

(RESEARCH ARTICLE)



## The impact of artificial sweeteners on human health and metabolism

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### Abstract

Artificial sweeteners have become a common way to save calories by replacing sugar with sweetness. Their effects on human health and metabolism, however, are hotly debated. Here, the influence of artificial sweeteners on metabolic processes, such as glucose regulation, insulin sensitivity, and gut microbiome composition are examined. A literature review has shown mixed results, with some studies suggesting benefits like weight control and glycemic control and others implicating metabolic dysregulation, intestinal dysbiosis, and an increased risk for disease. Moreover, the individual variability in response to artificial sweeteners is presented, and a need for a personalized approach to consuming artificial sweeteners is highlighted. This work presents a nuanced perspective on the health consequences of artificial sweeteners used by consumers, healthcare professionals, and policymakers. Long-term human studies and population-specific effects are required to fill the knowledge gaps recommended for further research.

**Keywords:** Artificial sweeteners; Human health; Metabolism; Glucose regulation; Insulin sensitivity; Gut microbiome; Obesity; Metabolic disorders; Sugar substitutes; Chronic diseases

### 1. Introduction

The arrival of artificial sweeteners changed the food and beverage industry so much that their roots date back to the late 19th century. Constantin Fahlberg's accidental discovery of saccharin in 1879 was exceptionally important, starting a century of innovation in sugar substitutes of many types. Stevia and sucralose are just two of these (notable ones being aspartame, sucralose, and stevia), all with different qualities that make for various culinary options. The sweeteners have enabled manufacturers to offer consumers, sweetness with none of the caloric weight that regular sugar brings.

Artificial sweeteners are appealing because they can impart sweetness without calories, so they appeal to people who want to control their calorie intake. Especially so in the era of rapidly rising obesity rates and related metabolic disorders, moderation in sugar intake is essential. These substitutes also help those with diabetes because they regulate blood sugar without the spikes usually triggered by having a normal sugar intake. Artificial sweeteners have remarkable sweetness, whereby only a very small amount is required to convey the necessary flavor, allowing them to be used in a wide variety of 'diet' or 'low calorie' products such as soft drinks, desserts, and snacks. But as artificial sweeteners become more prevalent in our diets, it's important to question what long-term health consequences they may or may not carry with them, which means we have to more thoroughly look at what they can do for us and what they may be doing to us.

Although there are advantages to using artificial sweeteners, medical and nutritional communities have argued passionately against them. Critics worry about their long-term health consequences, hypothesizing such substitutes might lead to glucose intolerance or change the gut microbiota. When these sweeteners continue to embed themselves into our daily diets, it makes sense to truly understand the full scope of how they affect your health, and there is a pressing demand for research and conversation behind the use of these sweet additives.

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### **1.1. Objectives of the Study**

With these key objectives, this study will shed some light on the many complexities of artificial sweeteners. In the first instance, it attempts to evaluate both short- and long-term health effects of these substances, especially metabolic diseases such as obesity, diabetes, and heart disease. Through examination of these relationships, the study seeks to clarify the relationship between artificial sweeteners and their role in the promotion of health or, in some cases, the presence of disease.

Another focus of the research involves assessing how artificial sweeteners impact human metabolism. It then explores their effects on key processes such as glucose regulation, insulin sensitivity, and gut microbiome composition. The research of this study aspires to uncover the complex modes of artificial sweeteners impacting different body systems.

In addition, the study aims to present an overview of the benefits and possible risks of artificial sweeteners. In this way, allergens want to give consumers, healthcare providers, and policymakers the information to make informed decisions about including these substances in the diet.

### **1.2. Research Questions**

A series of key questions have been formulated actually to guide the research. It answers these questions by looking at how artificial sweeteners can impact health. The first question the study asks is what are the short-term health implications of artificial sweeteners, and are they any different from the long-term knock-on effects? This inquiry will allow the distinction between the immediate reactions made and the chronic effects that could develop in time.

The next part of the research will explore how artificial sweeteners affect human metabolism and how they affect glucose regulation, insulin sensitivity, and appetite function. That's important because knowledge about these mechanisms can inform about the advantages or drawbacks of these sweeteners in different populations.

In addition, the effects of the commonly used artificial sweeteners, such aspartame, sucralose, saccharin, and stevia, on specific health risks or benefits will be examined. There is a differentiation we need to understand the different sweeteners and their profiles.

The final section will discuss how individual variability, such as genetic predisposition or already present health conditions, affects the response to artificial sweeteners. Understanding how polar opposite strains from the same species can be so different in the effects people have on them is also essential when making personalized dietary recommendations.

### **1.3. Scope of the Study**

This study focuses mainly on artificial sweeteners such as aspartame, sucralose, saccharin, and stevia. These sugar substitutes have distinctive chemical properties, metabolic pathways, and regulatory considerations, and they are, by this means, representative examples of an entire category of sugar substitutes. Both positive and negative influences of artificial sweeteners on weight management, glycemic control, and their relation to metabolic health in general will be investigated.

Furthermore, these sweeteners' interactions with gut microbiome and their potential association with chronic diseases such as diabetes, obesity, and cancer will be evaluated. The main attention will be paid to human health outcomes. Still, individual variability will also be addressed, such as that of people with diabetes, those with metabolically deranged states, and children. By addressing these areas of diversity, the intention is to fully understand artificial sweeteners' role in today's dietary practices.

### **1.4. Significance of the Study**

The significance of this study is that it can increase public awareness and provide an empirical basis for policymaking for nutrition-related problems. This is why artificial sweeteners are touted as healthier, but their long-term health effects remain unclear. The implications of this ambiguity are not only for what individual food choices are made but for public health initiatives.

Having a better idea about what folks stand to gain and what they may risk with artificial sweeteners will help consumers make more informed dietary choices, particularly for people who are dealing with obesity or diabetes. In addition, the results of this research can be applied to healthcare providers by providing them with information on the

metabolic consequences of artificial sweeteners and further helping them make well-advised personalized dietary recommendations for patients.

At a more general level, the study's results contribute to public health policy by providing empirical evidence to base regulations associated with using artificial sweeteners in food and beverage products. Given the increasing global metabolic disorder rates and sugar substitute intake, this research is timely and relevant. The study offers a balanced view of artificial sweeteners by filling important knowledge gaps and enabling consumers and stakeholders to base their decisions on the smart usage of artificial sweeteners in daily diets.

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## **2. Literature review**

### **2.1. Overview of Artificial Sweeteners**

Since their discovery, artificial sweeteners have become important parts of the modern diet, where they fill a special need in functional foods by providing appealing and versatile alternatives to traditional sugars. These provide a level of sweetness that may be comparable, or even greater than that of sucrose, with no or very few calories, making them attractive sweets for calorie reducers. In response to a rising tide of public health concern over obesity, diabetes, and other metabolic disorders, their use has soared, with artificial sweeteners now central to dietary management strategies.

Artificial sweeteners can be divided into two categories: nutritive and non-nutritive sweeteners. While these sweeteners contain calories, they are lower than sugar. Consider sugar alcohols like sorbitol, xylitol, and erythritol, for example. Although they are healthier, overconsumption can create digestive hassles and other problems. On the flip side, non-nutritive sweeteners do not provide many calories and are quite a bit sweeter than sugar, meaning they can be used as a means to keep portions down. Aspartame, sucralose, saccharin, and stevia are examples, each with different characteristics, and they are used in various food products.

Artificial sweeteners do not have the chemical composition of sucrose, but they are intended to stimulate the sweetness receptor of the human tasting system. However, most artificial sweeteners are not metabolized into glucose, yet the very interaction with their receptors triggers sweetness in the brain. For example, aspartame is broken down into amino acid constituents during digestion, and none is left to be swallowed. In contrast, sucralose, a largely nonabsorbable fake sweetening agent, is eliminated intact rather than metabolized fully or excreted as one of its small breakdown products and, therefore, contributes no calories. This metabolic difference is key to elucidating how these sweeteners influence blood sugar and overall metabolic health and their possible roles in weight and glycemic management dietary interventions.

### **2.2. Regulatory Status**

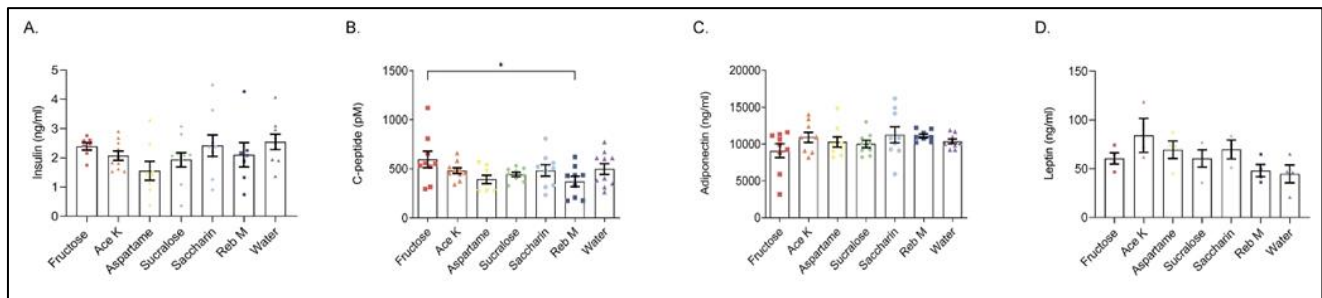
Rigorous safety assessments by organizations like the U.S. Food and Drug Administration (FDA) and the World Health Organization (WHO) position the regulatory landscape for artificial sweeteners. To assess its safety profile, any artificial sweetener must undergo extensive testing before it can be used for food and drink. From this, it becomes possible to calculate an Acceptable Daily Intake (ADI), an amount of daily consumption over a lifetime that does not harm health. For instance, the WHO has an ADI for aspartame of 40 mg/kg body weight and 50 mg/kg for the FDA, and the ADI for saccharin is 15 mg/kg body weight. These sweeteners are the subject of toxicological studies based on assessing potential adverse effects, adapted into guidelines that allow products containing these sweeteners to be safely enjoyed by consumers.

Though endorsed with established regulatory approvals, artificial sweeteners continue to be controversial. Interpreted concerns through history, as exemplified by the saccharin and bladder cancer link in the 1970s, have kept consumers leery. Subsequent research revealed, however, that these observed effects were species-specific and had no comparable impact on humans, and fears regarding the safety of artificial sweeteners continue. In addition, critics say these sweeteners can mess with metabolic processes and interfere with glucose regulation and appetite control. A public perception problem is further exacerbated by the increased desire for 'natural' sweeteners, such as stevia, which consumers believe are healthier despite regulatory guarantees for synthetic sweeteners.

### **2.3. Health Implications**

Artificial sweeteners have broad-reaching health implications and require the appropriate weighing of the benefits against the risks. Although touted as beneficial for weight loss and glycemic control, what impact these sweeteners have on metabolism is unclear and complicated. Despite that, research has been inconclusive regarding how they impact

glucose metabolism and insulin sensitivity. Artificial sweeteners such as sucralose are proven to affect insulin sensitivity, according to some studies, especially among overweight people. However, other studies propose that artificial sweeteners do not alter blood glucose levels or reduce insulin secretion much, implying that effects differ depending upon individual well-being status and metabolic conditions.



**Figure 1** Levels of glycemic markers and adipokines following long term consumption of NNSs under HFD

This burgeoning evidence further suggests that artificial sweeteners may affect the gut microbiome, an important part of metabolic health. For example, earlier studies have shown that saccharin and sucralose could disrupt microbial diversity, keeping things like metabolic homeostasis in good working order. Due to the paucity of human studies in this area and their frequently inconsistent results, this area needs further research to delineate the importance of these interactions. Additionally, the relationship between artificial sweeteners and appetite regulation remains an area of active investigation. Some studies suggest that these sweeteners interfere with the brain's reward pathways, potentially leading to increased cravings for sweet foods and compensatory overeating. Yet, other research contradicts this notion, indicating that artificial sweeteners do not significantly affect appetite.

There is also still a lot of research into the potential links between artificial sweeteners and chronic diseases. Used frequently by people with diabetes because they don't affect blood sugar much, these sweeteners are still a source of concern when it comes to their long-term impact on insulin sensitivity and glucose tolerance. At the same time, several studies indicate an increased risk of cardiovascular events following artificial sweetener intake, but further research is needed to determine any causal relationship. Despite extensive research that failed to establish the link between artificial sweeteners and human cancer, this remains a question as well.

#### 2.4. Gaps in Existing Research

The theory of artificial sweeteners draws on a great quantity of the investigated research; it lacks knowledge regarding the long-term effect on health and the individual's response. A noted gap exists in a lack of long-term human studies. However, most of the existing research is derived from short-term or animal studies, precluding us from understanding the chronic effects of artificial sweeteners on weight management and disease risk over longer time spans. However, to better understand these impacts, longitudinal studies are needed with diverse populations.

There is also an aspect of the variability of individual responses to artificial sweeteners that needs exploration, and a range of factors, such as genetics, the composition of the gut microbiome, and pre-existing health conditions, influence this variability. It is crucial to understand individual differences to develop personalized nutrition strategies that account for how individuals metabolize and respond to artificial sweeteners.

Additionally, we will look into the interactions between artificial sweeteners and the gut microbiome. The evidence so far indicates sweeteners can alter microbial diversity, although the mechanisms and their clinical implications are still unclear. Further research is needed to illuminate these and other interactions and their possible impact on metabolic health. Artificial sweeteners' behavioral and psychological effects never cease to satisfy your food cravings, and the urge to eat remains largely untapped. Determination of whether or not these sweeteners promote or inhibit healthy dietary behavior is essential to guide consumer food choices and nutritional recommendations. Closing these research gaps will help improve our knowledge about the risks and benefits of artificial sweeteners so that consumers and policymakers can better make more informed choices.

This literature review, in summary, summarizes current knowledge regarding artificial sweeteners in terms of their classification, regulatory status, health implications, and the gap in research demanding attention to provide a complete picture of the part they play in the modern diet.

### **3. Methodology**

The methodology used to explore how artificial sweeteners affect human health and metabolism is laid out in this section. It includes the research design, data collection, variables identification, and analysis tools used to interpret the findings. To make informed conclusions and recommendations, we take a structured and systematic approach, aiming to offer a full picture of the interplay between artificial sweeteners and different health outcomes.

#### **3.1. Research Design**

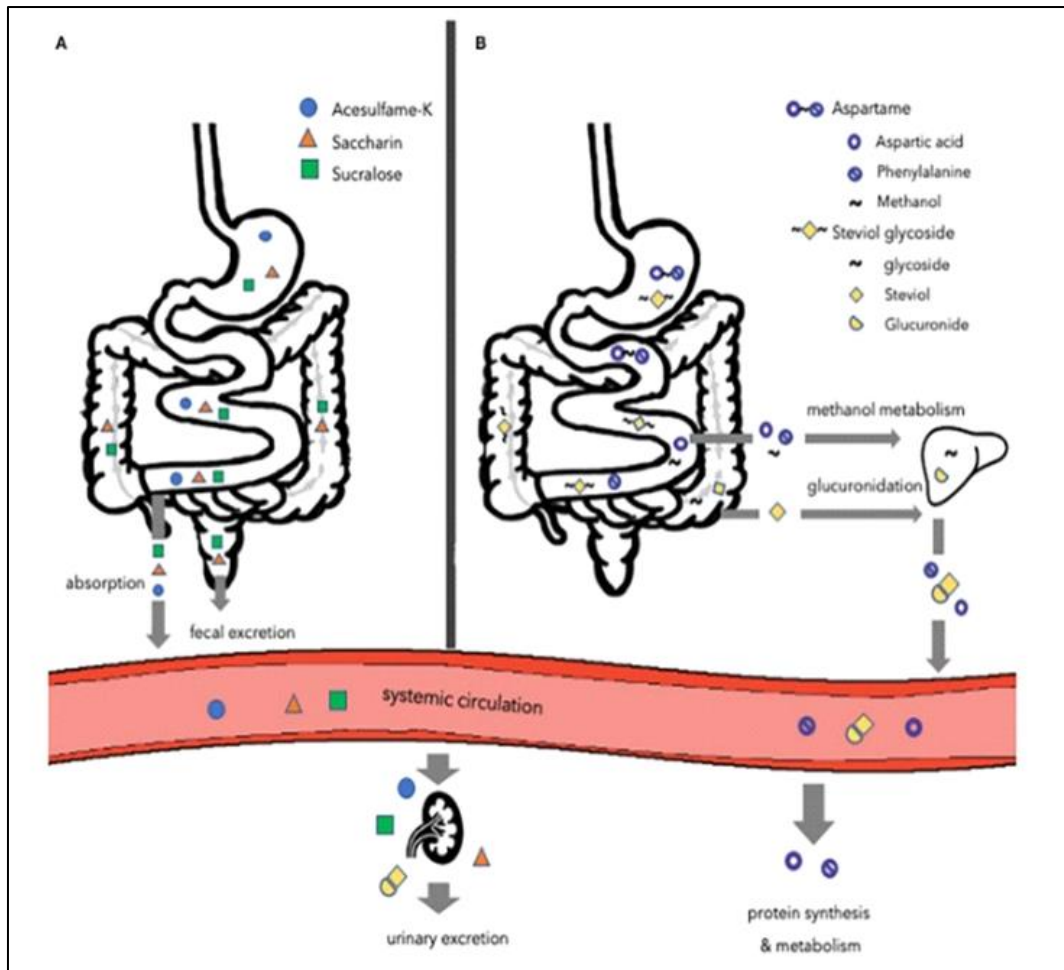
The research uses a mixed method approach in which qualitative and quantitative methods are complementary to give the comprehensive impact of artificial sweeteners. In this approach, systematic reviews and meta-analyses form the bulk of the material, supplemented by results of experimental studies (i.e., RCTs and observational cohort studies). The systematic literature review aims to gather and critically evaluate existing research and, therefore, provide a thorough overview of the state of knowledge concerning artificial sweeteners. Then, meta-analyzing the results from many studies increases the robustness of the results by detecting overall trends and relationships. The research combines controlled experimental designs and observational studies to provide a well-rounded perspective to understanding the intricacies and nuances of human health interaction with artificial sweeteners.

#### **3.2. Data Collection**

The data collection process is thorough and includes high-quality and relevant peer-reviewed journals, clinical trial results, and epidemiological studies. Using this diverse approach, the research consists of various studies that provide substantial insights into the effects of artificial sweeteners. Academic databases, such as PubMed and Scopus, are searched for relevant articles, and where possible grey literature from government agencies is researched to reduce publication bias. The search is thus guided by specific keywords related to artificial sweeteners and health outcomes; this allows many relevant studies to be identified. Well-defined inclusion and exclusion criteria were used to ensure continuity and relevance in the research; studies with specific standards such as publication language, participant demographics, and measurable health outcomes were the focus. A systematic data extraction form collects all key elements from each study while allowing for systematically organized analysis and interpretation.

#### **3.3. Variables and Factors**

As such, in this research, the independent and dependent variables and potential confounding variables are identified carefully to interpret the results accurately. The artificial sweeteners are the type of artificial sweeteners, as well as the dosage and duration of exposure among the participants. All these factors are needed to determine how different sweeteners might affect health outcomes. Health and metabolic outcomes that are impacted by artificial sweetener consumption are represented as dependent variables, including, but not limited to, metabolic markers (e.g., blood glucose levels) and health outcomes (e.g., body mass index (BMI)). Furthermore, the results are also sensitive to demographic variables, baseline health characteristics, and lifestyle factors that might confound the results. To isolate the specific effects of artificial sweeteners, the research controls for these confounders to see the actual impact on health and metabolism.



**Figure 2** Overview of the major routes of absorption, digestion, metabolism, and excretion of different types of artificial sweeteners; (A) Acesulfame-K, saccharin, and sucralose (B) Aspartame and steviol glycoside

### 3.4. Analytical Tools

A set of statistical methods and specialized tools are used to analyze the collected data to analyze the collected data. Descriptive statistics provide the first step in the analysis and allow the investigator to outline the characteristics of the samples in which statistical analysis is to occur, while inferential statistics will enable the investigator to conclude the nature of the relationships between the two applicable variables, artificial sweetener consumption, and health outcomes. T-tests, ANOVA, and regression analysis are used to determine whether there are differences between groups and effects of sweeteners when controlling for confounders. Forest plots and funnel plots are utilized to graph data and, where necessary, to assess for possible publication bias to strengthen the overall significance of the findings.

Additionally, advanced analytical techniques such as metabolomics and microbiome analysis provide deeper insights into the metabolic pathways and gut microbiota changes associated with artificial sweetener consumption. By leveraging these analytical tools, the research ensures a rigorous and comprehensive evaluation of the effects of artificial sweeteners on human health.

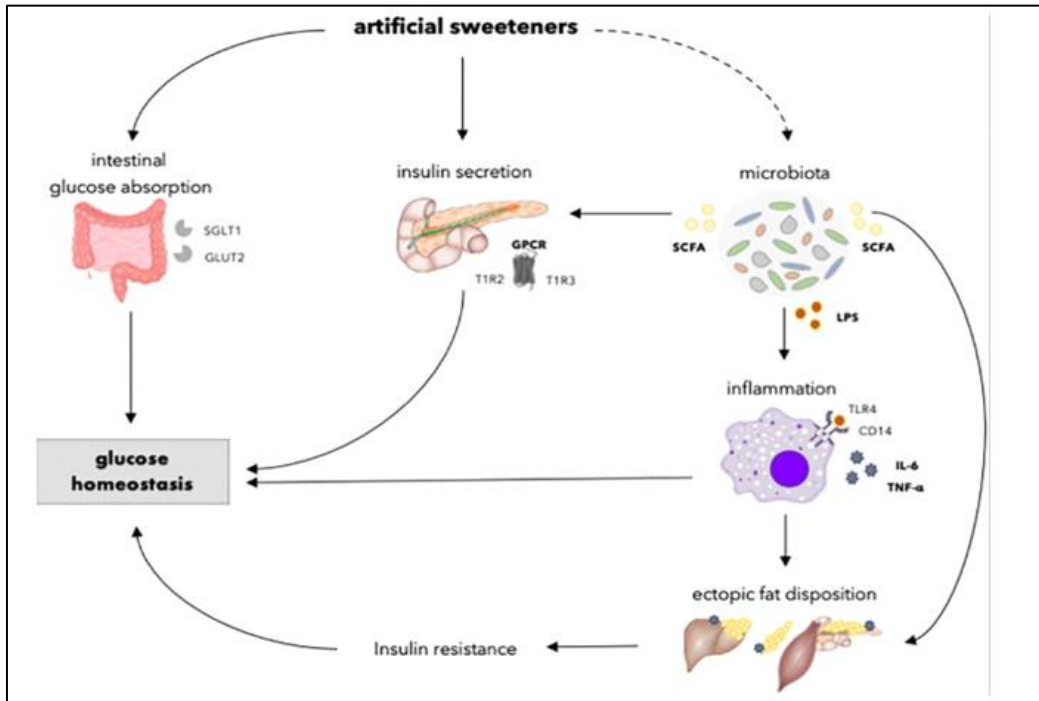
This section details the methodology used, based on rigorous and exhaustive data collection, analysis, and interpretation to ensure the research is comprehensive and evidence-backed. Systematic literature reviews, meta-analyses, and experimental studies are integrated to present a comprehensive and robust account of the effects of artificial sweeteners on human health and metabolism. Advanced analytical tools are then used to improve the reliability and accuracy of the findings to make informed conclusions and actionable recommendations on the place of artificial sweeteners in dietary practice. The strength of this thorough approach lies in its evaluation of a multifaceted approach for solving complex health problems and increasing knowledge in nutrition and metabolism.

#### 4. Key areas of investigation

Critical research domains about artificial sweetener impact on human health are discussed, including their actions on metabolism, gut microbiome interactions, weight control aspects, safety issues, and population-specific effects. This detailed evaluation of the multifaceted problems is performed in each sub-section, highlighting the importance of continuing research to understand the impact of artificial sweeteners across all contexts more adequately.

##### 4.1. Effects on Metabolism

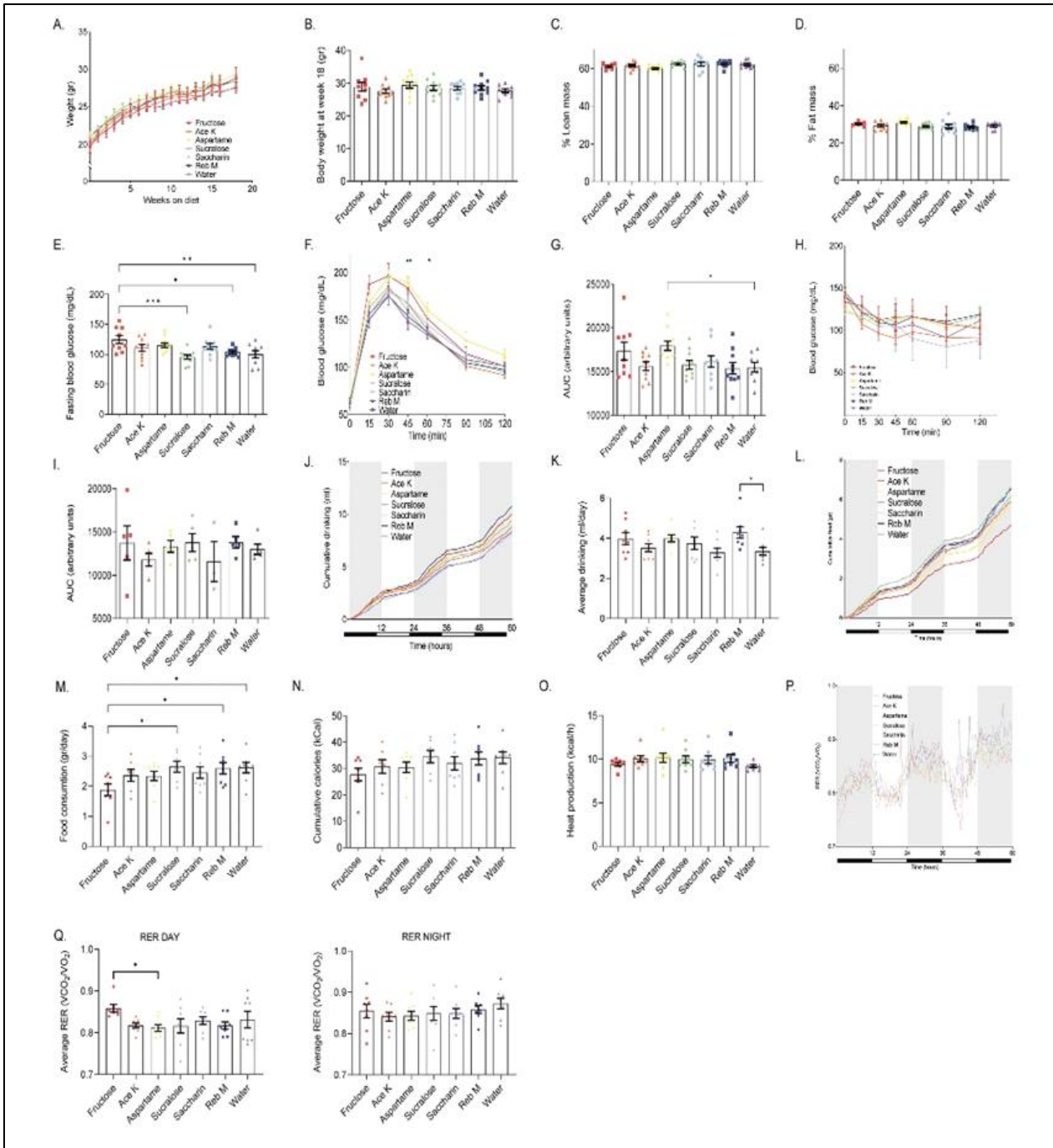
The relationship between artificial sweeteners and metabolism is characterized by complexity and multitude, especially regarding glucose homeostasis and insulin secretion. The issue of non-nutritive sweeteners (NNSs) such as sucralose and aspartame and their possible influence on metabolic processes has attracted considerable interest.



**Figure 3** Effects of artificial sweeteners on physiological processes involved in glucose homeostasis

Research shows the interference these sweeteners might play with glucose regulation, with some studies observing a deterioration in glucose tolerance. In one example, sucralose may elevate insulin levels depending on the individual, probably because it stimulates sweet taste receptors in the gastrointestinal system. This may stimulate insulin release without caloric intake and raise concerns about long-term effects on insulin sensitivity.





**Figure 4** Effects of Long-Term Non-Nutritive Sweetener (NNS) Consumption on Metabolic Parameters under Regular Diet Conditions

Most artificial sweeteners don't raise blood glucose levels, which is the rationale for their success as food additives. But the long-term effects of regular consumption are up for debate. Studies have found a connection between these sweeteners' chronic intake and reduced insulin sensitivity. This could be due to what's known as metabolic mismatch away from sweetness, where the body is expecting calories from the sweetness but never receives any. However, this mismatch could result in the body misinterpreting the signals about hunger and satiety, creating conditions predisposing individuals to metabolic disorders over time.

The influence of artificial sweeteners on appetite regulation and energy balance is also important but controversial. They are meant to help cut calories by replacing sugar; they do not help with appetite. Research has also demonstrated that artificial sweetener consumption increases cravings for foods with sugar, therefore placing you at risk of overeating. The reason is that the reward system in the brain doesn't get the caloric reinforcement it expects from non-



caloric sweeteners, and people will be looking for food that is 'high' in calories afterward. Despite being an artificial tool to assist in caloric intake management, these soft drinks can cancel these benefits by eating more meals or snacks, resulting in complexity in their role in energy balance.

#### **4.2. Gut Microbiome Interactions**

Ever since artificial sweeteners were discovered, their impact on the notoriously delicate gut microbiome has become a much-studied area. We already know that artificial sweeteners such as saccharin, sucralose, and aspartame alter gut microbiota composition with broad metabolic health implications. Research using animal models has also indicated that these sweeteners can reduce microbial diversity, a big indicator of promoting gut health. For example, saccharin has been linked to increased pathogenic bacteria and decreased beneficial microbial species, which could mean that sweeteners may interrupt, gut microbiome balance.

Artificial sweeteners have a strong functional effect, changing gut microbiota metabolism, which may interfere with the production of SCFAs. SCFAs are required for energy regulation, immune function, and gut barrier integrity. Artificial sweeteners contribute to a host of metabolic issues stemming from disrupting the normal production of SCFAs, including increased inflammation and impaired energy homeostasis.

There is growing concern that gut dysbiosis may also be linked to metabolic disorders. Dysbiosis is associated with obesity, diabetes, and insulin resistance. Artificial sweeteners induce alterations in gut microbiota, which, in turn, may stimulate low-grade inflammation, a recognized risk factor for metabolic diseases. Previous studies have shown that saccharin ingestion alters gut microbiota and impairs glucose tolerance in animal and human models. The results indicate that the gut microbiota may mediate the adverse metabolic effects of artificial sweeteners and warrant future studies to understand the mechanisms by which they exert these effects.

#### **4.3. Weight Management and Obesity**

Artificially sweetened products are considered good weight management tools because they have no or little calories. They are often substituted as sugar in food and beverage products and are used to help people reduce caloric intake. Some controlled trials prove that replacing sugar-sweetened beverages with diet alternatives may modestly help with weight loss or the prevention of weight gain, primarily when used with other positive lifestyle changes (improved eating habits and increased physical activity). Artificial sweeteners are attractive options for people trying to control their weight because they can help promote adherence to calorie-restricted diets by lowering the caloric density of foods and beverages.

Artificial sweeteners improve weight loss potential, but compensatory behaviors can hinder them. Some people think they'll eat more calories when using artificial sweeteners because they'll input more calories elsewhere, reasoning that they've saved some by consuming something much less calorific. So, for example, you drink diet soda, and just by drinking that soda, you're more likely to go ahead and eat all the unhealthful snacks, negating the caloric savings from artificial sweeteners. Additionally, the disconnect between the sweet taste of these products and the absence of calories may disrupt normal appetite regulation, leading to increased food intake over time. This phenomenon, called "metabolic mismatch," highlights the complexities and potential pitfalls of relying on artificial sweeteners for weight management.

#### **4.4. Safety Concerns**

Artificial sweeteners have long been a contentious topic regarding long-term safety, and much research has produced conflicting results. The most heraldic of these concerns has been the potential for linking artificial sweeteners and chronic diseases. Early saccharin studies in the 1970s alarmed some who suggested its possible connection to bladder cancer in rats. However, subsequent research in human populations has, for the most part, disproved this association. The FDA and WHO regulate approved artificial sweeteners as safe and set an acceptable daily intake (ADI); this means they are not expected to be a health risk when consumed as directed.

This notwithstanding, observational studies have associated high artificial sweetener intake with an increased risk of a cardiovascular outbreak, such as a stroke. Although these studies raise some important questions, there is a scarcity of research confirming the direct causality of the risks of long-term use, and further research will be needed to determine potential risks fully. Also of growing interest are the neurological effects of artificial sweeteners. Although no robust evidence is available, preliminary findings suggest that long-term consumption alters how the brain reacts to sweetness and may influence cognitive function. While anecdotal reports and small-scale studies have linked aspartame to migraines or headaches in some, the scientific community is divided as to whether that is valid or not and is calling for further extensive study.

#### 4.5. Population-Specific Effects

Artificial sweeteners tend to affect some populations differently; thus, their effects on children, pregnant women, or people with pre-existing metabolic conditions must be considered. Artificial sweeteners could lower sugar intake while reducing the risk of dental caries and obesity for children. However, at least one study pointed out that exposure to artificial sweeteners early in life can change kids' tastes, so they begin seeking the sweet stuff even as they age. However, the concern fuels questions about the long road down which consuming artificial sweeteners in a child might take us and its relation to developing unhealthy eating habits.

Artificial sweeteners have become a popular choice among pregnant women as a mechanism of control over weight gain or gestational diabetes. Most artificial sweeteners are considered safe during pregnancy, but little research has been done to clarify their long-term effects on fetal development. Animal studies have already raised alarms about potential metabolic health impacts on the offspring, in that artificial sweeteners ingested during pregnancy may affect the fetal microbiome and thus predispose offspring to obesity or metabolic disorders later on in life. This continuing research reinforces that what a pregnant woman eats does matter and that more work needs to be done researching the potential long-term consequences of artificial sweeteners on pregnant women and infants.

For diabetics, artificial sweeteners can be a lifesaver for keeping blood sugar levels at bay. They are great tools for glycemic control that allow you to enjoy sweet flavors while avoiding a rise in glucose. However, some studies have shown that artificial sweeteners may cause insulin resistance in some people, so there are questions about their longer-term effects on metabolic health. This variability indicates that dietary recommendations regarding artificial sweeteners could be personalized, particularly amongst populations prone to metabolic disorders. The nuanced effects of artificial sweeteners in diverse populations highlight the significance of a personalized approach to diets that accounts for one's specific health needs and surroundings.

Artificial sweeteners act as complex jugglers that may offer benefits but also harbor some risks. While viable alternatives for lowering the amount of sugar and controlling obesity and diabetes, their lasting impacts on metabolism, gut health, and amongst certain populations require further assessment. While research continues to develop, we should view artificial sweeteners with an eye toward beneficial trade-offs and health concerns. Directed efforts will continue to be needed to develop public health recommendations and to inform consumers about the safe and appropriate use of artificial sweeteners in their diet.

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## 5. Discussion

The present discussion synthesizes these findings into a view of artificial sweeteners thus far based on their current interpretation of connection to health, public policy, and ethical considerations. Existing research is complicated and contradictory, and exploring them would require careful evaluation as society debates these substances.

### 5.1. Interpretation of Findings

Artificial sweeteners are an interesting topic for some serious research as there are a lot of gray areas regarding these substances and their effects on human health and metabolism. The literature is characterized by consensus and divergence on different studies, which are visibly compared in this section.

As for metabolic effects, several studies suggest that sucralose, as well as aspartame, can have negative effects on glucose tolerance and insulin sensitivity. For instance, a landmark Nature paper in 2014 showed that saccharin consumption changed gut microbiota in mice to the point of disturbed glucose tolerance. However, many randomized controlled trials (RCTs) have been conducted in human participants, and none have shown any significant adverse effects on glucose metabolism in persons consuming recommended amounts of these sweeteners. This doesn't suggest that artificial sweeteners are necessarily bad or unhealthful; it just means that they can make a huge difference for some people in some contexts and maybe no difference in others.

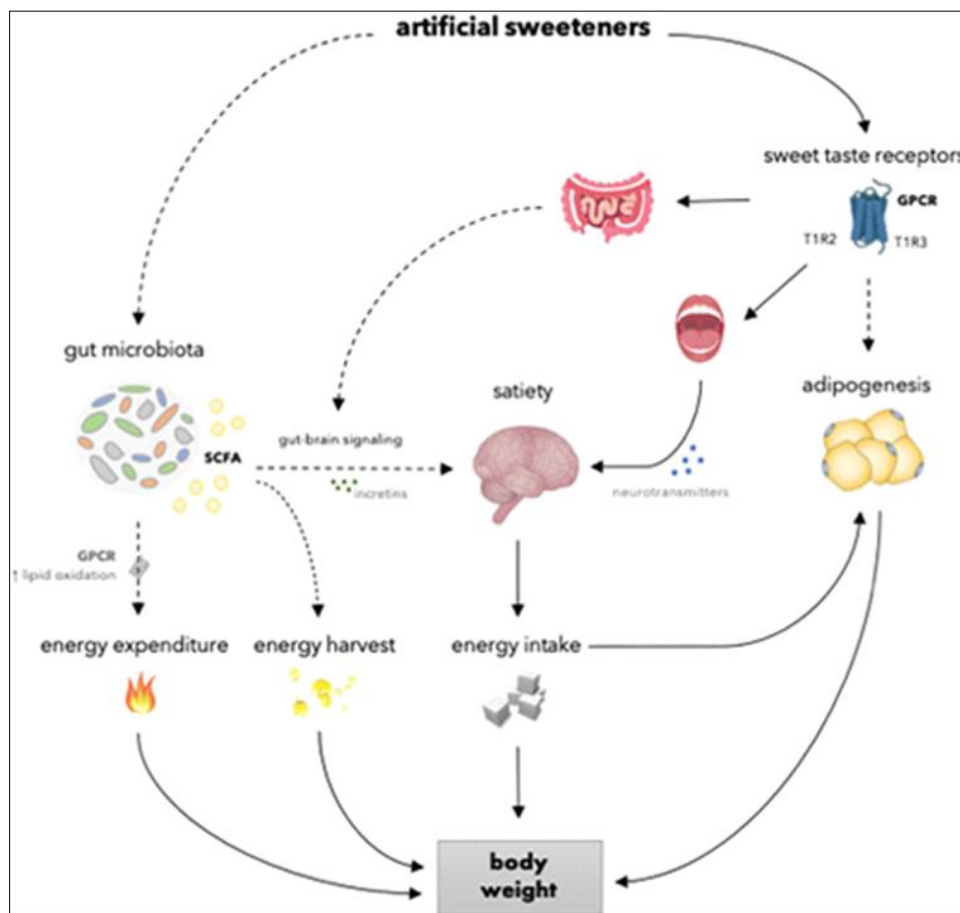
Observational studies regarding weight management have concluded that artificial sweeteners can help lower caloric intake and promote modest weight loss. Although, these benefits can be reckoned with by compensatory behaviors such as increased appetite or overeating. For example, although RCTs report modest weight reductions when sugar is substituted with artificial sweeteners, some observational studies have reported weight gain relating to these sweeteners. However, a connection is being made to behavioral and psychological factors that lead to increased food consumption. The challenge is what is happening here, how this is happening, and how we approach dietary recommendations.

Another area of inconsistency is the effects of artificial sweeteners on the gut microbiome. Consistently, animal studies show that high doses of artificial sweeteners cause substantial changes in microbiota composition. While human studies have thus far given conflicting results, the influence on gut health could be influenced by multiple other factors such as genetics, dietary patterns, and current microbial richness. This variability makes it difficult to tease artificial sweeteners' impact on metabolic health, highlighting the need for more nuanced research into the individual-level response.

Lastly, the controversy regarding artificial sweeteners' safety and their link to chronic diseases is still a concern. Early studies, especially in rats, suggested that saccharin might increase the risk of bladder cancer, but the finding hasn't been borne out in the human population. Moreover, some epidemiological studies report that high artificial sweetener intake may be linked with cardiovascular disease, albeit with uncertain causality and with confounding factors that complicate interpretation. Inconsistencies between the results of numerous studies suggest that before casting blanket claims over the health effects of artificial sweeteners, more time and research are needed that is more thorough and longer in duration.

### 5.2. Implications for Public Health

Furthermore, the results found concerning artificial sweeteners are of substantial importance to public health policy and consumer education. Any artificial sweeteners have acceptable daily intake levels established by regulatory agencies such as the FDA and WHO and are commonly considered safe for most people. For example, aspartame has an ADI of 50 mg/kg body weight per day, and sucralose and saccharin have an ADI of only 5 mg/kg body weight per day. These ADI levels should be used as public health recommendations to avoid the adverse health effects of high intake if excessive consumption occurs.



**Figure 5** Overview of the mechanisms of how artificial sweeteners may affect physiological processes involved in body weight regulation

Additionally, consumer education about the artificial sweeteners in processed foods and beverages must exist. A lack of awareness about the amount of commonly consumed beverage products leads many to consume quantities that are inadvertently over safe consumption levels. Some specific populations, for example, individuals with diabetes, the weight conscious, children, pregnant women, and those with underlying health conditions, may be more at risk or experience different benefits with artificial sweeteners.

**Table 1** Food and Drug Administration (FDA)-approved artificial sweeteners, their sweetness compared to table sugar, common side effects, and associated cancer risk

Artificial sweetener	FDA approval	Sweetness	Cancer risk
Aspartame	1974	200	None
Saccharin	1977	300	None
Acesulfame potassium	1988	200	None
Sucralose	1998	600	None
Neotame	2002	7000-13000	None
Advantame	2014	20000	None

Few studies suggest an association with cancer risk in rodents, but not humans.

Sweetness compared to table sugar.

Artificial sweeteners add sweetness without adding blood glucose for people with diabetes. However, these people must be aware of overall food patterns to compensate for excess energy from other foods that may contain hidden sugars. Weight-conscious people can reduce calories, too, with artificial sweeteners. Still, public health campaigns should consider the possibility that artificial sweeteners lead to compensatory behaviors that consume more calories.

Artificial sweeteners are useful for limiting sugar intake in children while fighting some of the side effects of obesity. However, the long-term effects of these sweeteners on the development of metabolism and taste are still unknown. Parents should be encouraged to expose their children to as little as possible and to eat as healthfully as possible, including a diet as natural as possible with whole nutrient-dense foods. Artificial sweeteners are generally deemed safe for pregnant women at ADI levels. Still, more research is needed to establish the long-term effects of artificial sweeteners on fetal development and metabolic consequences in the offspring of pregnant women. It is recommended that people consult with a healthcare provider before making any major dietary changes, including artificial sweeteners.

People with pre-existing gut problems or metabolic conditions should be careful, as artificial sweeteners may further worsen gut dysbiosis or eliminate blood glucose regulation for them. Personalized dietary recommendations may be necessary for these populations to minimize potential adverse health effects. This implies that public health initiatives on dietary matters should be tailored to the unique impacts of artificial sweeteners on the different population segments.

### 5.3. Ethical Considerations

Questions of transparency in research funding and the coverage of risks and benefits to the public dominate the ethical landscape of artificial sweeteners. The ethical implications of the food and beverage industry funding research on artificial sweeteners have been questioned. Artificial sweeteners are found to be safer and more effective by studies that industry stakeholders fund, which are studying the subject more than those of other independent funding sources. To ensure scientific integrity, researchers need to disclose any relevant conflict of interest and the funding source for their research. Funding from government agencies or non-profit organizations allows for independent financing, which can help mitigate bias and ensure the objectivity of research findings.

Further, public health agencies and researchers — and the policymakers they consult — must provide clear, evidence-based information regarding the benefits and risks of artificial sweeteners. This includes considering the documented benefits of reducing caloric intake and improving glycemic control against possible risks like changes in gut microbiota and the potential responsiveness behaviors.

There should be simplified guidelines on safe consumption levels of artificial sweeteners available to vulnerable populations, such as children and pregnant women. However, we must be careful not to overstate the risk where the scientific evidence allowing us to do so is not there yet. Take, for example, the saccharin and cancer controversies of the 1970s, resulting in widespread panic over a product with no significant risk in humans.

Furthermore, public health promotion campaigns should raise consumer awareness about artificial sweeteners in many food products while encouraging consumers to receive individualized advice from dietitians to avoid highly processed food and maintain a well-balanced diet. Public health authorities can enable consumers to decide whether or not to use artificial sweeteners in their diet by fostering transparency and offering evidence-based guidance.

Conflicting and complex evidence about artificial sweeteners is emphasized in this discussion. It is important to remember that while they are associated with meaningful benefits (they reduce sugar intake and help with glycemic control), we don't fully understand their long-term effects on metabolism, gut health, and chronic disease risk. Moderation, following of ADI levels, and personalized recommendation of diets should take the forefront of public health policies, with proper ethical handling of research and communication. Ultimately, giving consumers accurate, unbiased information will be crucial, empowering them to use artificial sweeteners safely and appropriately in society. This is where ongoing research needs to continue to improve and keep the dialogue and the inquiry going as these artificial sweeteners continue to be consumed.

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## 6. Conclusion

Finally, the research findings on artificial sweeteners are synthesized, their effects on human health and metabolism are discussed, and limitations and suggestions for future research and policy development.

### 6.1. Summary of Findings

A nuanced consideration of artificial sweeteners has emerged from the investigation. The primary finding is that, due to very low or zero calorie content, these sweeteners work well as sugar substitutes. They don't directly raise blood glucose, but there is some evidence that they impact glucose homeostasis or insulin sensitivity in the presence of certain risk factors, such as altered gut microbiota or pre-existing metabolic problems. Insulin secretion research is a mixed business; some sweeteners, such as sucralose, can activate insulin secretion by sweet taste receptors, while others have little or no effect at recommended usage amounts.

Another focus has been the relationship between artificial sweeteners and the gut microbiome. Ours and other studies suggest that sweeteners such as saccharin and sucralose can modify gut microbial composition in animal models, which can, in turn, cause gut dysbiosis linked to metabolic disease. Yet human studies have been inconsistent, reporting practically no effect or only a minimal effect at normal consumption levels, and individual variability is involved in these outcomes.

Artificial sweeteners can help with modest weight loss or gain prevention by reducing calories when they replace sugar. However, some people may compensate for the benefits of some medications with abnormal feeding behavior, which can undo the benefits. Many observational studies have reported a complex relationship between artificial sweeteners and weight gain, and pre-existing dietary and lifestyle factors may confound these associations.

According to safety, the FDA and WHO regulate agencies regarding artificial sweeteners, and they are generally considered safe in acceptable daily intake (ADI) limits. To date, no definitive evidence exists that these sweeteners cause cancer, cardiovascular disease, or other chronic diseases when used in moderation. Anecdotal reports of neurological effects (i.e., cognitive impacts or headaches) do not have scientifically valid support; however, as discussed in the Summary for Policy Makers, there are gaps in understanding the relationships between exposure to wireless radio signals and neurological effects.

Although somewhat more limited, the research indicates that certain populations (such as children and pregnant women) may be affected differently by artificial sweeteners than other groups. Still, evidence in this regard is too inconclusive to make solid pronouncements. Sweeteners can benefit glycemic control for people with diabetes, but their long-term metabolic health needs more research. In other words, the findings suggest that artificial sweeteners are many things at once, both good and bad, and it all depends on the person, from their genes to existing health conditions to what else they eat.

## 6.2. Limitations of the Study

While offering a comprehensive overview of its effects, the research in this article also provides deficiencies. Secondly, they are not captured because most studies on artificial sweeteners focus on short-term and long-term health effects, such as chronic or lifetime exposure to artificial sweeteners. Furthermore, current research generally focuses on a single sweetener. At the same time, many people consume multiple sweeteners in processed foods and beverages; hence, the combined effects of various sweeteners remain unresolved.

In observational studies, a challenge is in isolating variables. Confounding factors such as previous health issues and lifestyle factors make these studies susceptible to being confounded and unable to establish causality. Furthermore, interpretation of findings varies on a person-to-person basis, highly depending on genetic predisposition and the gut microbiota differences across different people.

Another limitation is the reliance on animal studies for much of the evidence with respect to gut microbiota and metabolism. Animal studies use dosages far in excess of human consumption levels, which could not reflect human physiological responses. Furthermore, much of the research into the safety and efficacy of artificial sweeteners funded by the food and beverage industry is more favorable towards the sweeteners, causing suspicion regarding bias and conflicts of interest. However, these limitations underscore the importance of conducting more rigorous, longer-term, and independent research to draw firm conclusions regarding artificial sweeteners' health impacts.

## 6.3. Recommendations

Several recommendations for future research are proposed to fill in the existing gaps and limitations. Artificial sweetener consumption should be investigated in longitudinal studies assessing the long-term effect of artificial sweetener consumption on health, factoring in cumulative exposure to artificial sweeteners and chronic disease risk. These studies should be performed on smaller populations with more diverse populations to understand better individual variability based on their genetic backgrounds and health conditions.

Further research should also examine how artificial sweeteners affect human gut microbiota composition and function at consumption levels typical for the public. Potential interventions such as probiotic or prebiotic supplementation may help reduce the possibility of gut dysbiosis caused by artificial sweeteners. Future research avenues likely include personalized nutrition approaches considering genetic, metabolic, and microbiome profiles. On top of this, studies should look at the synergistic effects of consuming multiple artificial sweeteners together—the effects of thousands of real-world consumption patterns. Lastly, it is important to appreciate the psycho and behavioral influences of artificial sweeteners, especially with respect to their impact on taste appetite and dietary compensation.

## 6.4. Recommendations for Artificial Sweeteners Policy Regulation

Furthermore, research recommendations and policy recommendations are proposed. Therefore, such acceptable daily intake levels for artificial sweeteners must be periodically revisited using the latest scientific evidence, particularly for vulnerable groups of children, pregnant women, and so on. Consumers can make informed decisions regarding the type and quantity used when artificial sweeteners are labeled mandatorily in food and beverage products.

It is necessary to organize public education campaigns to inform consumers about the benefits and risks of artificial sweeteners, explaining the necessity to assess moderation and the value of balanced nutrition. Certain populations, such as diabetics or those trying to lose weight, should have specific guidance. Independent research funding from governments and non-profit organizations also helps decrease the potential bias of industry-funded studies. Lastly, monitoring and surveillance systems should be developed to monitor consumption patterns of artificial sweetener and their health outcomes to detect any possible emerging risks early enough.

Finally, artificial sweeteners are a double-edged sword in modern nutrition science. While they provide large benefits, including caloric intake reduction and glycemic control, they are also concerning from the perspective of long-term metabolic, gut health, and chronic disease risk. The effects of artificial sweeteners are complex and variable, and they are affected by individual biology, intake patterns, and lifestyles.

Consumers and policymakers must adopt a balanced approach that promotes moderation and relies on evidence-based guidelines to ensure the safe and effective use of artificial sweeteners. Continued research is critical for addressing knowledge gaps, advancing personalized nutrition, and refining public health policies to optimize the role of artificial sweeteners within a healthy diet



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