



Fat

Position Statement

Implications for public health

Dietary fat is a source of energy. It provides the building blocks of cell membranes, helps absorb certain vitamins and is the source of essential fatty acids and other by-products important for growth, tissue repair and many other functions in the body. However, over-consumption of fat, or an imbalance in the types of fat consumed, can have adverse effects on health.

Effects on health

Fats of all types contain more than twice as many calories (9kcal/g) as proteins or carbohydrates (4kcal/g). Eating too much fatty food greatly increases the likelihood of overweight and obesity, putting up the risk of hypertension (high blood pressure), type 2 diabetes and a range of other disorders.¹

Excessive intake of **saturated fats** can raise LDL-cholesterol levels, increasing the risk of cardiovascular diseases such as coronary heart disease (CHD) and stroke (see *Note* below).²

Trans fats also raise LDL-cholesterol but lower HDL-cholesterol ('good' cholesterol). Evidence suggests they pose a greater risk to cardiovascular health than saturated fats.³ They have no known nutritional benefits, and are used for deep-frying fast foods and increasing shelf-life for pastries, cakes and biscuits.

By contrast, **polyunsaturated fats** provide essential omega 6 and omega 3 fatty acids. A diet high in omega 6 (eg. in cereals, soya, nuts and seeds) is linked to a lower level of LDL-cholesterol and has been shown to be associated with a lower risk of CHD.^{4,5,6} Omega 3, especially from oily fish, also has important health benefits including aiding cardiovascular health and the development of the central nervous system.^{7,8}

Monounsaturated fats (eg. from avocados, olive and rapeseed oil) also reduce risk of CHD, mainly by replacing saturated fats in the diet.²

Recommended intakes

Fats should provide no more than 35% of an individual's food energy intake (ie. excluding alcohol)⁹ – predominantly from poly- and monounsaturated fats. Saturated fats should be limited to no more than 11% of food energy intake.⁹ Current average intake of saturated fats is 13.4% for adults¹⁰ and 14.3% for children.¹¹ WHO recommends reducing trans fats to less than 1% of food energy intake, and ultimately phasing them out altogether.¹²

Types of fats

Saturated – mainly from animal sources (eg. dairy, meat), also some plant oils (eg. palm, coconut).

Unsaturated – usually oils. Divided into *monounsaturated fats* (mainly from plant sources eg. olive, rape) and *polyunsaturated fats* (mainly from plant or fish sources, eg. sunflower, fish).

Trans – semi-solid, mostly created artificially by partial hydrogenation of unsaturated fats (eg. hydrogenated vegetable oil). Some occur naturally.

***Note:** Saturated and trans fats, through their powerful effect on blood cholesterol, comprise the most important risk factor for cardiovascular disease. However, cholesterol levels should also be viewed in the context of the overall risk profile which includes other major factors such as smoking, blood pressure, obesity, physical activity, and diabetes.

Fat and inequalities

Foods high in saturated fat (eg. dairy, meat) and trans fat (eg. blended vegetable oil, hard margarines) are relatively cheap, allowing the food industry to use large amounts to deep-fry, add bulk or improve texture, whilst keeping prices low. People on lower incomes tend to choose lower-priced, less healthy options.

What needs to happen

Concerted action to lobby and advocate for:

- increased public awareness of the need to reduce saturated and trans fat intake, and replace with poly- and monounsaturated fats;
- adoption of a single, simple food labelling scheme (such as the 'Traffic Light' scheme recommended by the Food Standards Agency) by all food manufacturers and supermarkets, clearly stating levels of saturated and trans fats;

- further pressure on the food industry, with threat of legislation, to reformulate its products to use less saturated fat and eliminate trans fat, and to offer a wider range of reduced-fat alternatives;
- revision of the EU Common Agricultural Policy to reduce subsidies for beef and dairy production, and increase support for production of sunflower, maize, rape and other unsaturated oils, and fruit and vegetables;
- improved standards, training and quality control in the catering industry on choosing ingredients and cooking methods to reduce saturated and eliminate trans fat in meals;
- reduced saturated and trans fat in food provided in schools eg. through nutritional standards for schools;

- more effective restrictions on advertising high-fat snacks to children;
- continued promotion of the 5-A-DAY message and improved access to good quality, affordable, fresh fruit and vegetables as a substitute for fatty foods.

How to push for change

- Bring together stakeholders to share evidence, expertise, resources and examples of good practice.
- Use local media to advocate for healthier eating/shopping/catering.
- Meet with local food suppliers/procurers/caterers (for schools, hospitals, care homes etc) to discuss ways of reducing saturated/trans fat levels.
- Lobby key stakeholders (see *Who to lobby* list).

What is the Faculty doing about fat?

The Faculty works in partnership with organisations such as National Heart Forum (NHF) and Heart of Mersey to promote healthy lifestyles and prevent CHD, stroke and related disorders. It has produced, jointly with NHF, practical guidance ('toolkits' – see below) on tackling overweight and obesity, reducing the impact of food poverty, and promoting physical activity.

The **Faculty of Public Health** is an authoritative public health body which aims to advance the health of the population through three key areas of work: health improvement, service improvement, and health protection. It maintains professional and educational standards, and advocates on key public health issues, including providing practical information and guidance for public health professionals.

Heart of Mersey is a CHD prevention charity primarily funded by Greater Merseyside's primary care trusts and six local authorities. HoM aims, through advocacy, campaigns, information and research, to co-ordinate a strategic approach to preventing high rates of heart disease and associated inequalities in Greater Merseyside.

Fat is an issue that is being tackled differently by the four UK countries. This statement sets out a position which members can draw on to help achieve the greatest impact in their local situation.

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Publications

Lightening the Load: tackling overweight and obesity

Let's Get Moving: a physical activity handbook

Nutrition and Food Poverty Toolkit

From www.fph.org.uk

Good fats: bad fats

From www.heartofmersey.org.uk



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