blind c.c. A. Keys, J. Stamler, J. Doyle, I. Frantz, W. Harlan

January 16, 1971

Dr. Campbell Moses, Medical Director American Heart Association 44 East 23rd Street New York, New York 10010

Dear Cam:

I'm sure you caught enough flak in November from the Dayton-Pierce report. But many have been concerned for years about the AHA diet emphasis on adding or replacing most fats with polyunsaturates rather than reducing saturates and making use of "natural diets" as reasonable recommendations. Ancel Keys has especially pointed out that no country we have explored has a habitual diet with over 10% of calories from polyunsaturates, and the frequency of CHD is not related at all to polyunsaturate intake. The AHA 2:1 diet is contrived, "abnormal," and exists in no country with high or low CHD incidence.

The AHA diet statement also perpetuates the very real myth that high carbohydrate, low fat diets accentuate hypertryglyceridemia. This is true only for rare individuals or for short term dramatic diet experiments. Triglycerides are found to be generally low in countries where entire populations subsist on high CHO diets. Finally, if one examines the data carefully, there is still very little evidence of the "pathogenecity" of triglycerides, independent of the effect of cholesterol.

In the AHA Diet Statement laxness on total fat calories involves an absence of suggested reasonable values for saturated mono-polyunsaturate (? 10:10:10) composition, complexity introduced by the "high-carbohydrate" idea, and discouragement from the "careful planning" insisted on with regard to exogenous cholesterol. All these points suggest to me and others that a more reasonable Diet Statement might be forthcoming soon from AHA.

On the other hand, you could hardly be blamed for not wanting to rock the boat before some new "Miet-Heart" results are in. I have encouraged the Epidemiology Council to consider making a statement concerning "Confusion about Serum Triglycerides and Lipoprotein Typing in Coronary Prevention Programs." If this is not forthcoming, at least an editorial will be, I am sure.

Will you attend the Epidemiology Council meeting in San Diego? Hope to see you there. Things go well here.

Regarde,

Hanry Blockhown Ar n