



**Consultation on the SACN draft report Saturated Fats and Health Report**

**Comments Form**

<b>Organisation:</b>	HEART UK – The Cholesterol Charity
<b>Name of commentator and contact details:</b>	Linda Main

- Please do not PDF the form.
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- Please list any references in full that you wish the committee to consider.

**Please email this form to:** [sacnsatfat@phe.gov.uk](mailto:sacnsatfat@phe.gov.uk) [You if you do not receive a receipt for your submission please email [sacn@phe.gov.uk](mailto:sacn@phe.gov.uk)]

**Closing date: 5pm 3 July 2018**

General comments	Comments
<p><i>Why was only RCT and PCS data considered given the limitation of these for nutritional guidelines</i></p>	<p>Please insert each new comment in a new row</p> <p>Although the report is comprehensive we are disappointed that it has limited itself to looking only at RCT and PCS evidence. There are well documented issues that arise when dietary guidelines are based solely on this type of research. RCT and PCS evidence, whilst helpful in developing nutritional guidelines, is more appropriate to assessing the suitability and effectiveness of medication, where blind randomisation is possible.</p> <p>One need only consider the volume of responses received from international experts over 17 years ago to the publication in the BMJ of the Cochrane systematic review on dietary fat and the prevention of CVD (Hooper et al 2001) and the succinct summary by Truswell documenting the problems with Cochrane reviews of diet and chronic disease (Truswell, AS 2005) in order to recognise the need to become more holistic and inclusive of in our approach to dietary guidelines.</p> <p>We need to develop a professional consensus amongst leading UK experts who have considered the RCT and PCS data but also assessed and interpreted the biochemical, cell culture, animal experiments, epidemiology and other relevant data.</p> <p><b>References</b></p> <p>Hooper L et al (2001) "Dietary fat intake and prevention of CVD": systematic review. BMJ 322, 757-763  Truswell, A.S. (2005) "Some problems with Cochrane reviews of diet and chronic disease" European Journal of Clinical Nutrition 59, Suppl 1, S150-S154</p>
<p><i>The effect of chain length on lipid and CVD outcomes</i></p>	<p>It would have been very helpful if the report had considered the effect of chain length (of saturated fats) on both lipids and CVD. In the UK there is significant marketing and PR around the consumption of coconut oil and its respective health benefits. No-one is currently challenging this sufficiently despite the lack of good quality research to justify their "health claims". Coconut is rich in Lauric acid and Myristic acids, both of which significantly raise LDL and non-HDL cholesterol.</p> <p>We believe that an opportunity has been lost to raise awareness of this and to defend the common sense approach that coconut oil being 90% saturated fat (70% of which is C12 and C14) is detrimental to lipid levels.</p> <p>Dietitians need the backing of authoritative bodies like SACN to challenge negative media stories, health food stores, celebrity chefs and food manufacturers who are currently promoting the use of coconut and coconut oil in their publications, recipes and food products.</p> <p><b>References</b></p>

	WHO 2016 Systematic Reviews and regression Analysis – effect on lipids and lipoproteins Zong et al BMJ 2016 355:i5796
<i>The effect of the food matrix</i>	<p>In addition there is research indicating a significant difference in the effect of individual saturated fats when present in different food matrixes e.g. milk, butter, cheese, meat (Forouhi 2014) and more clarity on this would have been helpful. This response represents the views of a number of dietitians – working in clinical practice, the charity sector and academia – who believe they have a responsibility to lead the way in talking to people in terms that are both understandable and familiar. In this respect reference to whole foods and ways of eating are much more helpful than referring to individual nutrients such as saturated and unsaturated fatty acids. It is our job to interpret the science into the practical and we feel this report could have gone further in helping us to discriminate between food sources of saturated fat in the diet.</p> <p>This continued focus on individual nutrients rather than foods has been shown to have limited value e.g. comparison of glycaemic load and glycaemic index highlights the need to consider the ameliorating effects of other nutrients, cooking methods and the food matrix.</p> <p><b>Reference</b></p> <p>Forouhi N.G. (2017) “Challenging poor choices” BMJ 357:j1573</p>
<i>Providing guidance to the media on reporting food stories – so that consumers are not misled</i>	<p>HEART UK would welcome an additional section within the report discussing the hierarchy and relative merits of various types of evidence in the context of food and diet.</p> <p>This would be helpful in order to give a lead to the press and food industry. In the current climate confusion reigns, fuelled by the distortion often caused by the media (either innocently or deliberately) in their eagerness to have an interesting slant on health issues. Frequently news stories are driven by food companies with their own agenda’s. These stories, together with their research, are reported as if they are factual (without reference to the totality of research which often suggests otherwise) and the reader is led to believe they represent a definite change in policy rather than a preliminary finding that requires scientific scrutiny and/or further more detailed studies.</p>
<i>Potential bias</i>	We understand and agree with the need to reduce potential bias (Section 2.2, p16) but feel that important insights are overlooked and feel that the expert panel of this long awaited report are ideally placed to challenge the complete reliance on RCT and PCS as the only form of legitimate evidence that should be considered by regulatory, policy making and health agencies.
<i>The full report</i>	Despite the comments above, HEART UK does welcome the publication of this new report, and commends the panel for their diligence in assessing the research, within the confines of the brief. The report will help to inform future UK’s dietary guidelines, government policy, public health campaigns and the future practice of health professionals.

<i>These comments</i>	These comments represent the views of a number of dietitians part of a nutrition steering group organised and convened by Linda Main, Dietetic Adviser at HEART UK-the cholesterol charity. These include Doreen Albin, Senior Dietitian, Manchester University NHS Trust; Helen Stracey, Chief Dietitian Chelsea and Westminster Hospital; Jo Tengroth, Freelance Nutritionist; Catherine Flanagan, Diabetes Dietitian Addenbrooks Hospital; and Fiona Kinnear Research Dietitian, NIHR Bristol Biomedical Research Centre; Tom Butler, Senior Lecturer in Dietetics, University of Chester
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Please add extra rows as needed

<b>Comments by paragraph</b>	<b>Comments</b>
	Please insert each new comment in a new row
<i>Example: 1.2</i>	<i>Example: Missing reference and statement unclear</i>

Please add extra rows as needed