En ny stor undersökning som visar hur ett högre fettintag har samband med lägre risk för hjärt och kärlsjukdom.

En mer omfattande uppföljning av den epokgörande Lyon-Heart studien. (Medelhavskost med mer fett och grönsaker gav färre hjärtinfarkter än fettsnål kost).

Här får vi ännu en gång en rapport som stödjer den fettsnåla kostens risker. Dvs hos människor som löper hög risk att drabbas av hjärtsjukdom, såvar antalet dödsfall signifikant lägre hos den grupp som åt medelhavskost än hos den som åt fettsnål kost.

Effect of an Indo-Mediterranean diet on progression of coronary artery disease in high risk patients (Indo-Mediterranean Diet Heart Study): a randomised single-blind trial

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Introduction

People of south-Asian origin who live in developed countries have an increased mortality rate and susceptibility to coronary artery disease (CAD) compared with indigenous populations.[1-3] The prevalence of CAD is 10% in urban dwellers, but is low in rural dwellers (3-4%) and the lower social classes (1-3%) who consume a diet based on cereal. The risk shows a graded increase in urban dwellers, high social classes, and immigrants, which is linked to pronounced differences in diet and lifestyle.[1,2,4,5] However, the greater susceptibility of people of south-Asian origin to CAD is not explained by conventional risk factors, such as cholesterol and obesity, alone.[2,3] Results from the seven countries study[6] showed that such differences in coronary risk can be explained partly by antioxidants in the diet, variations in physical activity, and smoking. Data from epidemiological and cohort studies[7,8] also showed that increased consumption of fruits, vegetables and legumes, grains, nuts, and n-3 fatty acids might be associated with a decreased risk of CAD, and deaths attributable to coronary disease. Results from randomised controlled intervention trials[9-14] suggest that treatment with n-3 fatty acids and antioxidant rich foods such as fish, fruits, vegetables, legumes, and nuts can reduce cardiac events and related mortality in patients with CAD. Evidence suggests that dietary patterns could well have an effect on the mechanisms of atherosclerotic plaque vulnerability and the progression of thrombosis.[15-17]

The scientific advisory committee of the American Heart Association (AHA) has stated that a Mediterranean-style diet has impressive effects on the progression of cardiovascular disease.[13] Significant findings from the Lyon Heart Study[9,10] and other such studies,[11,12] have prompted an aggressive pursuit of the benefits of such dietary modifications in other regions of the world.[11,12,15] If the Lyon diet is also of benefit in non-Mediterranean populations, such as south-Asians, it might provide an economically feasible and realistic method to reduce CAD in these regions. The AHA statement[13] raised some issues for investigators: geographical and non-measured cultural and social differences in potential target populations; enhanced definition of baseline diets of both trial groups at the beginning of the study; enhanced and continuing analysis of true dietary patterns throughout studies; and an assessment of any changes in combined risk factors during the study. We have addressed some of these issues here. In patients with clinical CAD or with recognized risk factors, we assessed the effect of an Indo-Mediterranean diet consisting of whole grains including legumes, fruits, vegetables, nuts, and mustard or soybean oil.

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Discussion

Our results show that consumption of an Indo-

Mediterranean diet rich in -linolenic acid was associated

with a significant reduction in non-fatal myocardial

infarction, sudden cardiac death, and total cardiac

endpoints. Additionally, the intervention diet showed

improvements in the number of surrogate traditional risk

factors, which were better than those seen in controls who

adhered to the *prudent step I diet* (En form av fettsnålkost, min kommentar).

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Min kommentar*: Hur många av de människor i Sverige som i år kommer att dö i hjärtinfarkt skulle ha klarat sig om man frångick den fettsnåla kosten och övergick till s k medelhavskost?*

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