

AMERICAN MEDICAL ASSOCIATION ORGANIZED MEDICAL STAFF SECTION

Resolution: 2
(I-25)

Introduced by: Nita Shumaker, MD

Subject: Partnership with the Administration to Reduce Harmful Chemicals in Food
and Align with European Safety Standards

Referred to: OMSS Reference Committee
(xxxx, MD, Chair)

Whereas, the American Medical Association recognizes that food safety and the reduction of harmful chemical additives in the food supply represents a critical public health priority affecting millions of Americans; and

Whereas, the European Union has implemented more stringent regulations regarding food additives, artificial colors, preservatives, and other chemical substances, resulting in significantly lower exposure rates to potentially harmful compounds compared to the United States; and

Whereas, numerous peer-reviewed studies have linked certain food additives commonly used in the United States—including artificial food dyes, certain preservatives, and flavor enhancers—to adverse health outcomes including hyperactivity in children, allergic reactions, and potential carcinogenic effects; and

Whereas, the current U.S. food regulatory framework allows the use of over 3,000 food additives, many of which are prohibited or restricted in European markets due to safety concerns; and

Whereas, American families deserve access to food products that meet the same safety standards enjoyed by consumers in Europe and other developed nations; and

Whereas, the Trump Administration has expressed commitment to improving American health outcomes and reducing regulatory barriers that may impede food safety improvements; and

Whereas, collaboration between medical professionals and government agencies is essential to develop evidence-based policies that protect public health while supporting American food producers and manufacturers; therefore be it

RESOLVED, that our American Medical Association formally requests to partner with the current administration to comprehensively review and reform U.S. food additive regulations to align more closely with European Union safety standards (Directive to Take Action); and be it further

RESOLVED, that our AMA advocates for the establishment of a joint task force comprising AMA representatives, FDA officials, USDA personnel, and relevant administration appointees to:

1. Conduct a systematic review of food additives currently approved in the U.S. but banned or restricted in Europe
2. Evaluate the scientific evidence regarding health impacts of these substances
3. Develop a prioritized timeline for regulatory action on the most concerning additives

1 4. Create transition pathways for food manufacturers to adopt safer alternatives
2 (Directive to Take Action); and be it further
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4 RESOLVED, that our AMA commits to providing scientific expertise, medical literature reviews,
5 and clinical evidence to support evidence-based decision-making in food additive regulation
6 (Directive to Take Action); and be it further
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8 RESOLVED, that our AMA supports initiatives to:

- 9 1. Require enhances labeling of food additives to improve consumer awareness
 - 10 2. Incentivize the development and adoption of natural and safer synthetic alternatives
 - 11 3. Establish more rigorous pre-market safety testing requirements for new food additives
 - 12 4. Implement periodic safety reviews of existing approved additives
- 13 (Directive to Take Action); and be it further
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15 RESOLVED, that our AMA requests the Trump Administration prioritize addressing food
16 additives with the strongest evidence of health risks, particularly those affecting vulnerable
17 populations including children, pregnant women, and individuals with compromised immune
18 systems (Directive to Take Action); and be it further
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20 RESOLVED, that our AMA advocates for increased federal funding for independent research
21 into the long-term health effects of food additives and their cumulative impacts (Directive to
22 Take Action); and be it further
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24 RESOLVED, that our AMA supports public-private partnerships that assist American food
25 manufacturers in transitioning to safer ingredients while maintaining product quality and
26 affordability (Directive to Take Action); and be it further
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28 RESOLVED, that our AMA will work with the Trump Administration to develop public education
29 campaigns to inform healthcare providers and consumers about food additive safety and
30 healthier food choices (Directive to Take Action); and be it further
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32 RESOLVED, that our AMA will monitor the implementation of any resulting policies and provide
33 ongoing medical and scientific guidance to ensure reforms achieve meaningful public health
34 improvements (Directive to Take Action); and be it further
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36 RESOLVED, that our AMA will report annually to the House of Delegates on the progress of this
37 partnership and its impact on American food safety standards (Directive to Take Action).
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Fiscal Note: (Assigned by HOD)

Received: 9/16/2025

RELEVANT AMA POLICY

Food Safety - Federal Inspection Programs H-150.967

Our American Medical Association encourages the FDA and the U.S. Department of Agriculture to continue their efforts to assure the safety of the food supply. Inspection of meat, poultry, and seafood should be viewed as one component of an overall program for improving food safety.

Citation: CSA Rep. L, I-91; Reaffirmed: Sunset Report, I-01; Reaffirmed: CSAPH Rep. 1, A-11; Reaffirmed: CSAPH Rep. 1, A-21

FDA Drug Safety Policies D-100.978

Our American Medical Association will monitor and respond, as appropriate, to the implementation of the drug safety provisions of the Food and Drug Administration Amendments Act of 2007 (FDAAA; P.L. 110-85) so that the Food and Drug Administration can more effectively ensure the safety of drug products for our patients.

Citation: Sub. Res. 505, A-08; Reaffirmed: CSAPH Rep. 1, A-21

Addressing the Health Impacts of Ultraprocessed Foods H-150.914

1. Our AMA supports and promotes public awareness and education about the differences between healthful foods and unhealthful ultraprocessed foods (UPF) and the benefits of minimally processed and unprocessed foods.
2. Our AMA supports federal, state, and local policies that promote and incentivize the production and distribution of healthier, affordable, minimally-processed and unprocessed foods.
3. Our AMA encourages the integration of nutrition education into all levels of medical education to empower clinicians to best counsel patients efficiently and effectively on reducing unhealthful UPF consumption.
4. Our AMA supports increased funding to the FDA for research into the health impacts of ultraprocessed foods and strategies to mitigate their risks.

Citation: Res. 430, A-25

Reform the US Farm Bill to Improve US Public Health and Food Sustainability H-150.932

Reform the US Farm Bill to Improve US Public Health and Food Sustainability: Our American Medical Association supports the creation of a new advisory board to review and recommend US Farm Bill budget allocations to ensure any government subsidies are only used to help produce healthy food choices and sustainable foods, and that advisory committee members include physicians, public health officials and other public health stakeholders.

Citation: Res. 215, A-13; Reaffirmed: BOT Rep. 09, A-23

Strategies to Reduce the Consumption of Food and Beverages with Added Sweeteners H-150.927

1. Our American Medical Association acknowledges the adverse health impacts of sugar-sweetened beverage (SSB) consumption and food products with added sugars, and support evidence-based strategies to reduce the consumption of SSBs and food products with added sugars, including but not limited to, excise taxes on SSBs and food products with added sugars, removing options to purchase SSBs and food products with added sugars in primary and secondary schools, the use of warning labels to inform consumers about the health consequences of SSB consumption and food products with added sugars, and the use of plain packaging.
2. Our AMA encourages continued research into strategies that may be effective in limiting SSB consumption and food products with added sugars, such as controlling portion sizes; limiting options to purchase or access SSBs and food products with added sugars in early childcare settings, workplaces, and public venues; restrictions on marketing SSBs and food products with added sugars to children; and changes to the agricultural subsidies system.
3. Our AMA encourages hospitals and medical facilities to offer healthier beverages, such as water, unflavored milk, coffee, and unsweetened tea, for purchase in place of SSBs and apply calorie counts for beverages in vending machines to be visible next to the price.
4. Our AMA encourages physicians to
 - a. counsel their patients about the health consequences of SSB consumption and food products with added sugars and replacing SSBs and food products with added sugars with healthier beverage and food choices, as recommended by professional society clinical guidelines.
 - b. work with local school districts to promote healthy beverage and food choices for students.
5. Our AMA recommends that taxes on food and beverage products with added sugars be enacted in such a way that the economic burden is borne by companies and not by individuals and families with limited access to food alternatives.
6. Our AMA supports that any excise taxes are reinvested in community programs promoting health.
7. Our AMA will advocate for the end of tax subsidies for advertisements that promote among children the consumption of food and drink of poor nutritional quality, as defined by appropriate nutritional guiding principles.

Citation: CSAPH Rep. 03, A-17; Modified: Res. 429, A-22

Fast Food H-150.979

The AMA encourages fast food restaurants to reduce the saturated fat content of their foods, as well as to offer low fat alternatives to highly saturated fat foods.

Citation: Sub. Res. 123, A-86; Amended by Sunset Report, I-96; Reaffirmed: CSAPH Rep. 3, A-06; Reaffirmed: CSAPH Rep. 01, A-16

Increasing Awareness of Nutrition Information and Ingredient Lists H-150.948

Our American Medical Association supports legislation or rules requiring restaurants, retail food establishments, and vending machine operators that have menu items common to multiple locations, as well as all school and workplace cafeterias, especially those located in health care facilities, to have available for public viewing ingredient lists, nutritional information, and standard nutrition labels for all menu items.

Citation: Sub. Res. 411, A-04; Reaffirmed: A-07; Reaffirmed in lieu of Res. 413, A-09 and Res. 418, A-09; Modified: BOT Rep. 1, A-14; Modified: CSAPH Rep. 01, A-24

The Health Effects of High Fructose Syrup H-150.919

1. Our American Medical Association recognizes that at the present time, insufficient evidence exists to specifically restrict use of high fructose corn syrup (HFCS) or other fructose-containing sweeteners in the food supply or to require the use of warning labels on products containing HFCS.
2. Our AMA encourages independent research (including epidemiological studies) on the health effects of HFCS and other added sugars, and evaluation of the mechanism of action and relationship between fructose dose and response.
3. Our AMA in concert with the Dietary Guidelines for Americans, recommends that consumers limit the amount of added sugars in their diet.

Citation: CSAPH Rep. 8, A-23

Food Additives H-150.998

Our American Medical Association supports the passage of legislation that would amend the Food Additive Act to require evidence based upon scientifically reproducible studies of the association of food additives with an increased incidence of cancer in animals or humans at dosage levels related to the amounts calculated as normal daily consumption for humans before removal of an additive from the market.

Citation: Sub. Res. 4, A-776; Reaffirmed: CLRPD Rep. C, A-89; Reaffirmed: Sunset Report, A-00; Modified: BOT Rep. 6, A-10; Reaffirmed; BOT Rep. 7, A-21