

## Cartas al Editor

### Will boron be essential for human nutrition?

*Anacleto Sosa Baldivia, Guadalupe Ruiz Ibarra, and Jorge D. Etchevers Barra.*

Nutrilit S de RL de CV. Instituto Tecnológico Superior de Tamazula de Gordiano, Jalisco, México. Colegio de Postgraduados (COLPOS). Instituto de Recursos Naturales (IRENAT). Montecillos, Estado de México.

The importance of boron (B) as a micronutrient for vascular plants was proven by Katherine Warrington in 1923 (1). Soon after this discovery, researchers also began to study whether B is essential for animal and human nutrition. Currently, the importance of B for human nutrition is not accepted or proven within the scientific community, and therefore continues to be in question. The first evidence that B could be an essential micronutrient for humans was presented by Dr. Rex Newnham at the International Symposium on Trace Elements in Man and Animals<sup>4</sup> (TEMA<sup>4</sup>) held in Perth, Australia in 1981 (2). This author claimed that ingesting 6 mg B day<sup>-1</sup> of sodium tetraborate could alleviate arthritic pain. In addition, Newnham et al. (3) reported that in countries with B intakes around 3 mg B day<sup>-1</sup> or less such as Jamaica and Mauritius, the incidence of arthritis is near to 70%. However in countries such as Israel, Australia, and New Zealand where the B intakes is equal or higher than 6 mg B day<sup>-1</sup>, the incidence of arthritis on the population were absent or the incidence rate was less than 1%. With these results, he hypothesized that B is an important micronutrient for human metabolism. Recently published research reported that people older than 40 years of age can prevent and/or correct arthritis, osteoporosis, osteoarthritis, cancer (cervical and prostate) and cardiovascular diseases by taking B equal to or higher than 3 mg day<sup>-1</sup> (4,5). This scientific finding is in agreement with what occurs with populations from Italy, Cyprus, and Turkey; in these countries the feeding is based on the famous healthy Mediterranean diet that includes staple foods rich in B such as grape, broccoli, garlic, tomato, pomegranate and olives combined with the consumption of drinking water with high levels of B, which frequently results in intakes of B higher than 13 mg day<sup>-1</sup> person<sup>-1</sup> (6). Several researchers (7,8) agree that in these countries, the high B intake

explains why their population has been considered the healthiest in the world, especially those from Tuscany, Italy. There are three main sources that supply B for humans: 1).- Drinking water; 2).- Vegetable foods (mainly fruits and vegetables); and 3).- Products daily used for personal care (soaps, lipsticks, shampoo, skin cream, gastric antacids, cosmetics, detergents, contraceptives and estrogen supplements) (9,10,11). These sources, on average, supply around of 0.6, 1.0, and 0.5 mg B day<sup>-1</sup> person<sup>-1</sup>, respectively (6,11). Two sources of B that has been important since 1990 on the daily life of humans are supplements and nutraceuticals, which can supply between 3 and 10 mg B day<sup>-1</sup> (12). Most supplements contain B as inorganic compounds in the form of sodium tetraborate and boric acid as active ingredient (13). While nutraceuticals are produced using crops such as grape, broccoli, plum, peach, pomegranate and tomato that accumulate B into organic forms such as fructoborates, amino acid ester borates, polyphenols and peptic polysaccharide borate complex, that are organic sources of B which are highly bioavailable (12), as well as beneficial metabolites and phytonutrients which help to maintain human health (14, 15, 16,17). The essentiality of B in humans is not yet widely accepted, but the scientific information indicates that to ensure an adequate nutrition, humans require between 2 and 6 mg B day<sup>-1</sup> person<sup>-1</sup> (2,18). In light of this evidence, countries such as Australia, England and USA where B intakes are lower than the sufficiency level have permitted sales of supplements and nutraceuticals that contain B in order to ensure that the population can meet their daily B requirements (6). Although there is evidence from the countries discussed, the global scientific community has not yet accepted that B is an important micronutrient for human nutrition and its important role in human metabolism (19); however

we are sure that in a short term the B essentiality for human will be proven, and when this occurs we finally understand why since 35 years ago Newnham recommended their use to prevent and correct arthritis and osteoporosis.

### REFERENCES

1. Crespo E. El boro elemento nutricional esencial en la funcionalidad ósea. *Rev EspCirOsteoart.* 2001; 206: 88-95.
2. Newnham ER. Mineral imbalance and boron deficiency. In: Trace elements metabolism in man and animals (TEMA-4). In: Howell JMcC, Gawthorne JM, White CL, eds. Canberra, Australia. Aust Acad Sci.1981; 400-402.
3. Newnham ER, Bingham RB, Hegsted M, Hunt C, Jeffries JJ, Loneragan LJ, et al. Supplement to the art of getting well boron and arthritis. Wyburn-Mason and Jack M. Blount Foundation for Eradication of Rheumatoid Disease. AKA The arthritis Trust of America. Fairview TN, USA. 1994; 10p.
4. Price TC, Langford RJ, Liporace AF. Essential nutrients for bone health and a review of their availability in the average North American diet. *Open OrthopJ.* 2012; 6:143-149.
5. Strum BS. Boron maintains bones, joints, neurons and may reduce prostate cancer risks. *LE Magazine.* 2003. <http://www.lef.org/>
6. Meacham S, Karakas S, Wallace A, Altun F. Boron in human health: evidence for dietary recommendations and public policies. *Open Miner Process J.* 2010; 3:36-53.
7. Vengosh A, Kloppmann W, Marei A, Livshitz Y, Gutierrez A, Banna M, et al. Sources of salinity and boron in the Gaza strip: natural contaminant flow in the southern Mediterranean coastal aquifer. *Water Resour Res.* 2005; 41: doi:10.1029/2004WR003344.
8. Weinthal E, Parag Y, Vengosh A, Muti A, Kloppmann W. The EU drinking water directive: the boron standard and scientific uncertainty. *Eur Environ.* 2005; 15:1-12.
9. Bakirdere S, Orenay S, Korkmaz M. Effect of boron on human health. *Open Miner Process J.* 2010; 3:54-59.
10. Becking GC, Chen BH. International Program on Chemical Safety (IPCS) environmental health criteria on boron human health risk assessment. *Biol Trace Elem Res.* 1998; 66:439-52.
11. Hunt DC, Shuler RT, Mullen ML. 1991. Concentration of boron and other elements in human foods and personal care products. *J Am Diet Assoc* 1991; 91: 558-568.
12. Dinca L, Scorey R. Boron in human nutrition and its regulations use. *J Nutr Ther.* 2013; 2:22-29.
13. Devirian AT, Volpe LS. The physiological effects of dietary boron. *Crit Rev Food Sci Nutr.* 2003; 43: 219-231.
14. Lea AM, Ibeh C, desBordes C, Vizzotto M, Cianeros-Ceballos L, Byrne HD, et al. Inhibition of growth and induction of differentiation of colon cancer cells by peach and plum phenolic compounds. *Anticancer Res.* 2008; 28: 2067-2076.
15. Canene-Adams K, Lindshield LB, Wang S, Jeffery HE, Clinton KS, Erdman Jr. WJ. Combinations of tomato and broccoli enhance antitumor activity in dunning R3327-H prostate adenocarcinomas. *Amer Assoc Cancer Res.* 2007; 67: 836-843.
16. Singh PR, Tyagi KA, Dhanalakshmi S, Agarwal R, Agarwal C. 2004. Grape seed extract inhibits advanced human prostate tumor growth and angiogenesis and upregulates insulin-like growth factor binding protein-3. *Int J Cancer.* 2004; 108: 733-740.
17. Lin Y, Kazlova V, Ramakrishnan S, Murray AM, Fast D, Chandra A, et al. Bone health nutraceuticals alter microarray mRNA gene expression: A randomized, parallel, open-label clinical study. *Phytomed.* 2016; 23: 18-26.
18. Nielsen HF. 1988. Boron an overlooked element of potential nutritional importance. *Nutr Today.* January-February. 1988; 1-7.
19. Hunt DC. Dietary boron: progress in establishing essential roles in human physiology. *J Trace Elem Med Biol.* 2012; 26:157-160.