

Are Aspartame-Induced Arrhythmias Associated with Sudden Death?

by H. J. Roberts, M.D., F.A.C.P., F.C.C.P.

A review of sudden death in young athletes, reported in the *New England Journal of Medicine* (2003:1064) made no mention of aspartame as a primary cause or suspected contributory factor, especially when demonstrable disease was absent. This problem has assumed great public health importance, because two-thirds of the population, especially those who are watching their weight, are consuming "diet" products containing this chemical.

I have repeatedly reported the serious cardiovascular, neuropsychiatric, metabolic, and other adverse effects of aspartame products in my earlier publications. Among the first 1,200 aspartame reactors in my database, 16 percent had symptomatic arrhythmias, 7 percent had atypical chest pain, and 5 percent had hypertension.

My report includes one hypertensive patient who had a complete heart block within hours after consuming his first diet cola. Another patient had undergone unsuccessful radiofrequency ablations in the heart before anyone was aware that he had aspartame disease. In addition, pheochromocytoma, a usually benign, vascular tumor, was suspected in several aspartame reactors.

The issue of sudden death related to aspartame and its breakdown products has been raised a number of times, particularly among previously healthy people. Over the years, I have detailed the release of norepinephrine, epinephrine, dopamine, and free methanol by aspartame; a host of related pathophysiological conditions (e.g., cumulative formaldehyde adducts derived from aspartame in tissue proteins and nucleic acids; excessive insulin release); direct oropharyngeal absorption from gum and breath fresheners; and the increasing problem of aspartame addiction.

The likelihood of pulmonary hypertension induced by the vasoconstrictive effects of aspartame products also has been considered. It is relevant that 110 aspartame reactors experienced unexplained shortness of



breath (dyspnea) and that they usually improved promptly after abstinence. Moreover, one 27-year-old woman was found to have primary pulmonary hypertension upon autopsy.

The need for clinicians and corporate-neutral investigators to evaluate the contributory role of aspartame in cardiopulmonary disorders and sudden death, along with drug interactions with aspartame, is underscored by the frequency of attributing unexpected deaths to "causes yet to be determined."

Drug Companies Listed as Top Advertisers

The pharmaceutical industry continues to grow as a marketing juggernaut, according to a supplement in the March 2004 issue of *Advertising Age*, a leading industry magazine. According to the supplement, four of the top 25 American advertisers, in terms of spending, were drug companies.

The fourth largest spender on the overall list and the top pharmaceutical advertiser was Pfizer, which paid a total of \$2.57 billion for advertising in 2002. Pfizer manufactures Lipitor® (atorvastatin), a popular cholesterol-reducing drug and the highest-selling drug in the world.

Johnson & Johnson, at number eight, spent \$1.8 billion on advertising. One of its best-selling drugs, Risperdal® (risperidone), made by its subsidiary, Janssen, has been known to increase the risk of stroke when it is prescribed for "off-label" use to treat dementia.

GlaxoSmithKline, number 12, spent \$1.55 billion. GSK manufactures Avandia® (rosiglitazone), a diabetes drug that was listed as a "Do Not Use" drug in Public Citizen's *Worst Pills, Best Pills*.

Merck, at number 19, spent \$1.16 billion. Merck makes Vioxx® (rofecoxib), a painkiller that is also listed in *Worst Pills, Best Pills*.

Wyeth, Novartis, Bristol-Myers Squibb, Schering-Plough, Aventis, and Bayer were also in the top 200 for 2002, spending a total of \$9.58 billion on advertisements.

The total dollars spent advertising each of these drugs does not include "seminars," free trips for doctors, free samples, questionable consulting positions for physicians, free gifts, and free trips, all of which are known marketing techniques used by drug companies for an extra edge.

In our next issue...

The Many Sides of Menopause

The onset of menopause marks a drastic and landmark change in a woman's life, but it is often misunderstood. Often, physicians will treat menopause as a disease and attempt to treat the symptoms.

Is menopause really a disease? Or can it be viewed as a process, necessary to the body and instrumental to the natural journey of age? Are there any positives that can come about from menopause? What are the treatable risks that your doctor may not tell you?

In the next issue of *Nutrition Health Review*, we will go into great detail with interviews and stories from around the world that will answer any questions you may not know to ask.

Read all about it in *Nutrition Health Review*.

Start or renew your subscription today.

BEST BUY - Check here to get eight issues for \$24

(2-year subscription)

MAIL TODAY

Nutrition Health Review

Post Office Box #406

Haverford, Pa. 19041

Check or money order enclosed for \$24 for 8 issues (2 years)

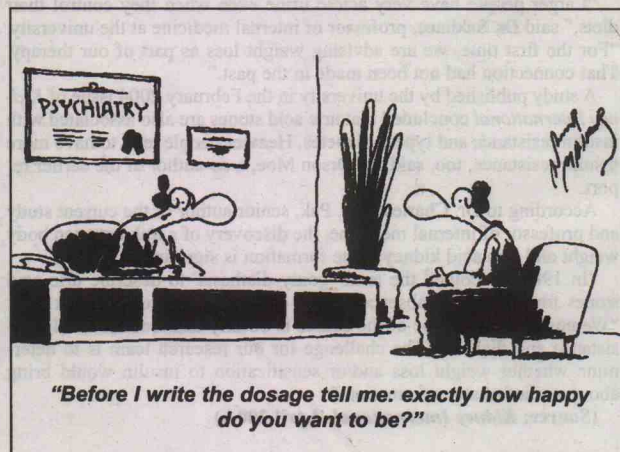
This is a new subscription

This is a renewal subscription

Name _____

Address _____

City _____ State _____ Zip Code _____



Copyright of Nutrition Health Review: The Consumer's Medical Journal is the property of Vegetus Publications and its content may not be copied or emailed to multiple sites or posted to a listserv without the copyright holder's express written permission. However, users may print, download, or email articles for individual use.