

FAT CHANCE

The fat has long been sucked out of our food in the name of health. RANI SHEEN weighs the newest thinking on a dietary demon.

PHOTOGRAPHY BY NATASHA V.

Flavor

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IMAGINE A WORLD WHERE YOU GOT TO THE FRONT OF the coffee shop line and didn't feel compelled to say the word "skinny" before the word "latte." Or where, facing down the legions of yogurt options at the grocery store, your hand bypassed the zero per cent Greek yogurt, landing instead on the full-fat version. The idea that fat is bad for us has become so all-pervasive that it is now fixed firmly in our minds that full-fat dairy, bacon or even a hefty serving of avocado are flabby demons waiting to send chub to our waists and clog our arteries. But a growing school of thought is suggesting that actually, it isn't fat that makes us fat.

The low-fat movement took off in the early 1980s, largely

informed by the "Seven Countries" study begun in 1958 and published in 1980 by physiologist Dr. Ancel Keys (who popularized the Mediterranean diet and BMI as an indicator of body fat). It showed a strong link between dietary fat and heart disease, though Keys has since been accused of disregarding countries that didn't fit the hypothesis, plus he only studied men. Other research followed, and in 1984 the National Institutes of Health recommended all Americans over the age of two reduce their dietary consumption of fat from 40 to 30 per cent of their total calories. Canada followed suit. This ushered in the era of margarine, skim milk and boneless, skinless chicken breasts. »

In the decades since, the Western world has seen a well-documented rise in chronic illnesses. “We’ve done it. [We reduced our fat consumption] from 40 per cent to 30 per cent and look what’s happened to obesity, metabolic syndrome, non-alcoholic fatty liver disease, cardiovascular disease and stroke prevalence,” said childhood obesity expert Dr. Robert Lustig in a 2009 presentation “Sugar: The Bitter Truth,” which has nearly three million views on YouTube. “They’ve all jacked way up as our total fat consumption as a per cent has gone down. It ain’t the fat, people.” So what is it? According to Lustig, professor of pediatrics in the division of endocrinology at University of California, San Francisco, it’s sugar. This line of thinking is niche, but it isn’t new: in his seminal 2002 *New York Times* rant “What if It’s All Been a Big Fat Lie?” science writer Gary Taubes looked at the success of high-fat, low-carb diets like Atkins and Zone, and the “alternative hypothesis” that it’s the carbohydrates that replaced the fat in the rejigged North American diet that causes obesity and shortens our lives.

for *Canadians: The Definitive Guide*, “Since saturated fat can raise LDL cholesterol, reducing your intake is an important step in lowering your risk of heart disease and stroke.” This is a hot-button topic, since heart disease is the number one killer of men and women in Canada (incidentally, February is Heart Month). Saturated fat is a many-headed beast, encompassing “bad” long-chain saturated fatty acids (found in red meat and hydrogenated oils), “good” medium-chain ones (in coconut oil and palm oil) and “very good” short-chain ones (also in coconut oil, and butter). “We know short- and medium-chain saturated fats are usually sent directly to the liver and burned for energy,” says Karst. “They’re not even stored in the body as fat.” In 2010, analysis of 21 studies encompassing more than 347,000 people concluded there was “no significant evidence” that dietary saturated fat is associated with an increased risk of coronary heart disease or cardiovascular disease. In the new book *The Great Cholesterol Myth*, co-author and cardiologist Dr. Stephen Sinatra writes: “I’ve come to believe that cholesterol is a minor player in the development

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By now, most of us are aware that all fat is not created equal. “If you don’t have any fat, or you have the improper kind, like from hydrogenated oil, unhealthy cooking oils or a lot of processed food, that’s what your cell membrane structure becomes built from,” says B.C. registered dietitian Karlene Karst, author of the new book *The Full-Fat Solution*. “Long term, you can see this in the form of dry skin, brittle hair and nails, lack of energy, heart health issues, weight issues and inflammation.”

Monounsaturated fats (found in olive oil) and polyunsaturated fats in the form of omega-3 fatty acids (salmon, mackerel and tuna) have been praised for their beneficial effects on the brain and heart. Omega-3s have been shown to increase satiety, thereby controlling appetite, and reduce inflammation, a factor in weight gain and many diseases. (The Western diet, rich in soy, corn and canola oils, furnishes us with more omega-6 than omega-3. Karst says the typical ratio is 20:1; it should be closer to 4:1.) And fat helps the body use nutrients: one study showed that oily salad dressing boosted absorption of the carotenoids in the vegetables. “People should include a small amount of unsaturated fat as part of the healthy eating pattern that includes mostly lower fat foods,” says Sara O’Dacre, spokesperson for Health Canada. “Consuming a larger amount of fat is not recommended, as it tends to increase the total calories in the diet.”

Trans fats made by heating vegetable oils have been widely condemned for their artery-clogging ways—look for the words “hydrogenated” or “partially hydrogenated” on labels. More controversially, some are questioning whether saturated fats—uniformly discouraged by Canada’s Food Guide and most dietitians—are as harmful as they’re understood to be. Cardiologist Dr. Beth Abramson, spokesperson for the Heart and Stroke Foundation of Canada, writes in her new book *Heart Health*

of heart disease.” He says inflammation is a far greater risk factor and that lowering cholesterol has a limited benefit unless you’re a middle-aged man with a history of heart disease.

If you decide to add certain fats to your diet, you’ll need to take something else out. “It’s not a free-for-all,” says Karst, who suggests using a tablespoon of coconut oil to cook with instead of canola oil. “With the Atkins diet, people were consuming massive amounts of cheddar cheese and bacon, and that’s not good for you. That’s not what we’re talking about here. We’re talking whole food: nuts, seeds, full-fat yogurt, fish and green, leafy vegetables.” The other thing to consider reducing is sugar, in all its forms. When the supermarket shelves were flooded with reduced-fat products in the 1980s, food scientists were faced with a challenge: how to make products palatable without the satisfying creaminess of fat. In many cases, the answer was sugar, or high-fructose corn syrup, which is metabolized into fat that the body stores.

The guilt associated with choosing fat-rich foods rather than ones anointed “low-fat” or “low-calorie” is a big mental hurdle. Fat contains nine calories per gram whereas carbohydrate and protein have four each. A breakfast of bacon and eggs is higher in fat and calories than, say, a honey oat bar sold by a prominent weight-loss brand (though at 20 grams of sugar, the bar is hardly a healthier option). But the simple math of “calories in, calories out” doesn’t address the way different nutrients go to work in your body. “The whole caloric concept is very passé,” Karst says. Instead, she emphasizes portion awareness and making sure every meal includes protein, fat and fibre (as opposed to carbohydrate, so vegetables and whole grains qualify where white bread doesn’t). This way, she says, you’ll feel satiated long before you overeat. “If you’re eating the right foods in the day, real food, the body knows what to do with those nutrients.” □