FROM THE MAYO CLINIC

Don't toss the good fat; you need it

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Q. A new study says there are few health benefits from a low-fat diet. Do you agree?

--Rochester, Minn.

A. Like many health issues, this one is complicated.

Although your body needs some fat to function properly—it is a basic energy source and an important nutrient—too much fat, or too much of almost any food, can negatively affect your health. Eating large amounts of high-fat foods adds excess calories, which can lead to weight gain and obesity. Note that a gram of fat has more than twice the calories of a gram of protein or carbohydrate. And, too, much of certain types of fat, such as saturated fat or trans fat, can increase your risk of coronary-artery disease.

The study to which you refer was funded by the National Institutes of Health and published in the February issue of the Journal of the American Medical Association. The study indeed concluded that, in two groups of postmenopausal women (almost 49,000 in total who were followed for eight years), the group randomly assigned to a relatively low-fat diet did not experience lower rates of breast cancer, colorectal cancer or cardiovascular disease in comparison to the women who maintained their usual eating habits.

This news made quite a splash all over the country and around the world, and many people no doubt began wondering whether their reduced consumption of cheeseburgers and potato chips had been in vain.

The study's results, though credible, need to be qualified. For one thing, no distinction was made with regard to type of fat. The diet used in the trial was aimed at limiting all types of fat in the diet, harmful and healthier types alike. Also, although the low-fat group was supposed to reduce total fat intake to 20 percent of daily calories, the group failed to reach that goal by a significant margin. The final average was 29 percent—not dramatically different from the control-group members, who consumed an average of 37 percent. Similarly, while the low-fat group was asked to increase its consumption of fruits and vegetables, the group didn't go very far toward reaching this goal either. And some observers have pointed out that the eight-year study period might not have been long enough to detect an appreciable difference.

Alleged flaws of the study reported in JAMA may be debated endlessly, but the essential point, which it did not take into account, is that not all fats are "created equal." Saturated fats may increase your risk of heart disease by increasing your total of LDL ("bad") cholesterol. Trans fats may do so, too, while also lowering HDL ("good") cholesterol.
Monounsaturated and polyunsaturated fats, by contrast, can lower total and LDL cholesterol. And one type of polyunsaturated fat in particular, omega-3 fatty acids, may be especially beneficial to your heart. Omega-3s appear to decrease the risk of sudden death, especially in people at high risk of coronary-artery disease. They also may help lower blood pressure and triglycerides, along with other beneficial effects.

In other words, you need to be concerned about the types of fat you eat.

It's best to lower your consumption of saturated fat, found in large amounts in animal products (such as red meat, poultry skin and full-fat dairy products such as butter and whole milk) and coconut, palm and other tropical oils; and reduce intake of trans fats, common in commercial baked goods (such as crackers, cookies and cakes), fried foods, shortenings and some margarines.

A healthy diet includes more monounsaturated fats (found, for example, in avocados, most nuts and olive, peanut and canola oils), polyunsaturated fats (vegetable oils such as safflower, corn, sunflower, soy and cottonseed oils), and omega-3 fatty acids (cold-water fish such as salmon, mackerel and herring; flax seeds; and walnuts).

In sum, I recommend a plant-based, high-fiber diet that is rich in fruits, vegetables, whole grains, healthy proteins (nuts, beans, low-fat dairy products); and foods, such as fish, olive oil and canola oil, that have ample "healthy fats."

--Donald D. Hensrud, MD, endocrinology, Mayo Clinic, Rochester, Minn.

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