

Healthy Metabolism: Why Moderate Amounts of Healthy Carbohydrates and Fats Trump “Low Fat”

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What do we want from our metabolism?

- **Help in maintaining a healthy weight**
- **Healthy lipids:**
 - **low cholesterol (LDL),**
 - **high HDL**
 - **low triglycerides (blood fat)**
- **Normal blood sugar**

How can we maintain a healthy weight?

Don't eat more calories than we burn !!

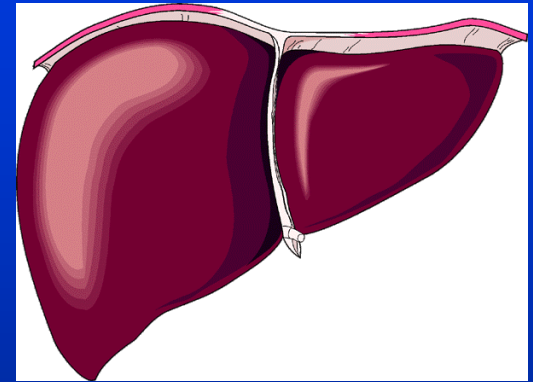
What do we burn?

- Under resting conditions, we burn about equal amounts of fat and carbohydrate, and less protein
- Shorter, more intense exercise: more carb
- Sustained exercise: more fat - greater impact on weight

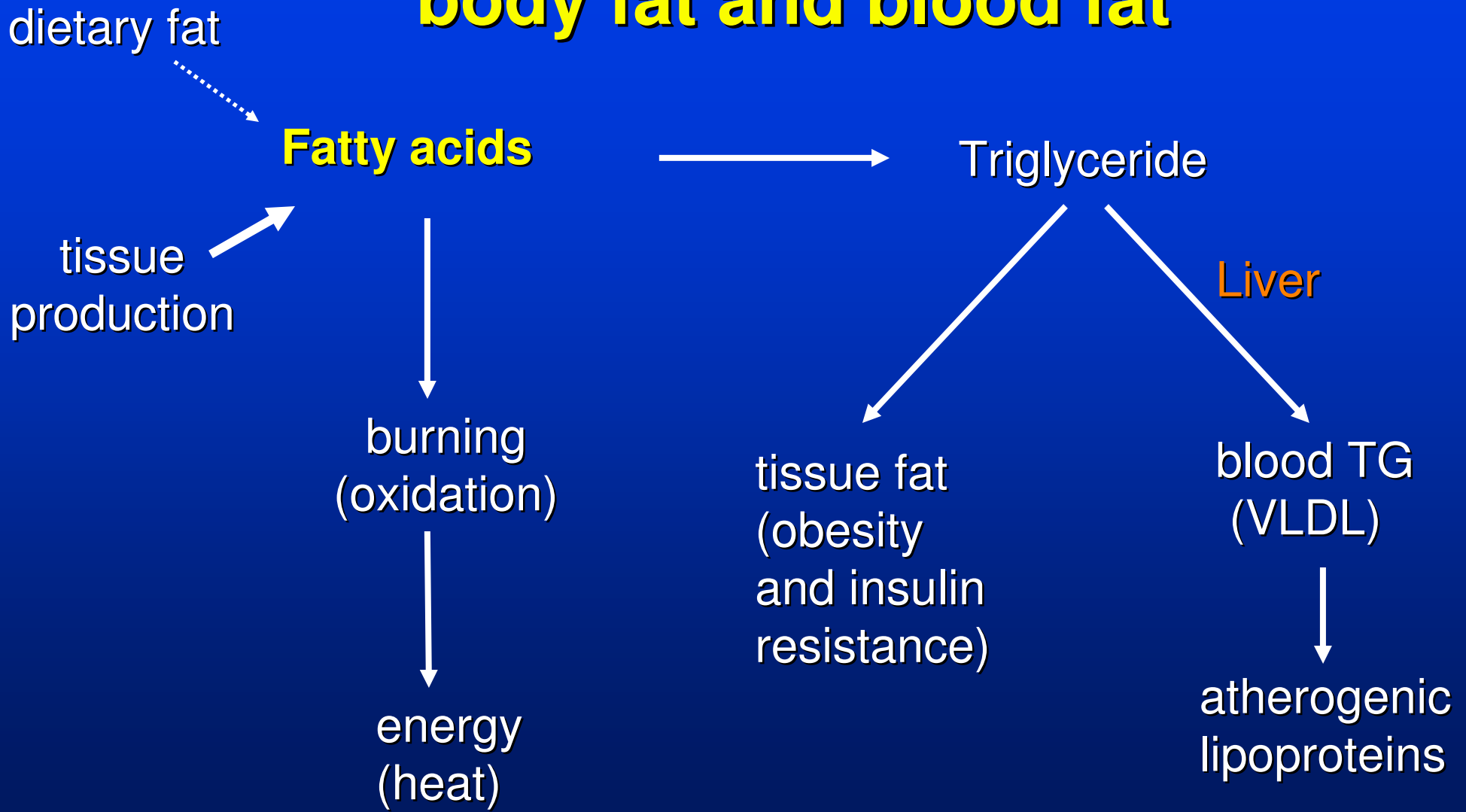
Can diet promote metabolic fitness and help burn more fat?

Diet and “Metabolic Fitness”: Fat and Sugar Metabolism 101

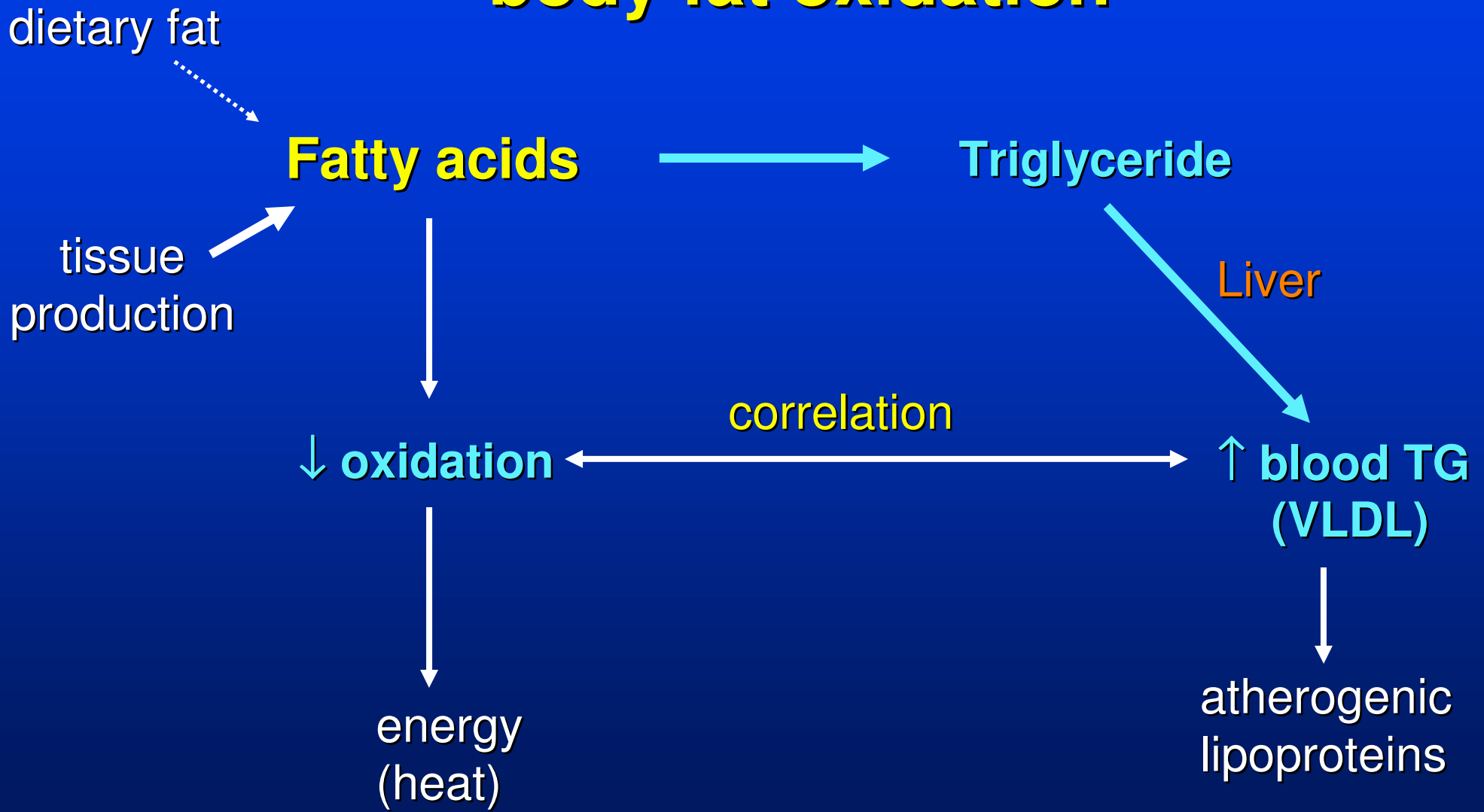
- Most fat is made in the liver
- Excess fat can be
 - burned,
 - released into the blood (high triglyceride),
 - or stored (--> fatty liver)



Fatty acids are a key link between body fat and blood fat



Higher blood fat is linked to lower body fat oxidation



Dietary carbohydrate reduces fatty acid oxidation: higher blood fat and body fat

dietary fat

Fatty acids



↑ Triglyceride

tissue production



oxidation



energy
(heat)

Liver



↑ tissue fat
(obesity
and insulin
resistance)

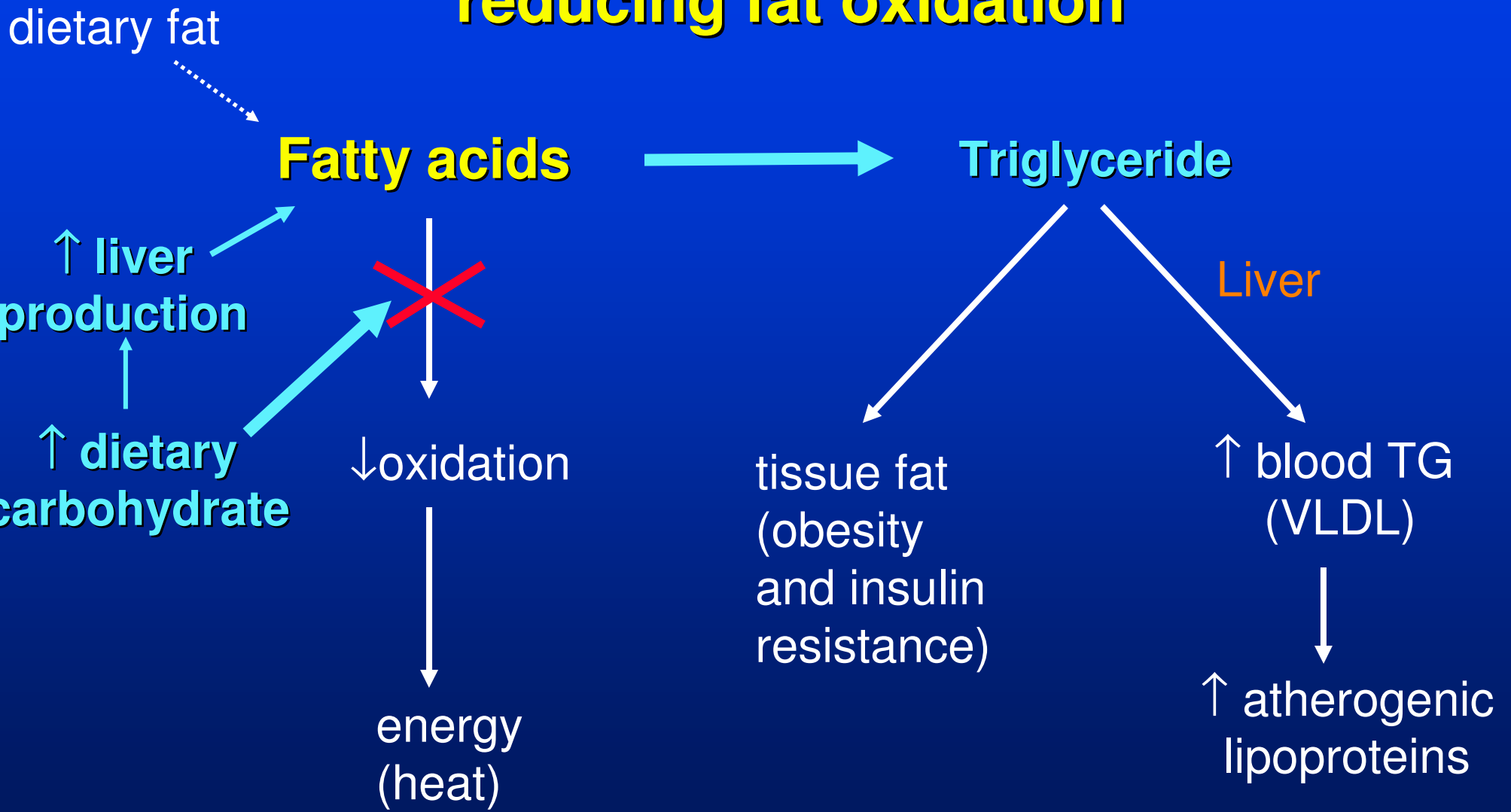


↑ blood TG
(VLDL)



↑ atherogenic
lipoproteins

Increased carbohydrate intake increases liver fat synthesis, and has an even greater effect in reducing fat oxidation

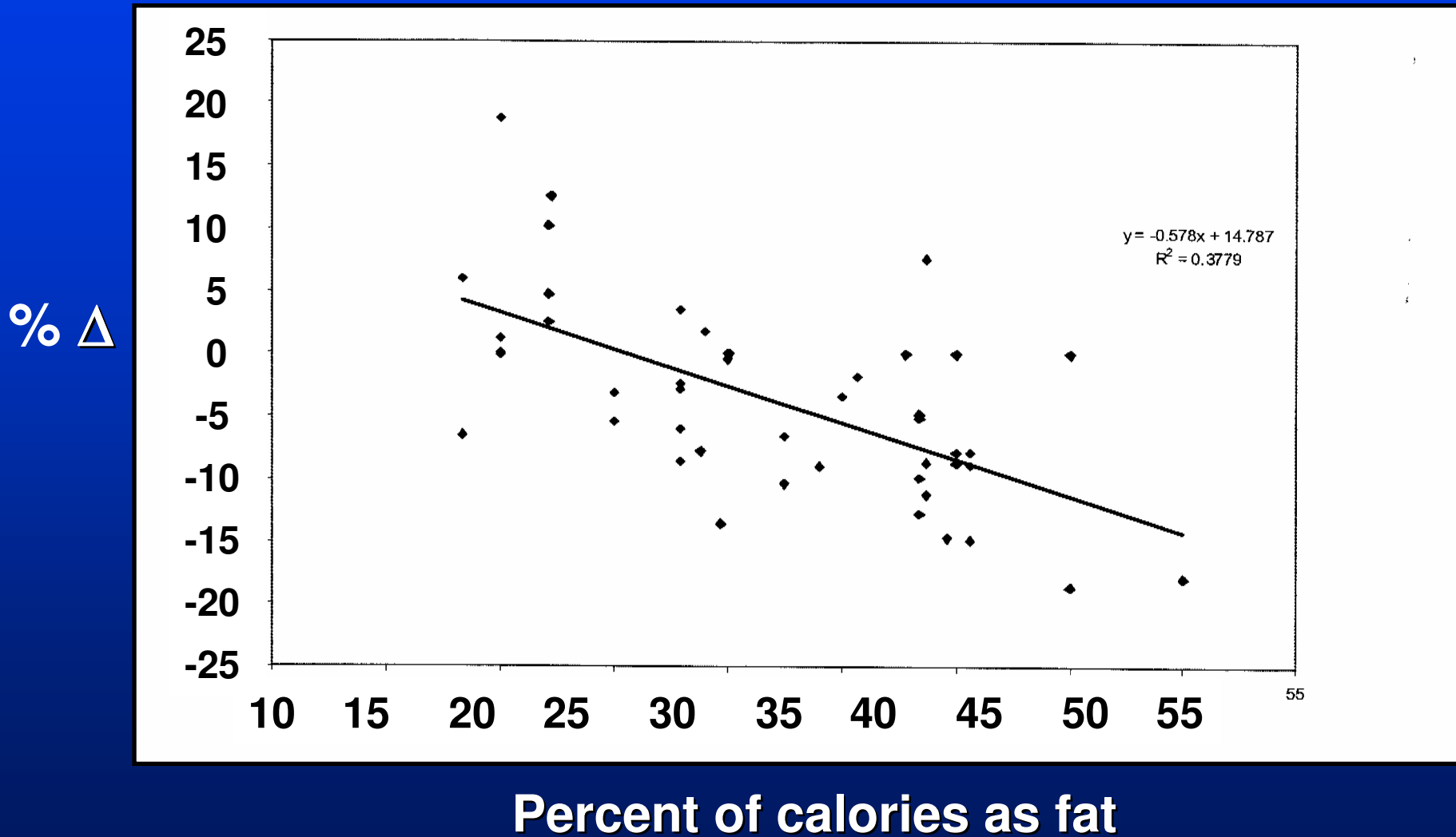


Schwarz et al, J Clin Invest 36:2735, 1995

What do we want from our metabolism?

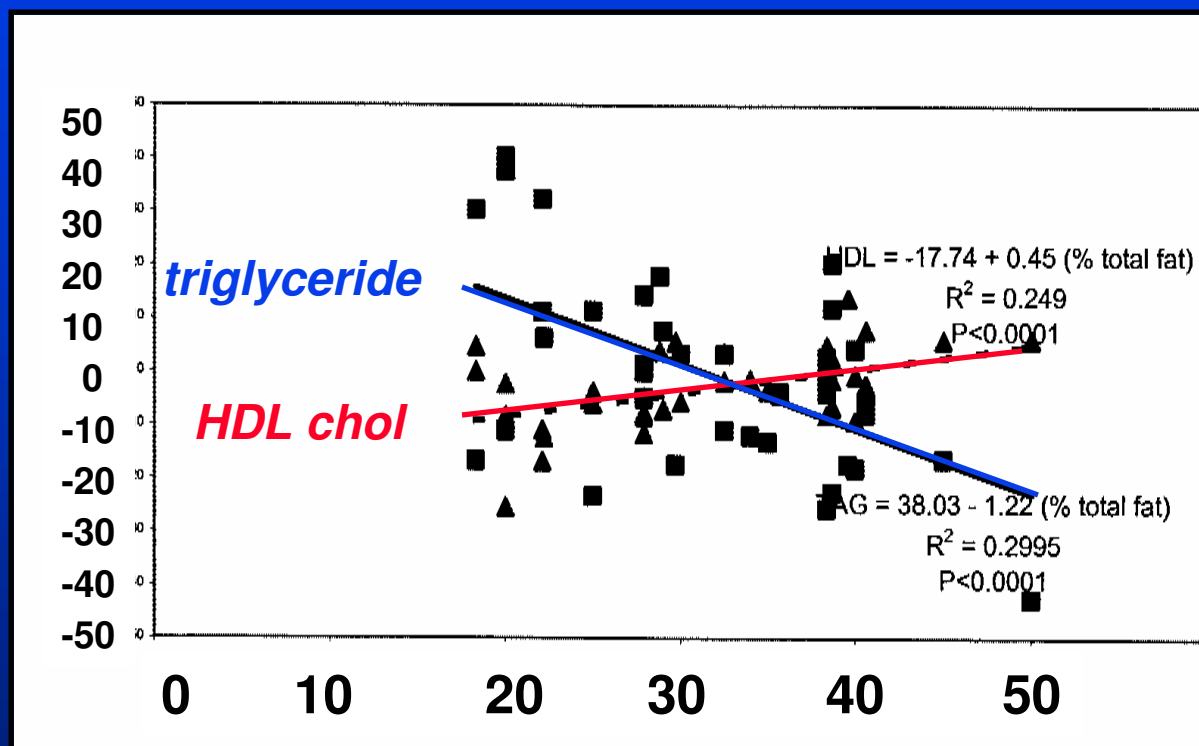
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Higher dietary total fat (lower carb) reduces ratio of total cholesterol/HDL cholesterol



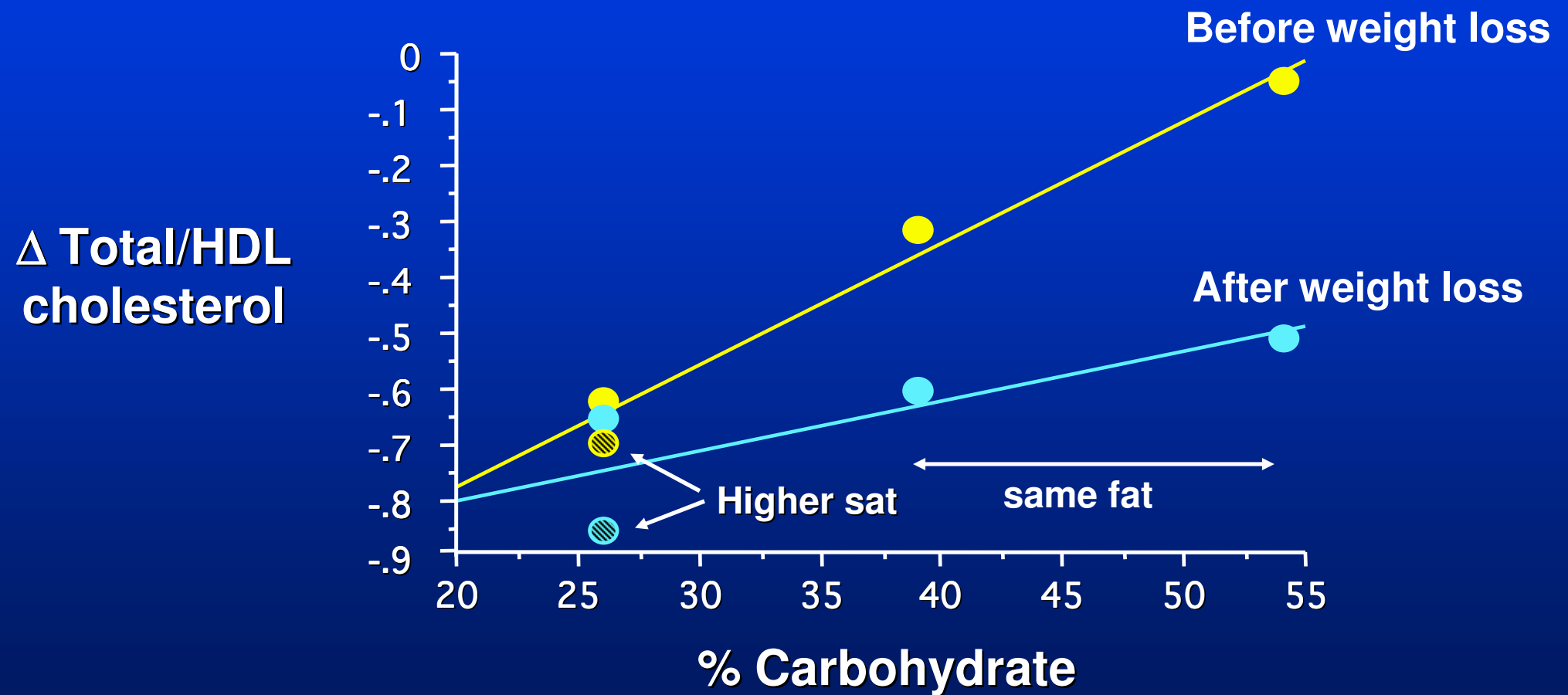
Higher dietary total fat (lower carbohydrate) lowers blood triglyceride and raises HDL

% Δ



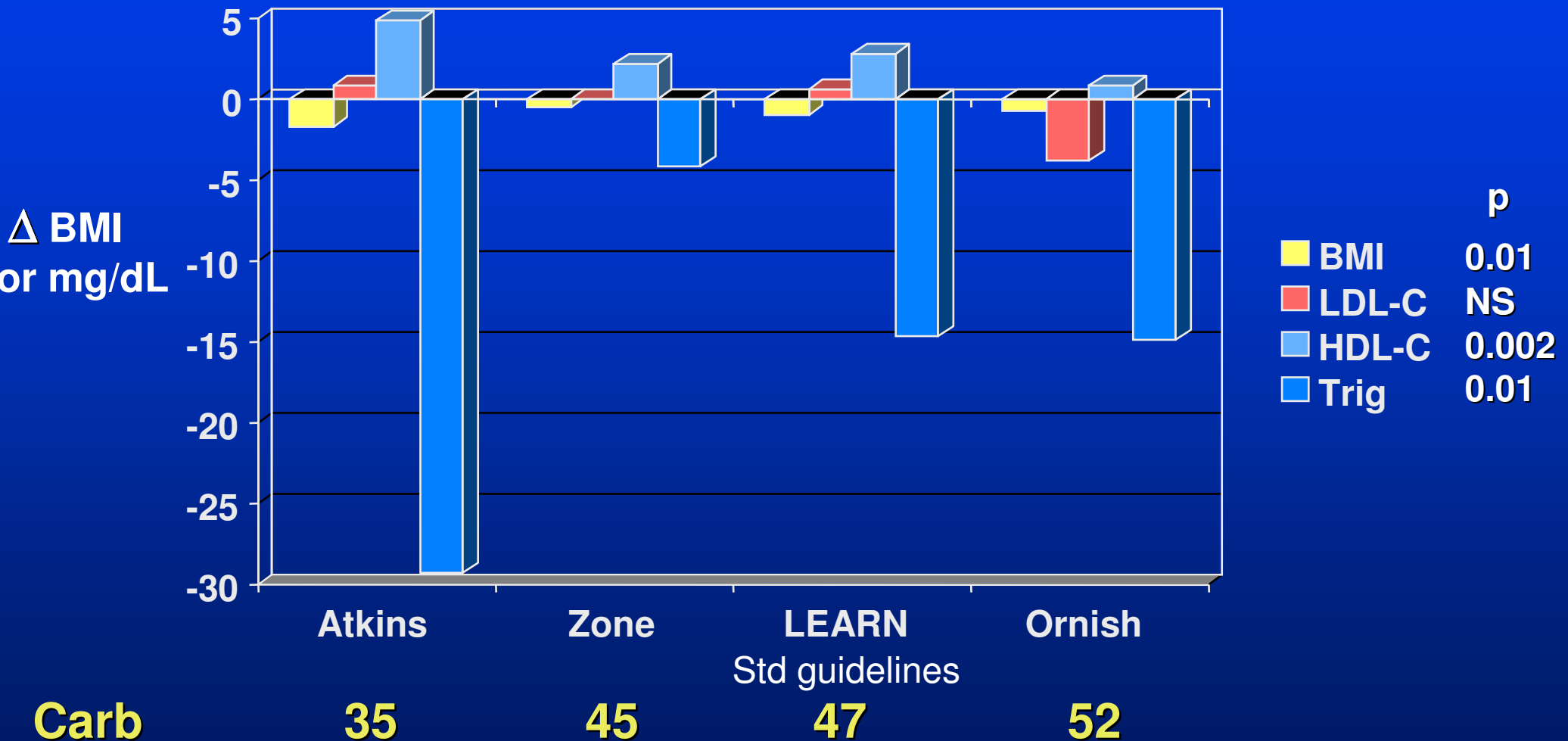
Percent of calories as fat

Changes in Total/HDL Cholesterol with Carbohydrate Reduction and Weight Loss



What are weight and metabolic effects of moderating carbohydrate intake in longer term trials?

Weight loss and lipid effects of 4 diets at 12 mos



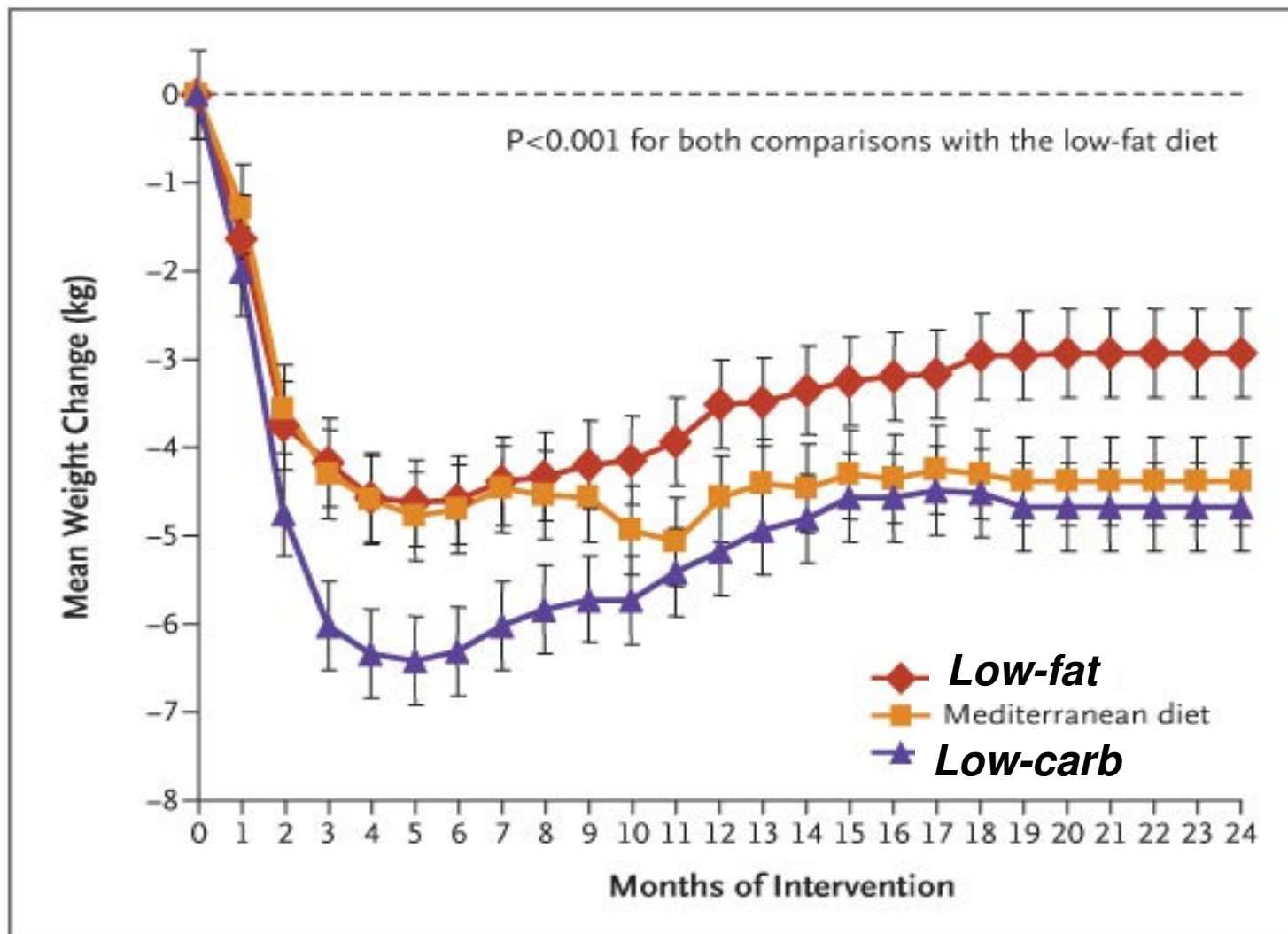
Gardner et al., JAMA 297:969, 2007

Comparison of three diets over two years in 322 obese individuals

- **Low-fat, calorie restricted:** 51% carb, 31% fat
- **“Mediterranean”, calorie restricted:** 50% carb, 33% fat
- **Moderate carb, no calorie restriction:** 40% carb, 39% fat

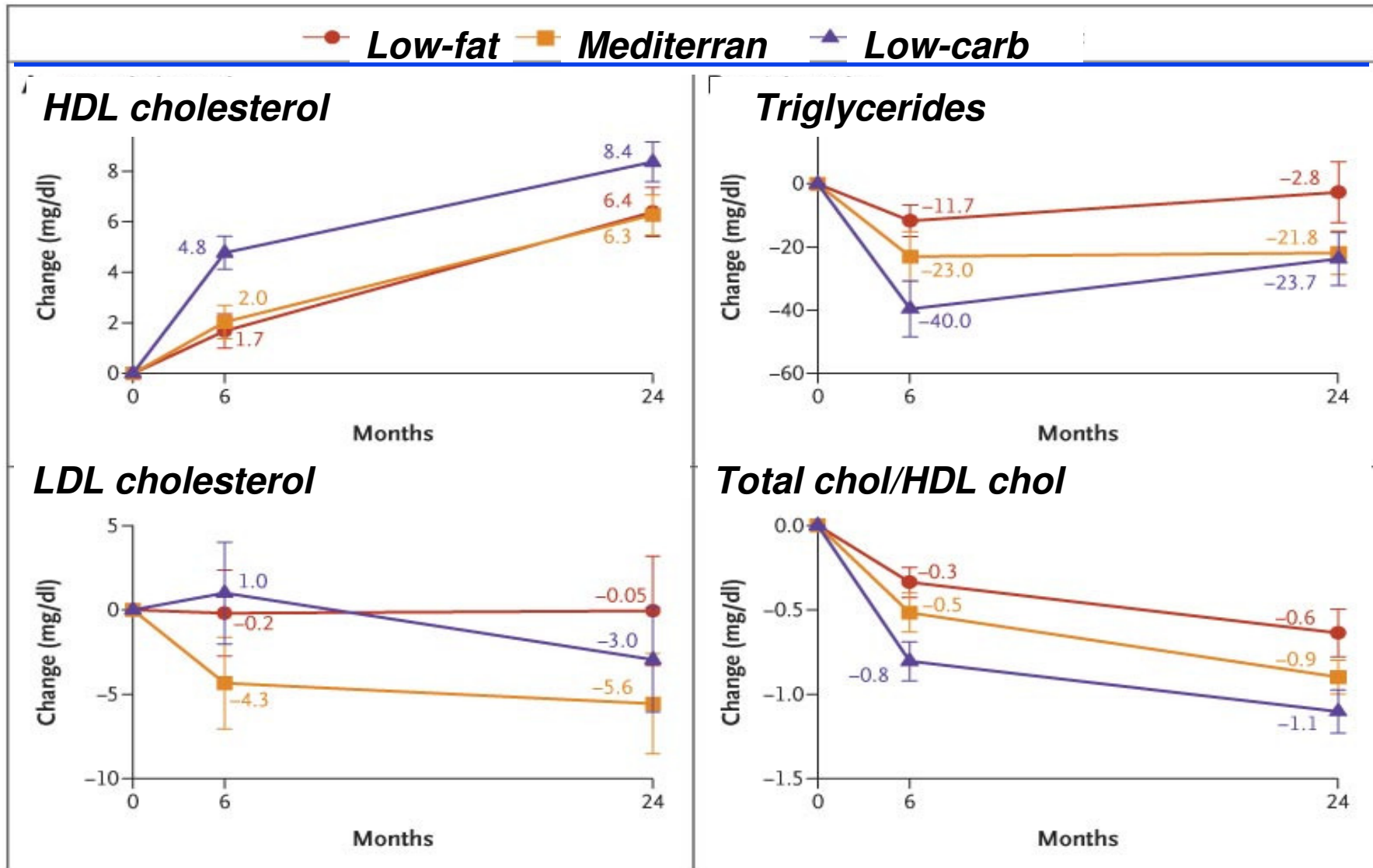
- **Calorie reduction similar on all diets (~370 to 570 per day)**
- **Saturated fat: 12.3% on lo-carb, 9.6% on others**
- **Dietary fiber: ↓10 g/d in low-carb; less change in others**
- **Maximum weight loss in 1st six months, maintenance after**

Weight Changes During 2 Years



Shai I et al. *N Engl J Med* 359:229, 2008

Changes in Lipids



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Relation of tissue fat to insulin resistance

- Insulin reduces sugar production by liver and increases sugar uptake in other tissues**
- Excess liver, abdominal, and muscle fat can lead to insulin resistance**
- Insulin resistance leads to higher sugar production and predisposes to diabetes**

Dietary carbohydrate: is fructose a particular culprit for making fat?

- **A recent discovery shows that liver fat synthesis and blood triglyceride and cholesterol levels are strongly controlled by a genetic pathway activated by fructose**

Lee et al., Science 320:1492, 2008

Conclusions

- **Moderately low carbohydrate intake, with substitution of fat and/or protein, can improve “metabolic fitness”, including weight management, lipid predictors of cardiovascular disease, and risk for type 2 diabetes.**
- **Effects vary with type of carbohydrate:**
 - **sugar (fructose) is of special concern**
 - **foods with high fiber and slowly digested starches have lesser impact and add nutritional value.**