



COMMUNICATION LAB

Communicating Sweeteners in Patient Care: Insights for Everyday Practice



JUNE, 2025

EUFIC Communication Lab #2 on sweeteners, June 2025

Late June 2025, EUFIC held its Communication Lab #2 on sweeteners. This second edition was designed as a **closed, expert-led qualitative creation workshop aiming to generate practical, applicable, everyday-fit recommendations for healthcare practitioners (HCPs)** in need of communicating with patients about sweeteners.

It followed up on the insights gathered during the [Communication Lab #1 on Sweeteners \(September 2024\)](#), an open online staged event which combined a live survey with structured expert discussion. This first Lab brought together a broad and informed audience, including representatives from medical and diabetes associations, food safety agencies, industry, academia, and consumer advocacy, to explore public communication challenges around sweeteners.

Building on these collected data, this second, more focused session invited a **select group of multidisciplinary experts, including general practitioners, nurses, dietitians, patient educators as well as sweetener producers**, to co-create actionable guidance specifically for HCPs. These professionals, mostly seen as highly trusted sources of information for EU citizens, are ideally positioned to respond to patient concerns and provide nuanced, evidence-based messages.

The Communication Lab: a co-creation methodology

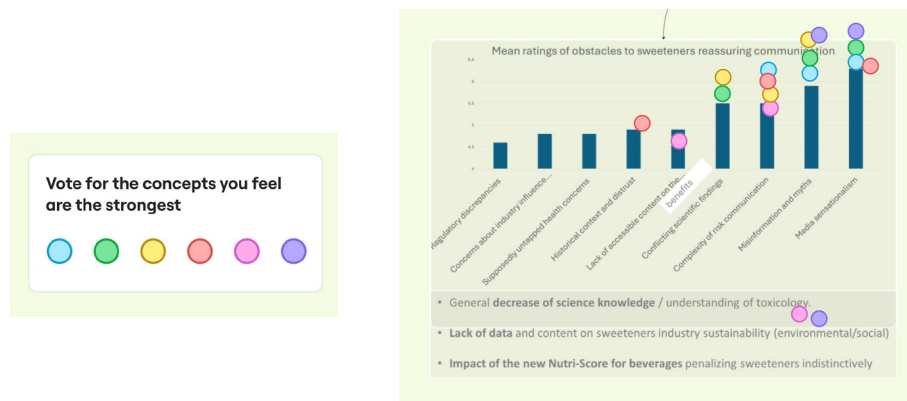
This Communication Lab #2 aimed at **bridging the gap between scientific knowledge and everyday clinical practice**, grounding the recommendations in **real-world experience**, **medical practice constraints**, and **patient realities**. Our co-creation methodology is explained below.

1

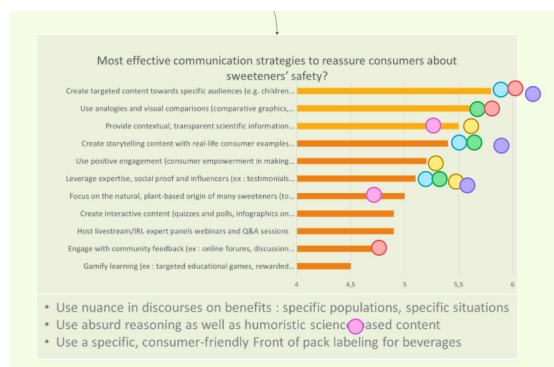
Collective, assisted reflection on learnings from the Communication Lab #1

Based on key results from the expert audience survey from Communication Lab #1 on sweeteners:

- workshop participants saw **media-driven fear, science complexity, and common myths** as the most urgent communication hurdles.



- they called for **clearer, audience-specific tools** that combined **scientific transparency** with **relatable formats** like analogies and personal stories.



This aligned with insights from Communication Lab #1 expert keynotes, such as "Risk perception is emotional, not scientific," "Science literacy is low" or "Natural/artificial perception gap is persistent."



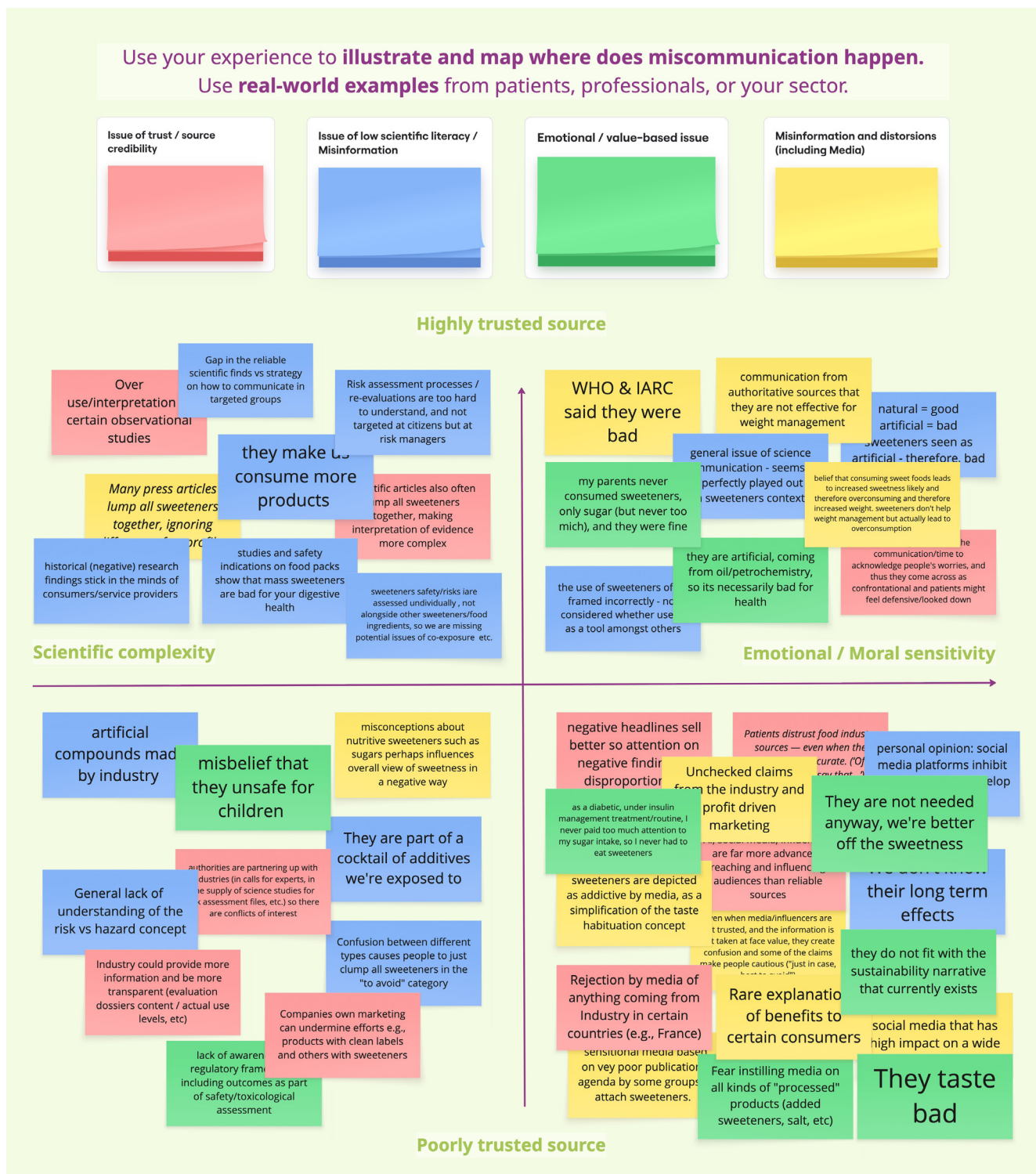
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Mapping the current communication obstacles

After the first collective reflection, participants mapped **real-world obstacles to reassuring communication** related to sweeteners along two axes:

- Trust in the information source (low to high)
- Nature of the obstacle (from scientific complexity to emotional/moral sensitivity)

This created four thematic zones that help explain why reassuring communication around sweeteners often fails to resonate. Below are some of the key takeaways per zone.



Zone 1 (Low Trust + Scientific Complexity)

- Participants highlighted a **credibility gap** when scientific messages come from, or are **associated with, the food industry**.
- **Misunderstandings around risk vs hazard, additive “cocktails”, and the artificial nature of sweeteners** fuel public skepticism.
- Even **accurate information is dismissed** if the source is perceived as biased.

Obstacle quote: “People doubt regulatory risk assessments on food additives because required studies and overall files must be submitted by industries themselves”

Zone 2 (High Trust + Scientific Complexity)

- **Even trusted institutions (like WHO, SACN, EFSA)** struggle to communicate effectively.
- **Scientific nuance, evolving evidence, and unclear messaging create confusion.**
- Sources like **food rating apps or lifestyle media misrepresent findings**, and recommendations (e.g. WHO’s conditional guidance) are easily misinterpreted.

Obstacle quote: “Epidemiology works often lump all sweeteners together, so **it’s hard to draw univocal, robust conclusions on specific sweeteners**”

Zone 3 (Low Trust + Emotional/Moral Sensitivity)

- Sweeteners are moralized: seen as **unnatural, profit-driven, or part of a harmful food system**.
- **Social media, influencers, and “gut health” trends fuel fear-based narratives**, even when not trusted.
- **Mistrust doesn’t block influence**; it fosters confusion and avoidance.

Obstacle quote: “Media sensationalism steers people away from artificial ingredients, often **out of precaution, even when proved safe to consume** in realistic amounts”

Zone 4 (High Trust + Emotional/Moral Sensitivity)

- Even when trust is high, **emotional narratives dominate**.
- Sweeteners are **associated with “diet culture”, weight shame**, artificiality, or generational norms.
- If experts fail to acknowledge these perspectives, their **advice risks being rejected or misunderstood**.

Obstacle quote: “Authorities often don’t **address citizens’ concerns** in communicating their results”

This mapping exercise highlighted the need for **communication strategies that go beyond scientific nuance and accuracy, addressing trust, emotion, and real-life experience** to be truly effective.

3

Co-creating audience-specific messages

Next, participants co-created tailored messages to support HCPs in addressing sweeteners more clearly, considering the **specific needs, values, and expectations of their different audiences** (e.g. patients, HCP colleagues, healthcare associations, the public, etc.).

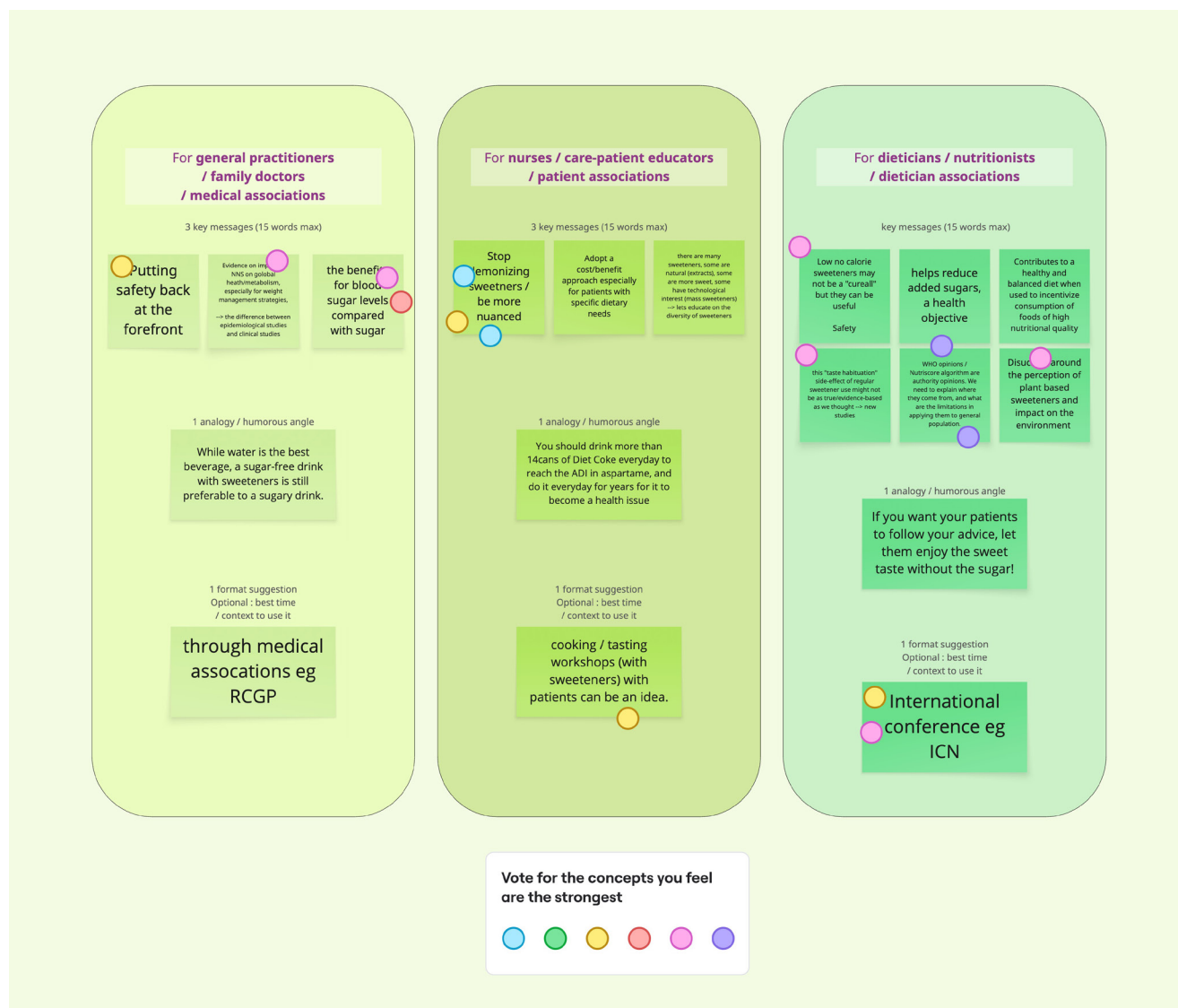
Using a matrix with columns for audience, message, tone, and format, the group developed a **range of actionable ideas grounded in real-world practice**.

Add concrete examples of
how to talk about sweeteners to patients or other healthcare professionals.
Keep it realistic and human.

Audience type ex : GP / dietitian / skeptical patient / diabetic patient / young nutritionist, etc.	Message (simple, science-based, reality-based/pragmatical, etc.)	Tone ex : neutral, humorous, absurd, serious, analogical, etc.	Format ex : infographic, 1-min video, analogy, 3-bullet script, FOP label concept, etc.
Patient	Ask your care team — not TikTok — when in doubt.	neutral	inside an informational mail/newsletter
dietitian / patients	Think of sweeteners like spices — safe in normal amounts, weird in buckets	humorous	inside an infographics on safety
dietitians	sweeteners are assessed by international agencies worldwide and therefore are safe for use at approved conditions of use	informative	
all	sweeteners undergo stringent safety assessments prior to approval - use at proposed levels is safe	informative	infographic or short video
dietitians and other healthcare professionals	sweeteners can potentially be a useful tool for supporting positive and sustainable behaviour change. also acknowledge limitations and that they may not be useful to everyone	informative	case study described in a short video/patient testimonial
Diabetic patients	Data/infographic showing evolution of number of products becoming available to them since sweeteners are used	neutral	infographic
GP, Dietitians/Nutritionist	Communication/strategy guide or template on how they can talk/give information to patients/clients (can be adjusted to the different specialty/topics of the practitioners)		Infographic, toolkit
Dietitians / family doctors	Sweeteners can help people eat/enjoy specific foods (personalized / medical nutrition products) while not adding sugar in them	neutral	pleasure based message on product packaging
healthcare professionals	well established regulatory framework exists for assessing, approving and monitoring food additives in the diet	reassuring	infographic with short video
Healthcare professional	Before giving facts, unearth underlying assumptions. E.g. Can you explain how you might choose which sweetener to use/to consume?		part of recommendations
Caring staff	Testimonies of patients benefiting from access to products with sweeteners		short video clips
patients	Sweeteners can be natural (extracted from plants) or artificial, this does not define their safety profile. Arsenic and poison ivy are natural !	Humorous/absurd	bullet points
All	Visualise the safety factors built in an ADI calculation	Absurd	infographic
GP, Dietitians/Nutritionist	Consumer data on which information are needed, obstacles, misconceptions so they are better guided on which information they need to communicate		Infographic, training webinar, info session
healthcare professionals	consuming sweet foods does not lead to increased sweetness liking	humours	
All	Illustrate the outstanding amount of chemicals we're constantly exposed to through our entire life, and show how much we know about sweeteners compared (data rich vs data poor)	Absurd	Infographic / series of illustrations
Patients	Debunking top X (5,7, 10) myths about sugar and sweeteners		Infographic
influencers with an interest in food/nutrition	this is what sweeteners are and this is why they are used by some	educational	webinar
patients	benefits of consuming foods containing sweeteners	informative	testimonials

Finally, recognizing the unique role and constraints of different audiences, such as general practitioners, nurses, patient associations and dietitians, **participants proposed practical, evidence-based messages that are reassuring, context-sensitive, and aligned with both the scientific consensus and real-life concerns.**

Participants also emphasised tone and format: simplifying scientific processes, integrating analogies or humor, and using trusted dissemination channels like medical associations.



Essentially, this second Communication Lab on sweeteners provided a collaborative, cross-sectoral space for generating practice-fit recommendations to support HCPs in navigating a complex, often polarised topic.

Participants brought forward **insights informed by clinical practice, patient experience, regulatory knowledge, and food system realities.**

By grounding discussions in real-world constraints, from HCPs' time and trust barriers to patients' fears and misconceptions, the workshop shed light on how tailored communication can bridge the gap between scientific evidence and public perception.

The end result is a **set of 15 actionable recommendations** designed not only to improve reassuring communication about sweeteners but also **to empower professionals to deliver science-based, empathetic, and context-sensitive guidance** on nutrition and health.

15 recommendations to healthcare practitioners when communicating about sweeteners

General recommendations (for all HCPs)

1



Reframe the narrative:

Emphasize that sweeteners are not shortcuts but tools – safe when used appropriately, and helpful within balanced diets.

2



Explain the sweeteners safety evaluation process:

Clearly communicate the rigour and thoroughness of the scientific assessments sweeteners undergo: long-term risk evaluations, real-life exposure thresholds (ADI), inclusion of margins of safety, etc.

3



Debunk health myths with evidence:

Clarify that sweeteners do not cause sugar taste habituation, nor diseases like cancer or diabetes in humans when consumed within safe limits.

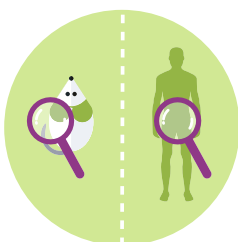
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Avoid oversimplification:

Address common misunderstandings (e.g. “sweeteners are all the same” or “natural = safe”) by explaining the diversity, the origin and purpose of different sweeteners.

5



Contextualize studies:

Help patients understand differences between epidemiological and clinical research, between different toxicology models (cellular, animal, human, etc.), and why different studies have different weights when it comes to building scientific consensus.

6



Use everyday, relatable analogies:

For example, comparing the amount of Diet Coke needed to reach the aspartame ADI (e.g. 14 cans/day for years) helps make safety relatable.

7



Welcome emotional concerns with empathy, clarify them with sourced narratives:

Offer empathetic, trust-building messages that validate their concerns but debunk misinformation (e.g. about “artificiality” or “addiction”). Taking your own personal experience as a message base can also help them question their concerns.

8



Promote risk-benefit thinking:

Encourage balanced decisions that consider the individual, concrete health benefits of sweeteners (e.g. for blood sugar control or appetite support) over abstract risks that are accounted for in the EU.

Specific to general practitioners & medical associations

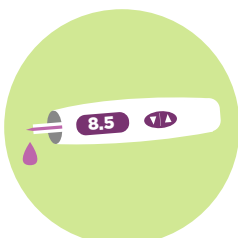
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Leverage trusted channels:

Disseminate messages through credible bodies (e.g. RCGP) and with medical infographics showing sweetener thorough approval/safety evaluation processes.

10



Reinforce dietary benefits:

Support sweeteners as part of dietary, pleasurable strategies for managing conditions like diabetes or obesity, when keeping a low sugar intake is essential.

11



Normalize their use in medical contexts:

Point out that oral medical products and dietary supplements often already contain sweeteners.

Specific to nurses, patient educators & associations

12



Use patient stories:

Share real-life examples of how sweeteners can help maintain eating pleasure, cultural and social practices, as well as regular nutrient intake in vulnerable patients.

13



Prefer visuals and experiences:

Use simple, colorful food visuals or even live cooking activities with patients to build culinary familiarity, reduce fear, and improve adoption of sweeteners.

Specific to dietitians & nutritionists

14



Focus on personalization:

Tailor specific sweetener recommendations to each patient's lifestyle, taste sensitivity thresholds and preferences, as well as clinical condition.

15



Address microbiota concerns transparently:

Stay up to date and communicate openly about emerging research on sweeteners and gut health, while emphasising context and dose.

Do you have questions or want us to illustrate these recommendations through examples?

Contact us!

Frederic Bayer

Content & Outreach Manager
frederic.bayer@eufic.org

