

LOWER LDL CHOLESTEROL WITH AUSTRALIAN ALMONDS

AS AN IMPORTANT PART OF A HEALTHY DIET



For Health Professionals

KEY FINDINGS

As a result of diet and lifestyle factors, cardiovascular disease (CVD) remains the leading cause of death in Australia. Excessive dietary saturated fat, elevating blood cholesterol levels impact the health of many. By including almonds in a balanced diet, blood lipids improve, reducing CVD risk.

Studies have revealed a linear dose response to almonds with a 1% reduction in low density lipoprotein cholesterol (LDL-C) resulting from each 7g serve of almonds and with this, a 2% reduction in CVD. From clinical trials, where the diet has been manipulated to accommodate larger serves of almonds (68-84g/day), there is up to a 10% reduction in LDL-C.

Mechanisms that may account for the reductions seen in cohort and clinical intervention studies are likely due to the unique food matrix, including favourable fatty acids, antioxidant effects, fibre, and to a lesser extent, the protein profile, minerals and folate.



ALMONDS & CHOLESTEROL LOWERING

In Australia, saturated fat intake is too high¹. As a consequence, elevated blood cholesterol remains a significant health issue despite the availability of medications and manufactured functional foods aimed at cholesterol lowering. Lowering total cholesterol and the proportion of LDL-C specifically, is an important biochemical change, as decreasing the high density lipoprotein cholesterol (HDL-C) may increase the risk of CVD.

There is scientific consensus supporting a true reduction in CVD risk by targeting the key biomarkers: LDL cholesterol and blood pressure². Almonds have been shown to decrease LDL-C, one of the most critical biomarkers for heart disease and there is early clinical evidence demonstrating that almonds also assist with lowering blood pressure³.

In a review of the four large prospective epidemiological studies⁴⁻⁷, Kelly and Sabate concluded that there was a 37% reduction in CVD risk for those consuming nuts more than four times per week

compared to those who never, or seldom, consume nuts⁸. Overall, there was a reduction in risk of CVD death of 8.3% for each 30g serving of nuts consumed weekly⁸. In clinical trials, larger serves of almonds have achieved up to a 10% reduction in LDL-C⁹ whilst as little as 7g of almonds achieves a 1% reduction in LDL-C¹⁰ and this is supported by others^{11 12}. Importantly, for every 1% reduction in LDL-C there is approximately a 2% reduction in risk of CVD^{13 14}.

The cholesterol reduction associated with almond consumption, has been primarily been attributed to the replacement of saturated fat with MUFA. The addition of MUFA to the diet from almonds also reduces the LDL:HDL cholesterol ratio¹². However, almonds contain a number of positive nutritional features and bioactive substances within the food matrix. The fatty acid and amino acid profile, the Vitamin E antioxidant content, folic acid level, minerals and other phytochemicals contained in almonds work synergistically to reduce CVD risk beyond what can be measured with cholesterol testing alone¹⁵.



ALMONDS: THEIR UNIQUE COMPOSITION

Fat

Whilst almonds are considered high in fat, they have a favourable fatty acid profile. The polyunsaturated to saturated fat ratio is 4 but MUFA predominates, totalling 65% of the total fat, being mostly oleic acid¹⁶. MUFA may have an advantage over polyunsaturated fatty acids because enrichment of lipoprotein lipids with MUFA increases their resistance to oxidation¹⁷.

Vitamin E

Almonds contain a significant amount of alpha tocopherol (28mg/100g), a recognised antioxidant with the potential to reduce the amount of LDL particles that are oxidised by free radicals¹⁶. Oxidised LDL may adhere to the endothelial wall and is responsible for the progression of atherosclerosis. The amount of Vitamin E in almonds is higher than other nuts¹⁸ and may potentially contribute to the reduced risk of atherosclerosis development¹⁹. Studies have also documented elevated levels of Vitamin E and increased total plasma antioxidant capacity following consumption of just one handful of almonds^{19 20}.



Phytosterols

Almonds contain 115-199mg/100g of phytosterols: b-sitosterol, campesterol and stigmasterol^{21 22}. It is known that phytosterols and in particular, sitosterol – the most abundant plant sterol in almonds - interfere with cholesterol absorption and lower blood LDL cholesterol concentrations²³. There have been some suggestions that phytosterols work best when in a fat matrix, as is the case with almonds.

Fibre

Almonds contain between 8.8g - 10.4g/100g of fibre^{16 22}.

They contain soluble fibre but a larger proportion is insoluble fibre, also linked with CVD protection. For those consuming whole almonds as a snack, the fibrous coat may play a role in nutrient release, satiety and possibly also weight control²⁴⁻²⁷. Current recommendations are to increase dietary fibre and as nuts rank after cereals in their fibre content, they make a valuable contribution to the diet¹.

UNDERSTANDING THE MECHANISM & THE DOSE

Almonds are high in the monounsaturated fatty acid, oleic acid, which demonstrates some similarities to omega-3 fatty acids in its ability to down regulate pro-inflammatory cytokines and reduce cellular adhesion particularly in endothelial dysfunction and atherosclerosis¹⁷. Furthermore, studies consistently show that saturated fatty acids impair endothelial function and the administration of the nutrients present in nuts like almonds, counteract these effects¹⁷. In studies using almonds, researchers have established that their effect on cholesterol lowering and, on disease reduction, is influenced by more than just the fatty acid profile, emphasising the importance of all nutrient components, fibre and other bioactives²⁸.



30 GRAMS OF ALMONDS HAVE BEEN SHOWN TO LOWER LDL CHOLESTEROL.

This quantity represents 'a healthy handful' and is approximately 25 almonds which provides about 750kJ.

This amount of almonds has been shown to displace other snack foods in the diet, improving satiety and nutritional intake^{27 29}. To date, studies of free-living individuals from cohort and short term intervention studies^{9-12 30}, do not indicate that body mass index or weight gain is a concern with more than double the amount of almonds suggested here^{31 32}.

For further information go to www.australialmonds.com.au

REFERENCES

1. NHMRC. Nutrient Reference Values for Australia and New Zealand. In: The Australian Government, editor. Canberra, 2006.
2. Mensink RP, Aro A, Den Hond E, German JB, Griffin BA, ten Meer HU, et al. PASSCLAIM - Diet-related Cardiovascular Disease. *European Journal of Clinical Nutrition* 2003;42:6-27.
3. Jenkins DJA, Kendall CWC, Faulkner DA, Kemp T, Marchie A, Nguyen TH, et al. Long-term effects of a plant-based dietary portfolio of cholesterol-lowering foods on blood pressure. *European Journal of Clinical Nutrition* 2008;62:781-788.
4. Fraser GE, Sabatè J, Beeson WL, Strahan TM. A possible protective effect of nut consumption on risk of coronary heart disease. *Archives of Internal Medicine* 1992;152:1416-1424.
5. Kushi LH, Folsom AR, Prineas RJ, Mink PJ, Wu Y, Bostick RM. Dietary antioxidant vitamins and death from coronary heart disease in postmenopausal women. *New England Journal of Medicine* 1996;334:1156-1162.
6. Hu FB, Stampfer MJ, Manson JE, Rimm EB, Colditz GA, Rosner BA, et al. Frequent nut consumption and risk of coronary heart disease in women: prospective cohort study. *British Medical Journal* 1998;317:1341-1345.
7. Albert CM, Gaziano JM, Willett WC, Manson JE. Nut consumption and decreased risk of sudden cardiac death in the Physicians' Health Study. *Archives of Internal Medicine* 2002;162:1382-1387.
8. Kelly JH, Sabatè J. Nuts and Coronary Heart Disease: an epidemiological perspective. *British Journal of Nutrition* 2006;96(Suppl 2):S61-S67.
9. Abbey M, Noakes M, Belling G, Nestel P. Partial replacement of saturated fatty acids with almonds or walnuts lowers total plasma cholesterol and low-density-lipoprotein cholesterol. *American Journal of Clinical Nutrition* 1994;59:995-999.
10. Jenkins D, Kendall C, Marchie A, Parker T, Connelly P, Qian W, et al. Dose response of Almonds on Coronary Heart Disease Risk Factors: Blood Lipids, Oxidised Low-Density Lipoproteins, Lipoprotein (a), Homocysteine, and Pulmonary Nitric Oxide: A Randomised, Controlled, Crossover trial. *Circulation* 2002;106:1327-1332.
11. Spiller G, Jenkins D, Cragen L, et al. Effect of a diet high in monounsaturated fat from almonds on plasma cholesterol and lipoproteins. *American Journal of Clinical Nutrition* 1992;11:126-130.
12. Spiller G, Jenkins D, Bosello O, et al. Nuts and plasma lipids: an almond-based diet lowers LDL-C while preserving HDL-C. *Journal of the American College of Nutrition* 1998;17:285-290.
13. The Lipid Research Clinics Coronary Primary Prevention Trial results I: Reduction in incidence of coronary heart disease. *Journal of the American Medical Association* 1984;251:351-364.
14. Levine GN, Keaney JF Jr, Vita JA. Cholesterol reduction in cardiovascular disease. Clinical benefits and possible mechanisms. *New England Journal of Medicine* 1995;332:512-521.
15. Torabian S, Haddad E, Rajaram S, Banta J, Sabatè J. Acute effect of nut consumption on plasma total polyphenols, antioxidant capacity and lipid peroxidation. *The Journal of Human Nutrition and Dietetics* 2009;22:64-71.
16. Food Standards Australia New Zealand. NUTTAB 2006 Online version, 2007.
17. Ros E, Mataix J. Fatty acid composition of nuts - implications for cardiovascular health. *British Journal of Nutrition* 2006;96(Suppl 2):S29-S35.
18. Griel AE, Kris-Etherton PM. Tree nuts and the lipid profile: a review of clinical studies. *British Journal of Nutrition* 2006;96(Suppl 2):S68-S78.
19. Spiller G, Miller A, Olivera K, Reynolds J, Miller B, Morse S, et al. Effects of plant-based diets high in raw or roasted almonds, or roasted almond butter on serum lipoproteins in humans. *Journal of the American College of Nutrition* 2003;22(3):195-200.
20. Jambazian PR, Haddad E, Rajaram S, Tanzman J, Sabatè J. Almonds in the diet simultaneously improve plasma alpha-tocopherol concentrations and reduce plasma lipids. *Journal of the American Dietetic Association* 2005;105(3):449-54.
21. Phillips KM, Ruggio DM, Ashraf-Khorassani M. Phytosterol Composition of Nuts and Seeds Commonly Consumed in the United States. *Journal of Agricultural and Food Chemistry* 2005;53(24):9436-9445.
22. United States Department of Agriculture. USDA National Nutrient Database for Standard Reference: release 20, 2007.
23. Segura R, Javierre C, Antonia Lizarraga M, Ros E. Other relevant components of nuts: phytosterols, folate and minerals. *British Journal of Nutrition* 2006;96(Suppl 2):S36-S44.
24. Mandalari G R, Faulks RM, Rich GT, Turco VL, Picout DR, Lo Curto RB, et al. Release of Protein, Lipid, and Vitamin E from Almond Seeds during Digestion. *Journal of Agricultural and Food Chemistry* 2008;56:3409-3416.
25. Hollis J, Mattes R. Effect of chronic consumption of almonds on body weight in healthy humans. *British Journal of Nutrition* 2007;98(3):651-6.
26. Lovejoy J, Most M, Lefevre M, Greenway F, Rood J. Effect of diets enriched in almonds on insulin action and serum lipids in adults with normal glucose tolerance or type 2 diabetes. *American Journal of Clinical Nutrition* 2002;76:1000-1006.
27. Fraser GE, Bennett HW, Jaceldo KB, Sabatè J. Effect on Body Weight of a Free 76 Kilojoule (320 Calorie) Daily Supplement of Almonds for Six Months. *Journal of the American College of Nutrition* 2002;21(3):275-283.
28. Salas-Salvado J, Bullo M, EPerez-Heras A, E R. Dietary Fibre, nuts and Cardiovascular disease. *British Journal of Nutrition* 2006;96(Suppl 2):S45-S51.
29. Jaceldo-Siegl K, Sabate J, Rajaram S, Fraser GE. Long-term almond supplementation without advice on food replacement induces favourable nutrient modifications to the habitual diets of free-living individuals. *British Journal of Nutrition* 2004;92(3):533-40.
30. Hyson D, Schneeman B, Davis P. Almonds and Almond Oil have similar effects on Plasma Lipids and LDL Oxidation in healthy Men and Women. *Journal of Nutrition* 2002;132:703-707.
31. Brufau G, Boatella J, Rafecas M. Nuts: source of energy and macronutrients. *British Journal of Nutrition* 2006;96(Suppl. 2):S24-S28.
32. Rajaram S, Sabatè J. Nuts, body weight and insulin resistance. *British Journal of Nutrition* 2006;96(Suppl 2):S79-S86.

