

Dear Consumer
Caffeine and Pregnancy

By Esther Peterson

"A prudent and protective mother-to-be will want to put caffeine on her list of unnecessary substances which she should avoid."

That is the latest advice from the Food and Drug Administration (FDA), the Federal agency responsible for seeing that drugs and food are safe. While not technically a drug, caffeine is a stimulant and has a definite drug effect. As a general rule, pregnant women should avoid all substances that have drug-like effects because such substances can cross the placenta and reach the fetus.

In the case of caffeine, FDA's recent animal study shows that caffeine can cause birth defects in rats. In the study, caffeine caused missing toes or missing parts of toes, and some of the animals whose mothers received caffeine did not grow as fast as those whose mothers were not exposed to caffeine. The delayed growth, which might be reversible, was found at levels of caffeine consumption comparable to just two cups of coffee a day for humans.

The study did not provide conclusive evidence that caffeine has ever caused a birth defect in a human being. The scientists who conducted the rat study noted that their work "lacked the quality to assure either the safety or the lack of safety of caffeine" and urged further studies. In addition, some new research indicates that people do not respond to caffeine the same way rats or other experimental animals do, perhaps because of the difference in which animals metabolize caffeine.

Caffeine's use in food and drink is hardly new. It is very much a part of the human diet. It is a natural ingredient in coffee, tea, cocoa, and most cola and pepper soft drinks. FDA's legal definition of cola and pepper soft drinks requires caffeine as an ingredient and permits it in other soft drinks. It is used in cold, headache, allergy, stay-awake, and other over-the-counter remedies and in some prescription drugs. It is also used in some baked goods, frozen dairy products, soft candies, gelatins, and puddings.

The health implications of caffeine consumption have been matters of concern and debate for years. Recent suggestions that caffeine might be associated with premature human births and congenital abnormalities have generated a variety of requests for FDA to require warning labels on caffeine-containing products as well as to severely limit caffeine's use as a food additive. There is also concern about the behavioral effects of caffeine on children (who drink considerable quantities of caffeine-containing soft drinks) and on their brain growth and development. These concerns have resulted in requests from three consumer groups for FDA to regulate the use of caffeine in various ways:

The Labigh Valley Committee Against Health Fraud asked for a label about the general physiological and pharmacological effects of caffeine.

The Federation of Homemakers urged that caffeine be removed from FDA's current list of substances that are categorized as GRAS (generally recognized as safe).

Late in 1979, the Center for Science in the Public Interest (CSPI) petitioned FDA to issue a regulation requiring that all tea and coffee packages containing caffeine carry a warning label saying that consumption of the product may be harmful to the unborn children of pregnant women. CSPI also wanted FDA to initiate an educational campaign telling pregnant women about the potential of caffeine to interfere with reproduction. The Center would like to hear from mothers who consumed large amounts of caffeine during their pregnancies and who gave birth to children having any congenital defects whatever. CSPI will share the information it gathers with FDA. These reports may be sent to CSPI, 1775 S Street, N.W., Washington, D.C. 20009. Or call 202-332-9110.

After considering the concerns of the consumer groups (and others), FDA decided against warning labels on caffeine products at this time because the available scientific evidence that caffeine is harmful is inconclusive. Other actions, however, are planned.

The Public Health Service (of which FDA is part) will advise pregnant women who are served by PHS programs not to use caffeine.

The Surgeon General will write to health professional organizations to urge them to notify their members of the latest scientific information.

FDA will carry this same (Continued On Page 11)

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