

## **Is Caffeine Really A Problem?**

Principles of Public Relations

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## **Introduction**

Everyday numerous people run in and out of convenient stores, to and from vending machines, and all around cafeterias grabbing drinks to go. How often do those people count how often they grab something caffeinated? Do they realize how much caffeine they consume? Or do they ever question how it may affect their health? These are just a few of the questions that led to research that follows. Throughout this process illustrations of the affects of caffeine will be shown as well as where caffeine is found.

## **Background Information**

Technically, a drug is a chemical substance used to prevent or cure disease or to enhance a person's physical or mental welfare. In fact, people use caffeine for all of these purposes and caffeine can do all of these things, but usually in a very limited way. Caffeine is the most popular drug in the world. Though caffeine is a chemical used for both medical and non-medical reasons, most often it is non-medically for its stimulating affect on mood and behavior. Drugs that are taken to alter mood or change behavior are known as "psychoactive drugs." Heroin, cocaine, marijuana, nicotine, alcohol, and caffeine are all psychoactive drugs. Pure caffeine is a bitter-tasting, white powder that resembles cornstarch. It is moderately soluble in water at body temperature and is easily soluble in boiling water. "It was first isolated from coffee in 1820 and from tea in 1827 and given the name "theine." Soon after that, it was recognized that mood-altering and behavior-altering properties of both coffee and tea came from caffeine. After coffee and tea the next most important source is soft drinks, and the next cocoa and chocolate." (Monroe,98) The final important source is in prescription and over the counter drugs. People who regularly consume large amounts of coffee (more than 5 cups per day) often

find their system has adapted to this amount so that their tolerance to the substance increases; the results is that they must increase their intake to have any stimulating affect. Also if such people go without coffee for some time-as little as a few hours in some cases they may suffer from withdrawl symptoms such as fatigue, headaches, and irritability due to their physical and psychological dependence on the drug.

When looking to see if this is really a problem to gather a random sample of data, 100 people that are either employees or customers at a local St. Louis car dealership filled out surveys about their caffeine intake. Also to illustrate different affects on people who do intake a lot of caffeine compared to those who do not, two females and two males where interviewed. This next chart also describes where a majority of caffeine in daily products is found. It is the overuse of many of these products that can lead to a problem.

### Caffeine Count

Coffee is far from the only caffeine-containing product on the market. Check out the chart to see what else you eat and drink that contains the chemical.

Beverages	Serving size	Caffeine
Coffee		
drip	5 fluid oz.	110-150 mg
percolated	5 fluid oz.	64-124 mg
decaffeinated	5 fluid oz.	2-5 mg
instant,		
with caffeine	5 fluid oz.	40-108 mg
instant,		
decaffeinated	5 fluid oz.	2 mg
Tea		
hot, 3-minute steep	6 fluid oz.	36 mg
iced	8 fluid oz.	31 mg
Colas		
Coca-Cola	12-oz. can	46 mg
Pepsi Cola	12-oz. can	36-38 mg
Mountain Dew	12-oz. can	54 mg
Hot cocoa	6 fluid oz.	4 mg
Foods		
milk chocolate	1 oz.	1-15 mg
unsweetened		
baking chocolate	1 oz.	25 mg
Drugs (standard dose)		
Anacin		64 mg
Excedrin		130 mg
Midol		60 mg
No-Doz		200 mg

(Linder, 1993)

“Caffeine’s addictions are not life threatening, but they could become a problem,”

according to Neal Barnard, M.D., president of the Physicians Committee for Responsible Medicine. (Hunt,99) Caffeine affects the central nervous system by stimulating with the brain, increasing heart rate and relaxing the muscles of the kidneys and digestive system. Heavy consumption is linked to infertility, miscarriage, birth defects, and a decrease in the absorption of vital calcium and iron. Dependency can lead to insomnia, exacerbated PMS symptoms, and emotional irritability. (Hunt, 99)

### Methodology

When researching, surveys, personal interviews and secondary research were all used. Secondary research was necessary so that a background could be established and

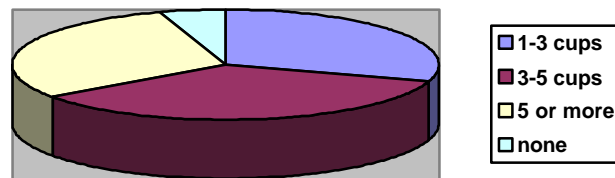
the primary surveys and interviews to reiterate the findings of the secondary research.

This seemed to be the best way to show the affects of caffeine and illustrate the average number of people that do consume enough caffeine to be addicted is high.

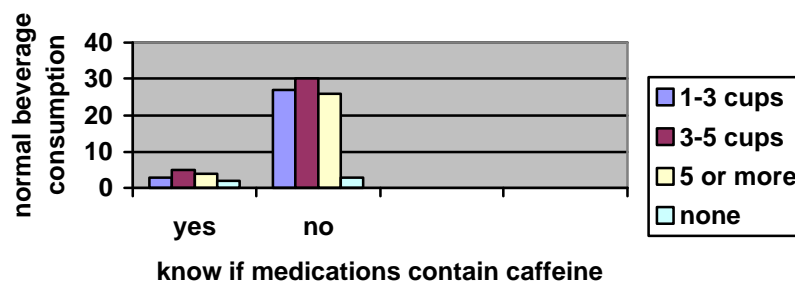
### Findings

All of those surveyed were above the age of 18. 62 were male and 58 were female. There was no direct connection, or need for, results to whether or not females or males consumed more caffeine. The majority of people consume at least three beverages that contain caffeine and do not know if any medications they take contain caffeine.

**Caffeine Consumed Per Day**



**Know Tf They Take Medications With Caffeine**



“I have no idea if anything I take on a regular basis contains caffeine,” stated Gary Eagen, “guess I’ll check the bottles.”(personal interview) After this interview Eagen checked his bottles and found that one of his medications he uses regularly contains a

huge amount of caffeine. Eagen has high blood pressure and is now wondering if there is a connection due to his past habits of numerous morning coffees, and regular use of a pain reliever. (Eagen, personal interview) It was this interview as well as the three others, Harold Ritchie, Carrie Nichols and Kasey Dillon that helped to inform of the reality due to caffeine addiction and lack of knowledge about the problems. Eagen and Nichols are both heavy consumers of caffeine; whereas, Ritchie and Dillon try to stray from caffeine completely. Nichols had recently learned of the caffeine in her medications that helped her realize she really had an addiction. “ I went to my doctor about frequent headaches and that’s when he told me about the caffeine in my medication.” Nichols said. She had been taking Excedrin when she got headaches, which were the result of her coffee cut back while dieting. The caffeine in the Excedrin was a large help to her headache, however the fact that she needed to take pills about the same time everyday is what scared her to the doctor’s visit. (Nichols, personal interview)

Dillon and Ritchie neither suffered from any withdraw symptoms. “If I ever drink even a soda I have to be sure its not before I go to bed because I react to the caffeine so easily,” said Dillon. She rarely drinks any beverages or takes any medications that contain caffeine unless she really needs to feel the affect. (Dillon, personal interview)

Ritchie, however, has new habits due to realization of his past addiction. “It had gotten to the point I was drinking a 2-liter bottle of Dr. Pepper and half a pot of coffee just to function normally for a day,” Ritchie stated when explaining why he watches for caffeine today. He says he feels better on a daily basis now that he only consumes caffeine seldomly. “Its not like caffeine is cocaine, it is just a common drug that not many people realize affects their health. Its okay to have the occasional cup of coffee or soda but too

much is something I would warn anyone to stay away from.” (Ritchie, personal interview)

## **Discussion**

Oddly enough caffeine addiction can be inherited. Kenneth Kendler, M.D., a professor of psychiatry at Virginia Commonwealth University Medical College found that the likelihood of inheriting a taste for caffeine is extremely high for women. “If the best part of waking up is coffee in your cup, chances are you’re dependent and so is your family.” (Chatterjee, 99) It’s a very common problem that is linked to numerous health issues. Although the case is rare that someone passes on a taste for caffeine the way a cocaine addict gives birth to a baby going through withdrawals, it is something that happens. It may not be severe but it is something that not many people are informed about and need to be. A public relations campaign about this may not be huge, but it would have a purpose. Even if it led to just a common pamphlet that is picked up occasionally at a doctor’s office it is important.

Personally the results of the survey were surprising to me. I knew that drinking coffee and sodas were common, but not as common as five or more cups per day! The results of the survey as well as the interviews helped to me realize there was an issue. I was not sure if this was actually a topic I was looking at to do farther research but it intrigued me. I am currently working at a car dealership and noticed how many people regularly drank coffee. It was then that I decided to do a survey and see if it was worth perusing. I put out 100 surveys plus a few more just in case there were some those could not be used and found the results worth looking into.

Now I see the benefits of providing information to people about caffeine addiction to keep them from future health problems. It was not until researching through articles that I found how much caffeine is in medications. This too surprised me and made me wonder about my own intake of caffeine. I would enjoy creating a couple pieces that would inform someone about caffeine. There is not much that I see myself doing with it but I think is worth looking into.

### **Conclusion**

Basically, caffeine is a drug. "Caffeine, whether consumed in coffee, soft drinks, or in any other form, affects everyone differently. People sometimes become addicted which creates both dependence and tolerance."(Monero, 98) Many people do not realize the affects it can have and how much they really consume. By informing people of the problems with caffeine they can limit their intake and avoid future problems. There are probably many different topics that have a much larger use or meaning, but this is still one that I think deserves some attention.

I am sure that on a different level than just one person doing quick research during the summer would lead to a better outcome. A larger study may lead to different conclusions or ideas. It may even lean towards more medical uses than anything else. Just from outside observation, caffeine addiction could be correlated with smoking or formation of habits. For this class and this research project, this research has used the basic idea of random sampling and personal interviews to help illustrate the results from secondary research to lead to the need for an informational campaign to the public.

## Works Cited

Chatterjee, Camille (1999). Java Genes. *Psychology Today*, Vol. 32, issue 4. Retrieved

June 13, 2003 from Academic Search Elite database.

Hunt, Paula (1999). Quit!. *Vegetarian Times*, January 99, issue 257, pp18-21. Retrieved

June 13, 2003 from EBSCOhost database.

Linder, Lawrence (1993). The Coffee/Health Connection: filtering fact from fiction.

*Arthritis Today*, vol.7, pp53-57. Retrieved June 10, 2003 from Academic Search

Elite database.

Monroe, Judy (1998). Caffeine's Hook. *Current Health 2*, vol.24, issue 5. Retrieved June

10, 2003 from Academic Search Elite database.

## Interviews

Dillon, Kasey. Graduate student, age 22. Date of interview: June 11, 2003.

Eagen, Gary. Athletic Director, age 42. Date of interview: June 14, 2003.

Nichols, Carrie. Cheerleading Coach, age 28. Date of interview: June 11, 2003.

Ritchie, Harold. Teacher/Wrestling Coach, age 47. Date of interview: June 11, 2003.

APPENDIX

**Caffeine Survey**

If possible it would help out an employee with a college course if you could fill out the following information anonymously and return it to the tray on the counter.

Thank you!

Sex:        **Male**            **Female**

Age: \_\_\_\_\_

Number of beverages per day you consume that contain caffeine:

**None**        **1-3**            **3-5**            **5 or more**

If you take any prescription or over the counter medications do you know if they contain caffeine?

**Yes**            **No**

## **Interview Questions**

On a regular basis do you consume caffeinated beverages? If so, how often and what?

Do you feel you are in any way affected by caffeine? Why or why not?

Do you feel that your caffeine consumption or lack thereof affects your overall health?

How so?