



Health Canada still studying olestra

Olestra-containing snacks that have a fraction of the calories and none of fat of regular products are being touted as the dieter's dream in the US, but detractors say olestra is potentially dangerous, causing loose bowels and robbing the body of vital carotenoids.

Now the manufacturer, Procter & Gamble, is seeking approval to use the fat substitute as a food additive in Canada. Dr. Olga Pulido, Health Canada's program manager for the olestra file, said data about the fat substitute will go through an extensive review by experts in chemistry, epidemiology, toxicology and other fields. She said this will be a long, complex process and is not sure when a final ruling will be made. The application was initially submitted to the Health Protection Branch in 1987 and has been amended several times since then. More studies are expected. P&G has spent 25 years and \$200 million developing the fat substitute. "This is the first in its class, the first with macronutrient replacement,"

said Pulido. Meanwhile, olestra may become an issue for Canadian physicians if their patients stock up on snack foods during visits to the US.

Olestra tastes like fat, but its molecules are too big for the body to digest so it passes straight through the digestive tract without leaving any calories behind. Unlike other fat substitutes, it can withstand high cooking temperatures necessary to make savory snacks such as potato chips. Twenty-eight grams (1 ounce) of olestra-containing potato chips contain no fat and 75 calories; 28 g of regular chips contain 10 g of fat and 150 calories.

Although it seems an ideal aid for dieters, there are 2 potential problems. First, olestra can act as a laxative, with some people reporting loose stools and diarrhea. However, P&G says it has refuted earlier evidence of GI problems in a more recent study. In 1997, 1136 movie-goers were given potato chips; 16% of the olestra-eaters and 18% of the regular chip eaters reported stomach problems. The second concern is

that olestra carries away carotenoids and fat-soluble vitamins, including A, D, E and K, from any foods in the digestive system.

The US Food and Drug Administration, which gave olestra its stamp of approval in January 1996, requires P&G to fortify the fat substitute with the four vitamins, but not the carotenoids. Many studies indicate that carotenoids protect against cancer, heart disease and macular degeneration. In studies conducted by P&G in 1993, total blood carotenoids dropped by 50% among 39 people who ate 8 g of olestra a day — the equivalent of 16 chips — with meals for 8 weeks.

Olestra-containing snacks sold in the US carry a label warning of "abdominal cramping" and "loose stools." They also caution that olestra "inhibits the absorption of some vitamins and other nutrients." The Web site of the Center for Science in the Public Interest (www.cspinet.org/olestra) has more information on the subject, as does the P&G site, www.pg.com.

— *Barbara Sibbald*

Cool site

www.who.ch

The World Health Organization (WHO) has launched *The WHO Reproductive Health Library* (RHL), an annual peer-reviewed electronic journal designed to provide the latest research to health workers in the Third World. It contains systematic reviews of controlled clinical trials on various reproductive health topics, commentaries on the relevance of the findings for developing countries and practical advice on the management of reproductive health problems. RHL's goal is to bridge the gap between devel-

oped countries, where evidence is relatively easy to obtain through peer-reviewed journals, and developing countries, where high costs and erratic delivery often impede access to medical journals. RHL consists of a computer diskette that runs through Windows and comes with its own search engine to help users find relevant topics quickly. The reviews are taken from the Cochrane Library, which comprises several databases of systematic reviews of health care interventions. These are based on data from controlled clinical trials published in the world's major journals. "RHL puts the power of the Cochrane Library into the hands of

reproductive health workers and health policy-makers in developing countries in a way that is truly meaningful and relevant to their special needs," said Dr. Susan Holck, director of WHO's Reproductive Health Division. "It closes the gap between available information and reproductive health needs in the developing world." Third World health workers get free access to RHL, while use in developed countries is limited to scientists and institutions that work closely with WHO. Others can get RHL through a subscription to the Cochrane Library. Additional information is available on the WHO Web site. — *Steven Wharry*