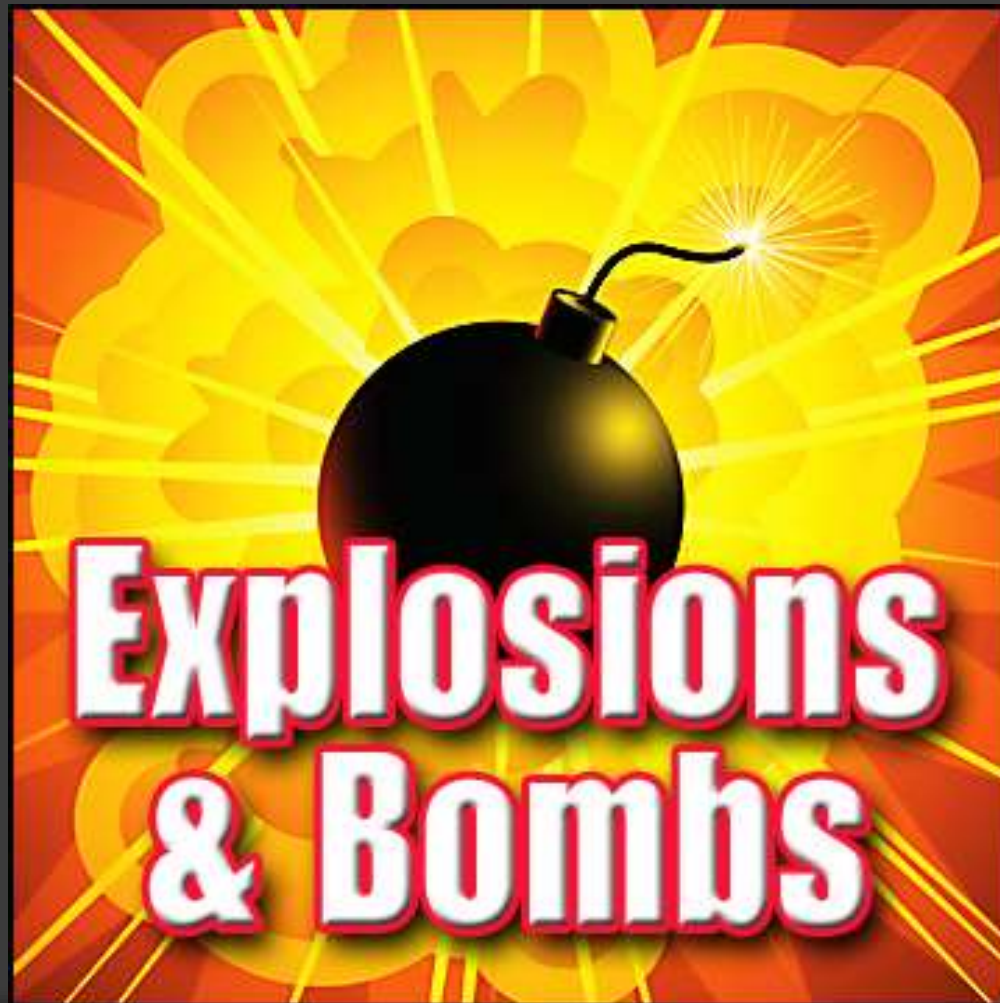
-PHE guidance on sugar reduction (ditto)

AoS Media BLITZ (Posh drinks, Dental limits 2%e, 7 point plan) June

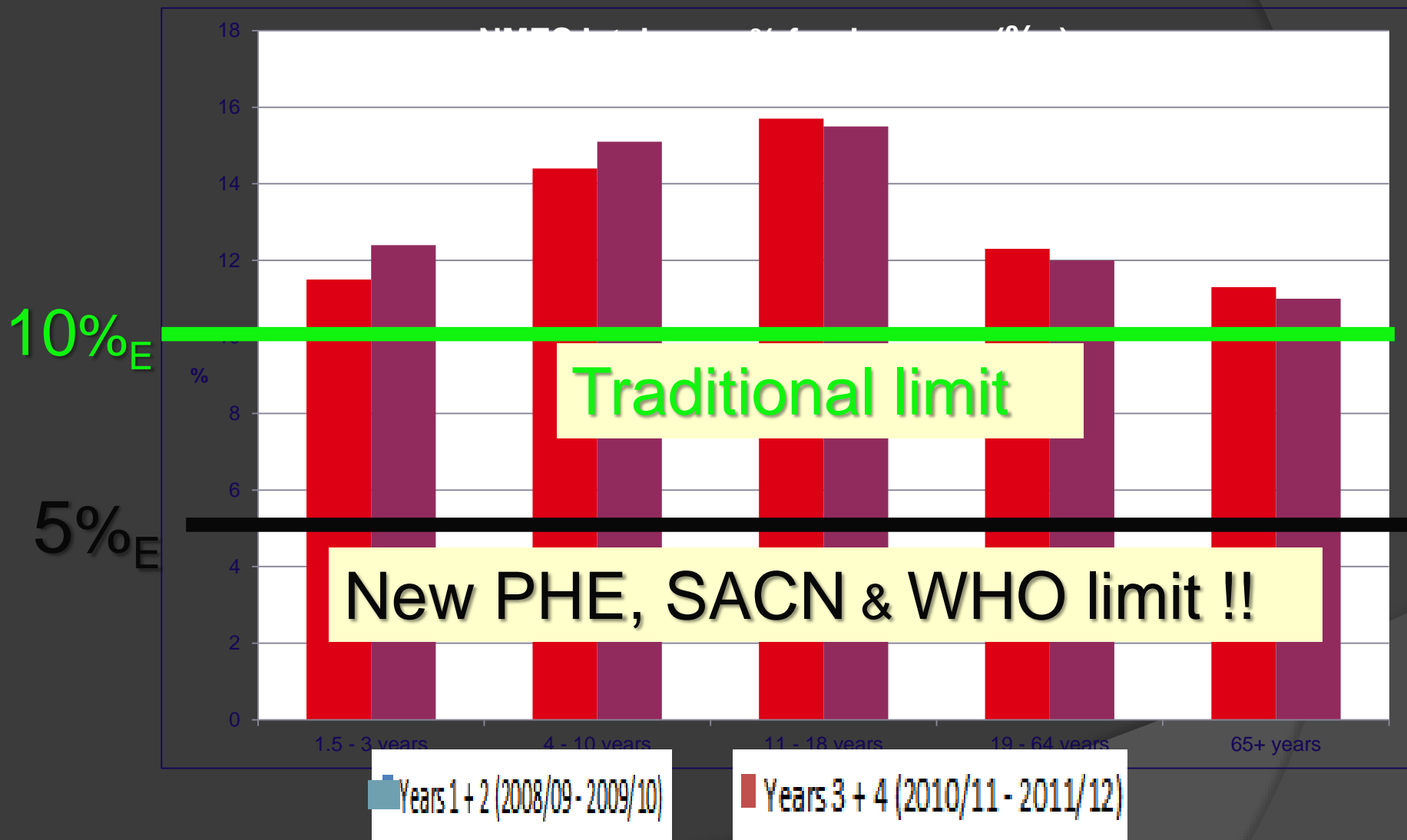
Public Health England & UK Health Forum:

Sugar Reduction Stakeholder Event - 3 June 2014

Organising themes & sample actions



UK consumption of Added Sugars*



Organising themes & sample actions

Common areas of agreement:

- Growing public awareness & concern
- Multiple range of options needed
- Common examples: taxes (sugar & sugary beverages), marketing restrictions, reformulation, portion size, product portfolios, labelling & information, health system
- High participation & sustainability are key to success
- Looming threat:
government regulation and taxation

Organising themes & sample actions

1. Produce / import less

- Assess / evaluate impact of the EU sugar market
- Impacts of other policies on sugar & health

2. Use less

- Reformulation eg RD calorie pledge
- Substitution eg Pepsi Max, Tesco own-brand

3. Sell less

- Portion size eg RD pledge, Coca Cola 90cal portions
- In-store promotions eg Lidl & Tesco sweet free checkouts

4. Market less

- Marketing controls eg Ofcom, France, Chile
- Nutrient profile support health claims regulation eg FSANZ

5. Recommend Less

Public awareness & social marketing campaigns eg C4L, US
Education & skills in schools eg School Food Plan

6. Eat less

Universal implementation of UK FOP labels Menu & display labels out-of-home eg RD, US, Australia

Generic lessons



Tobacco Control

3As": Reduce

Affordability

↑ Tax, ↑ Price, Stop smuggling

Acceptability

Advertising bans, SmokeFree Laws

Availability

Licensing retailers, Age checks



Junk food Control

3As": Reduce

Affordability

↑ Tax, ↑ Price, Subsidise healthy options

Acceptability

Advertising bans, JunkFree Schools

Availability

Licensing retailers, Tax breaks for healthy options



Past history of public health triumphs

- *Lessons for today??*

- Safe drinking water
- Sanitation
- Slavery abolition
- Immunisation
- Road safety
- Seat belts
- Air pollution control
- Tobacco advertising bans
- Smoke free legislation
- etc etc

SUPPORT: IMPLEMENTATION PATH **FOR EFFECTIVE PUBLIC HEALTH** **INTERVENTIONS**

EG. CLEAN WATER, SANITATION, POLLUTION, IMMUNISATION, SEATBELTS, SMOKEFREE ETC

- S**CIENTIFIC evidence emerges
- U**NDERSTANDING spreads
- P**ROFESSIONALS accept paradigm
- P**UBLIC & POLITICIANS become aware, then supportive
- O**PPPOSITION from vested interests is slowly Overcome
- R**EGULATION is introduced, often strengthened by
- T**AXATION to reinforce regulations (eg Tobacco & alcohol control)

CONCLUSIONS

Science is not sufficient (Remember John Yudkin)

SUGAR (an idea whose time has come?)

Strategy: essential to influence decision makers

(Healthy Alliances can use “3As” & SUPPORT frameworks)

\$LEAZE in \$hadow\$ (expect opposition from Vested Interests)

Sunny uplands: Tobacco Control → Sugar Control

(Remember numerous previous public health successes)