

additives, particularly synthetic colors at levels prevailing in the diet, induce adverse behavioral responses. This is hardly a novel finding. In 1980, such effects were documented in two different groups of subjects with two different experimental designs (Swanson and Kinsbourne 1980; Weiss et al. 1980). Many later publications have confirmed their results. I briefly reviewed the data in *Environmental Health Perspectives* (Weiss 2000).

According to Barrett (2007), a Food and Drug Administration (FDA) official, Mike Herndon, maintains that the agency sees "... no reason at this time to change our conclusions that the ingredients that were tested in this study that currently are permitted for food use in the United States are safe for the general population." This is a rather baffling statement. In fact, our study (Weiss et al. 1980) was funded by the FDA, and its results, along with a number of others from that period, definitively demonstrated adverse behavioral effects of synthetic food colors (Weiss 1982). During the intervening years, with a plethora of confirmations, the FDA has remained blindly obstinate. It continues to shield food additives from testing for neurotoxicity and apparently believes that adverse behavioral responses are not an expression of toxicity.

Herndon and the FDA should seriously consider what the late Philip Handler said about balancing risks and benefits:

A sensible guide would surely be to reduce exposure to hazard whenever possible, to accept substantial hazard only for great benefit, minor hazard for modest benefit, and no hazard at all when the benefit seems relatively trivial. (Handler 1979)

The FDA has never clarified the health benefits of artificial food colors.

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Editor's note—Weiss correctly points out that several investigators, including himself, have reported links between food additives and hyperactivity in children. He is also correct in stating that food additives appear to exacerbate existing hyperactive behavior in children, rather than contribute to the clinical diagnosis of attention deficit/hyperactivity disorder

(ADHD). The study by McCann et al. [*Lancet* 370:1560–1567 (2007)] supports that conclusion, as described in Barrett's December 2007 Forum article [*Environ Health Perspect* 115:A578 (2007)].

We believe it was important to mention ADHD because hyperactivity and clinically defined ADHD are often conflated in the science news press. The point of referring to ADHD and therein clarifying the relationship between ADHD and hyperactivity was to put the import of the findings by McCann et al. (2007) into proper perspective.

ERRATA

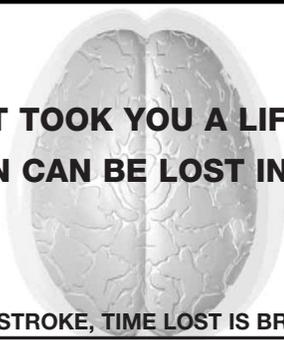
Fox et al. [*Environ Health Perspect* 116:618–625 (2008)] inadvertently used the wrong calibration unit in the text and Figure 3 of their article. Candela-seconds per square meter (cd-sec/m²) should have been Trolond-seconds (td-sec) throughout.

The authors regret the error.

In the statistical analysis section of "Hypertension and Exposure to Noise Near Airports: the HYENA Study" [*Environ Health Perspect* 116:329–333 (2008)], Jarup et al. erroneously named Biostat International (Tampa, FL) as the manufacturer of the meta-analysis software used in the study. The software is actually produced by Biostat (Englewood, NJ).

The authors regret the error.

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