

## Opportunity for a Healthy Life

## **Sugar-Sweetened Beverages**

The Boulder County Public Health Position

Cardiovascular disease and cancer are the leading causes of death in Boulder County; consumption of sugar-sweetened beverages is associated with chronic disease and unhealthy weight status. Accounting for confounding factors, researchers have found that drinking just 1-2 sodas per day increases risk for type 2 diabetes by 26%. Compared to children who drink very few sugary drinks, kids who consume 1 or more sweetened beverages a day are 55% more likely to have overweight or obese body mass indices. Sugary drinks are also linked to heart disease, an increased risk for heart attacks, metabolic syndrome, and gout. And the consumption of liquid sugar products, such as soda, can increase the prevalence of non-alcoholic fatty liver disease, liver cirrhosis, similar to the damage seen among chronic alcoholics.

In Boulder County, 24% of children ages 1-14 years are obese or overweight<sup>1</sup>, 20% of adults have been told they have high blood pressure<sup>2</sup>, 46% of adults are obese or overweight<sup>3</sup>, and 5% of our residents have been diagnosed with diabetes<sup>4</sup>.

These chronic diseases and conditions impact some communities more disparately than other communities. In Colorado, twice as many Latino and African American kids drink a sugary drink once per day as compared to non-Latino white children. In Boulder County 11% of Latino/a adults have been diagnosed with type 2 diabetes as compared with 4% of non-Latino/a white adults<sup>5</sup>. For children born in the year 2000, one in three will develop type 2 diabetes; among children of color, one in two will. Narrowing these disparities can improve health equity.

As an organization charged with protecting and promoting the public's health, and because the community identified (through the public health improvement process) improving healthy eating and active living as one of three key focus areas for improving health in Boulder County, we support practices and strategies identified as successfully improving healthy eating and active living. Because sugar sweetened beverages contribute significantly to childhood obesity, we support evidence based and promising practices that reduce the intake of sugar-sweetened beverages.

## **Definition**

"Sugar-sweetened beverage" is defined as any beverage intended for human consumption to which one or more caloric sweeteners has been added and that contains at least two calories per fluid ounce. Sugar-sweetened beverages include but are not limited to all drinks and beverages commonly referred to as "soda," "pop," "cola," "soft drinks," "sports drinks," "energy drinks," "sweetened ice teas," or any other common names that are derivations thereof. Sugar-sweetened beverages do not include any of the following: 1) Any beverage in which milk is the primary ingredient (i.e., the ingredient constituting a greater volume of the product than any other); 2) Any beverage for medical use; 3) Any liquid sold for use for weight reduction as a meal replacement; 4) Any product commonly referred to as "infant formula" or "baby formula"; or 5) Any alcoholic beverage.

<sup>1</sup> Malik VS, Popkin BM, Bray GA, Despres JP, Willett WC, Hu FB. Sugar-sweetened beverages and risk of metabolic syndrome and type 2 diabetes: a meta-analysis. Diabetes Care. 2010;33(11):2477-2483

Morenga LT, Mallard S, Mann J. Dietary sugars and body weight: systematic review and meta-analyses of randomised controlled trials and cohort studies. Brit Med J. Jan 15 2013;346

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http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2880768/

<sup>&</sup>lt;sup>1</sup>Child Health Survey 2012-2014

<sup>&</sup>lt;sup>2</sup> Behavior Risk Factor Surveillance Survey (BRFSS) 2011, 2013, 2014

BRFSS 2012-2014

<sup>&</sup>lt;sup>4</sup> BRFSS 2013, 2014

<sup>&</sup>lt;sup>5</sup> BRFSS 2013, 2014