

THE GEORGE WASHINGTON UNIVERSITY
WEIGHT MANAGEMENT PROGRAM

ARTHUR FRANK, M.D., P.C. AND ASSOCIATES

SUITE 208
THREE WASHINGTON CIRCLE, N.W.
WASHINGTON, D.C. 20037-2357
202-223-3077
FAX 202-872-8142

ARTHUR FRANK, M.D.
INTERNAL MEDICINE
BENJAMIN BRONHEIM, M.D.
PSYCHIATRY
DOMENICA RUBINO, M.D.
ENDOCRINOLOGY & INTERNAL MEDICINE
SINGA COLCLOUGH, FNP-C, MSN
NURSE PRACTITIONER
CONSTANCE VAUGHT, R.N., CRNP
NURSE PRACTITIONER
JANICE GAGEN, CANP, CDE
NURSE PRACTITIONER

June 15, 2007

Elizabeth P. Kanof, M.D.
Chair, Reference Committee D of the American Medical Association
800 Springfield Commons # 115
Raleigh, NC 27609

BECKY BAILEY, PH.D.
BEHAVIOR THERAPY
MARIA FOLEY, PSY.D.
PSYCHOLOGY
GERALDINE JENNINGS, MSW, LICSW
COUNSELING
WILLIAM PICON, PH.D.
PSYCHOLOGY
SHEILA RAMSEY, PH.D., MSW
BEHAVIOR THERAPY
MARILYN SPERLING, PH.D.
PSYCHOLOGY

Re: Resolution 407

Dear Dr. Kanof:

I have read, with some concern, the proposed resolution "Health Impacts of High Fructose Syrup" introduced by the International Medical Graduates Section that calls for limiting the use of high fructose syrups and labeling of foods made with high fructose syrups.

JESSICA DONZE, MPH, R.D., L.D.
COUNSELING AND DIETETICS
CLAIRE LEBRUN, MPH, R.D., L.D.
COUNSELING AND DIETETICS
KATHY MCFALLS, MS, R.D., L.D.
COUNSELING AND DIETETICS
REBECCA MOHNING, MS, R.D., L.D.
COUNSELING, DIETETICS AND
EXERCISE THERAPY

The target of this proposed resolution in the United States is high fructose corn syrup. Unfortunately, the claims made against high fructose syrups in the resolution do not pertain to high fructose corn syrup. I believe that the passage of this resolution will provide no benefit to consumers in the United States. Moreover, it will be misleading to the public about the role of HFCS and other food sweeteners in the food supply.

PAM WIGGINS, B.S.
EXERCISE THERAPY

My assessment and conclusions are based on the following:

DAWN VEST
OFFICE MANAGER

1. HFCS is the chemical and nutritional equivalent of table sugar (sucrose). The two substances have the same calories, the same chemical composition and are metabolized identically. HFCS is a mixture of two carbohydrate molecules, glucose and fructose. Table sugar (sucrose) is a chemical combination of the same two molecules in a form which is rapidly, efficiently and completely digested and forms an equivalent mixture of glucose and fructose.

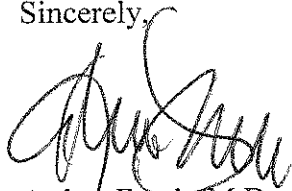
2. It is tempting to blame HFCS for the increase in the prevalence of obesity in the US since the increased use of HFCS temporally coincides with the increase in the prevalence of obesity. It is important to emphasize that the simultaneous occurrence of two events does not necessarily mean that one caused the other. The prevalence of obesity and diabetes is increasing even more rapidly in parts of the world where HFCS is not used in any significant amounts.

3. A significant concern expressed by many is the use of HFCS in manufactured foods. If HFCS is eliminated in manufactured foods and beverages, sucrose will replace it. Sucrose has the same sweetness, the same composition, and the same number of calories as HFCS. No net benefit will accrue to the general public.
4. Efforts to control obesity by the elimination of one type of ingredient (particularly if substitute ingredients with comparable calories are available) will accomplish nothing.

There is no single culprit in the puzzle of obesity. There is no single or simple cause for the disease. A substantial body of epidemiological and metabolic evidence establishes that obesity is not caused simply by misguided food selection. It is entirely a function of total calories consumed and expended. Focusing the blame on a single food constituent will be simplistic and misleading. It will create a target for directing the public's concern on a substance which happens to be an incidental part of the problem. More harm than good will derive from the proposed resolution.

(Part of my perspective on the issues of diabetes and obesity derives from my professional activities for the past 30 years in research and in the clinical management of obese patients as the Medical Director of the George Washington University Weight Management Program. With this background I have served also as a member of the scientific advisory committee of the Corn Refiners Association.)

Sincerely,



Arthur Frank, M.D.