

EFSA Re-evaluation of the Salt of Aspartame–Acesulfame (E 962)

Food Safety Scientific Watch



Scientific
assessment



Consumer
safety



Regulatory
implications

Scientific assessment ● Consumer safety ● Regulatory implications

Based on the EFSA Panel on Food Additives and Flavourings (FAF) re-evaluation published in September 2026



EFSA FAF Panel (EFSA Panel on Food Additives and Flavourings), Castle, L., Andreassen, M., Aquilina, G., Bastos, M. L., Boon, P., Fallico, B., FitzGerald, R., Frutos Fernandez, M. J., Grasl-Kraupp, B., Gundert-Remy, U., Gürtler, R., Houdeau, E., Kurek, M., Louro, H., Morales, P., Passamonti, S., Bruzell, E., Fortes, C., ... Lodi, F. (2026). **Re-evaluation of salt of aspartame–acesulfame (E 962) as food additive.** *EFSA Journal*, 24(9), e10259. DOI: 10.2903/j.efsa.2026.10259.

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KEY MESSAGE: EFSA confirms the safety of the salt of aspartame–acesulfame (E 962) at current exposure levels, following an updated assessment of its two components, aspartame (E 951) and acesulfame K (E 950).

Executive summary

E 962 is an authorised intense sweetener that dissociates after ingestion into aspartame and acesulfame. EFSA therefore assessed the additive using evidence relevant to E 962 itself and to its two components. For aspartame, EFSA updated toxicological, epidemiological and mechanistic evidence using risk-of-bias and weight-of-evidence approaches and reconfirmed the ADI of 40 mg/kg bw/day. For acesulfame K, EFSA relied on its 2025 re-evaluation and the ADI of 15 mg/kg bw/day. Combined exposure from E 962 and the separate uses of E 951 and E 950 remained below these reference values. EFSA nevertheless identified specification and impurity issues for regulatory follow-up.

1. Why this work matters

The central question is whether combined dietary exposure to aspartame and acesulfame, from E 962 and from their separate uses as E 951 and E 950, remains compatible with their health-based guidance values.

The assessment is also relevant in the context of renewed scientific attention to aspartame. In 2023, the International Agency for Research on Cancer (IARC) classified aspartame as “possibly carcinogenic to humans” (Group 2B), based on limited evidence, while JECFA reaffirmed the ADI of 0–40 mg/kg bw/day. These evaluations address different questions: IARC performs hazard identification, whereas JECFA and EFSA conduct risk assessments that also consider dose and dietary exposure.

2. What did EFSA evaluate?

Component / area	Scope
E 962 itself	Identity, composition, specifications, manufacturing information and potential impurities.
Aspartame (E 951)	Updated toxicological, epidemiological and mechanistic evidence.
Acesulfame K (E 950)	Evidence and conclusions from EFSA’s 2025 comprehensive re-evaluation.
Dietary exposure	Exposure to aspartame and acesulfame from E 962 combined with their separate uses as E 951 and E 950.

3. Methodology applied and data used

The re-evaluation was conducted within the EU programme for food additives authorised before 20 January 2009. EFSA considered submitted data and scientific literature available up to June 2025. The assessment followed EFSA protocols for hazard identification and characterisation of sweeteners and for dietary exposure assessment.

- ✓ Aspartame (E 951): human epidemiological, animal toxicological and mechanistic evidence was assessed using risk-of-bias and weight-of-evidence approaches.
- ✓ Acesulfame K (E 950): EFSA used the evidence and conclusions from its 2025 re-evaluation, which established an ADI of 15 mg/kg bw/day.
- ✓ E 962: available technical information on identity, composition, specifications, manufacture and impurities was considered.

- ✓ Exposure: food-consumption information from 46 surveys in 23 EU countries was combined with reported use levels and analytical monitoring data. Exposure from E 962 was considered together with exposure from E 951 and E 950.

4. Main findings

Area	EFSA finding	Interpretation
Overall	No safety concern identified for E 962 at currently reported uses and use levels.	Conclusion applies to the assessed exposure scenarios.
Aspartame (E 951)	ADI of 40 mg/kg bw/day reconfirmed.	Updated evidence did not lead EFSA to revise the existing ADI.
Acesulfame K (E 950)	ADI of 15 mg/kg bw/day from the 2025 re-evaluation remains applicable.	The 2025 ADI replaced the previous 9 mg/kg bw/day value.
Exposure	Current estimates across assessed age groups remained below the relevant ADIs.	E 962 contribution was assessed together with separate E 951/E 950 uses.
Specifications / impurities	EFSA recommended updates to specifications and follow-up on impurities.	Risk-management issue rather than a change to the overall safety conclusion.

5. Aspartame and cancer: interpreting the evidence

IARC's 2023 Group 2B classification indicates that aspartame is “possibly carcinogenic to humans” and was based on limited evidence for cancer in humans. The classification identifies a potential carcinogenic hazard; it does not quantify cancer risk at a particular dietary exposure. JECFA's 2023 risk assessment considered toxicological, epidemiological and exposure evidence and found no reason to change the ADI of 0–40 mg/kg bw/day. In the 2026 E 962 assessment, EFSA's updated evaluation likewise did not lead to a revision of the 40 mg/kg bw/day ADI for aspartame.

6. Uncertainties and specifications requiring follow-up

- ✓ Potential presence of 5-chloro-acesulfame in E 950 and the lack of experimental genotoxicity data for this impurity also apply to E 962 because E 950 is used in its manufacture.
- ✓ EFSA considered the identified uncertainties not to alter the overall safety conclusions for E 950, E 951 or E 962.
- ✓ EFSA also recommended reviewing arsenic and lead limits in the EU specifications for aspartame (E 951).

7. What changed — and what did not?

NEW / UPDATED	REMAINS UNCHANGED
• Completion of the E 962 re-evaluation • Updated aspartame evidence review • Integrated component exposure assessment • Follow-up recommendations on specifications and impurities	• Aspartame ADI: 40 mg/kg bw/day • Acesulfame K ADI: 15 mg/kg bw/day • No safety concern identified for current assessed E 962 uses/exposure

8. Implications for competent authorities

The EFSA conclusion does not indicate a need for an immediate change in risk-management measures solely on the basis of current assessed E 962 exposure. For competent authorities, relevant follow-up areas include surveillance of sweetener use and exposure, verification of additive specifications and purity, and attention to changes in product formulation or consumption patterns that could modify population exposure. Risk communication should clearly distinguish E 962 from E 951 and E 950 and should preserve the distinction between hazard identification and exposure-based risk assessment.

9. Scientific milestones

Body / year	Subject	Outcome	Meaning
EU Scientific Committee on Food (SCF), 2000	Salt of aspartame–acesulfame	Considered acceptable based on its constituent sweeteners	SCF considered that the salt dissociates into aspartame and acesulfame ions and assessed it on the basis of the two components and their respective ADIs.
EU Scientific Committee on Food (SCF), 2000	Acesulfame K	ADI: 0–9 mg/kg bw/day	Established the European ADI subsequently reconsidered by EFSA in 2025.
EFSA, 2013	Aspartame (E 951)	ADI: 40 mg/kg bw/day	Comprehensive re-evaluation; the existing ADI was maintained.
IARC, 2023	Aspartame	Group 2B – possibly carcinogenic to humans	Hazard identification based on limited evidence for carcinogenicity in humans; does not quantify risk at dietary exposure levels.
JECFA, 2023	Aspartame	ADI: 0–40 mg/kg bw/day reaffirmed	Risk assessment considering available evidence and dietary exposure; the existing ADI was retained.
EFSA, 2025	Acesulfame K (E 950)	ADI: 15 mg/kg bw/day	ADI revised from the previous 9 mg/kg bw/day established by the EU SCF in 2000.
EFSA, 2026	Salt of aspartame–acesulfame (E 962)	No safety concern at currently reported uses and use levels	Re-evaluation considering E 962 and its components, including updated evidence for aspartame and combined exposure from E 962, E 951 and E 950.