Food and Pharmacy—A Close Relationship

Ever since late 1959, when Senator Estes Kefauver launched his epochal hearings on drugs, their prices, and competition within the pharmaceutical industry, we have witnessed an ongoing Congressional fascination with the subject of drug regulation and legislation. This has been most manifest in the form of a variety of highly publicized Congressional committee hearings, chaired at various times by Senators Kefauver, Nelson, or Kennedy, and Congressmen Cellers, Harris, Rogers, or Fountain, among others.

The hearings themselves have covered the full spectrum of drug-related matters from the so-called "drug lag" to bioequivalency, from their relative prices to the adequacy of their existing test standards.

But little—in fact, *very little* congressional attention has been given to food matters, including safety and quality, during this same time period.

As a consequence, we noted with interest that the U.S. Senate Committee on Labor and Human Resources was launching a series of hearings "on the nation's food safety laws and regulations," beginning June 8, 1983.

Interestingly, with a bipartisan touch, the announcement was issued jointly by the Committee Chairman, Orrin Hatch (R-Utah), and the Ranking Minority Member, Edward M. Kennedy (D-Massachusetts). Specifically, they stated their intended thrust as follows: "The hearings will focus on two central issues: (*1*) how recent scientific and technological developments have affected food safety regulation, and (*2*) whether existing law should be revised in order to accommodate advances in science and technology."

They went on to state, "We hope to accumulate a hearing record that addresses advances in food science and toxicological testing, as well as advances in our ability to identify toxicological substances and to estimate or extrapolate the risk to humans posed by such substances."

The balance of the announcement contained strongly expressed intentions to solicit testimony from appropriately qualified scientific experts in the field, to seek the views of former Commissioners of the Food and Drug Administration as to their experiences in enforcing the existing food safety laws, and to explore the question of introducing risk–benefit judgments—based on scientific data and information—in arriving at food safety decisions.

On the surface, food-related issues might appear to be remote to pharmacy, the pharmaceutical sciences, and pharmaceutical scientists. Upon reflection, however, we quickly see that there are many factors that result in a close linkage between foods and drugs.

Historically, the preponderance of drugs and nostrums had a food origin. And certainly, the entire subject of modern-day vitamins and essential minerals is continually a gray area; are they foods or are they drugs? However we may regard them today—*i.e.*, as foods or as drugs or as both, depending on their form and potency—their initial origin was from foods and foodstuffs. And for most people, food constitutes their principal or sole source of vitamins and minerals except when deficiencies arise.

Out of Congressional recognition of the close association between the two subject areas, the first federal law was entitled the "Pure Food and Drugs Act" of 1906; subsequent legislation, including the current "Federal Food, Drug, and Cosmetic Act," as well as virtually all state laws, continue this joint legislative approach.

Similarly, the federal agency charged with administering these laws is known as the "Food and Drug Administration," and it is headed by an official with the title of "Commissioner of Foods and Drugs."

In addition to vitamins and minerals, there are numerous substances that may be regarded as either foods or drugs, depending upon intent, use, or labeling. Classic examples would include sodium chloride and sucrose; but there are many others such as FD&C coloring agents, artificial sweeteners, suspending agents, thickeners, preservatives, solvents, starch, and so on.

The celebrated controversy over the use and safety of saccharin was raised in terms of its food aspects rather than its drug aspects—although both areas were affected in actual practice. This was because the legislation under which it would have been banned is the so-called Delaney Amendment, and this amendment specifically pertains to the potential carcinogenecity of foods and food ingredients.

And there are also pharmacy-related clinical implications involving substances that are clearly foods, *per se*. For example, certain food–drug interactions may be every bit as important and critical to the patient as drug–drug interactions.

Finally, in recent years, APhA has addressed, from a scientific standpoint, the policy implications of several health care related issues directly involving foods. One of these occurred in 1979–1980, when the APhA Policy Committee on Scientific Affairs recommended a policy position on the subject of food labeling as to qualitative and quantitative information about ingredients. A second occurred in 1980–1981, when the Scientific Affairs Committee focussed more specifically on dietary salt and recommended a policy position on the establishment of federal regulations on the inclusion of salt in processed foods. Both of these recommended policy statements were subsequently adopted as formal APhA positions by the APhA House of Delegates.

Consequently, it is evident that there is far more than a casual tie between foods and pharmacy or between foods and the pharmaceutical sciences. As such, we will want to follow with appropriate interest the upcoming Congressional hearings on food safety, its regulations, and its legislation. We earnestly hope they will prove to be productive in meeting their announced objectives.

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