

Authors jenkins and kendall critical thinking

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The main purpose of the research was to compare, in the same subjects, the cholesterol-lowering potential of a dietary portfolio with that of a statin.

Drugs and diet have both been revealed efficient in combating cardiovascular disease risk and mortality. Statins decrease serum cholesterol and are increasingly supported in primary prevention to attain decreases in LDL cholesterol. The evident ineptness of conventional dietary approaches to lessen serum cholesterol by contrast with statins has decreased enthusiasm for diet as a therapeutic alternative. Conversely, newer dietary methods amalgamating foods high in constituents that decrease cholesterol (viscous fibres, soy protein, plant sterols, and nuts) might proffer another alternative. However, these strategies have not been contrasted directly with statins identical individuals.

Thirty-four hyperlipidemic participants underwent all 1-mo treatments in random order as outpatients: a control diet (very-low-saturated-fat diet). A statin diet (control diet with 20 mg lovastatin); a diet high in plant sterols (1.0 g/1000 kcal); soy-protein foods (including soy milks and soy burgers, 21.4 g/1000 kcal); almonds (14 g/1000 kcal); and viscous fibres from oats, barley, psyllium, and the vegetables okra and eggplant (10 g/1000 kcal). (Portfolio diets). Fasting blood samples were collected at intervals that are at 0 week, 2 week, and 4 week.

The results showed that LDL-cholesterol concentrations declined by 8.5%, 33.3%, and 29.6% after the 4 week of the control, statin, and portfolio diets, correspondingly. Even though the absolute disparity between the statin and the portfolio treatments was noteworthy at 4th week, nine participants (26%) attained their least LDL-cholesterol concentrations with

the portfolio diet. Furthermore, the statin ($n = 27$) and the portfolio ($n = 24$) diets did not vary considerably in their capability to decrease LDL cholesterol below the 3.4 mmol/L primary deterrence cut-off.

This study corroborates the efficacy of mixing recently suggested dietary constituents, those suggested by NCEP and American Heart Association, to capitalize on the cholesterol-reduction effect of diet. This method may offer an alternative for decreasing mild to moderate elevations in serum LDL cholesterol in individuals without pre-existing cardiovascular disease. This strategy may also be useful in amalgamation with statins in diminishing the requirement for high doses of drugs to meet target goals, particularly in those with prominent liver and muscle enzyme concentrations. This is particularly important for a food industry in making portfolios that can be mixed with statin favourable for infants in reducing their risks of cardiovascular disease.

Reference: D Jenkins, C Kendall, A Marchie, D Faulkner, J Wong, R de Sottza, A Emam, T Parker, E Vidgen, E Trautwein, K Lapsley, R Josse, L Leiter, W Singer, P Connelly. Direct comparison of a dietary portfolio of cholesterol-lowering foods with a statin in hypercholesterolemic participants. *AJCN* 81(2): 380-387 (February 2005)