**Weighing in on Dietary Fats**

**Some Fats Are Healthier Than Others**

With the winter holidays upon us, you’ll likely be surrounded by family, friends and plenty of good food. Many of these foods, though, can be high in fat. Learn which fats are naughty and which are nice to your health. Then you can make smarter food choices.

We need a certain amount of fat in our diets to stay healthy. Fats provide needed energy in the form of calories. Fats help our bodies absorb important vitamins—called fat-soluble vitamins—including vitamins A, D, E and K. Fats also make foods more flavorful and help us feel full. Fats are especially important for infants and toddlers, because dietary fat contributes to proper growth and development.

“Fats are really the most concentrated source of energy in the foods we eat, and our bodies need that energy,” says NIH nutritionist Dr. Margaret McDowell. “Fats are truly an essential nutrient.”

Problems arise, though, if we eat too much fat. Dietary fats have more than twice as many calories per gram as either proteins or carbohydrates like sugar and starch. Excess calories, of course, can pack on the pounds and raise your risk for diabetes, cancer and other conditions.

Eating the “wrong” kinds of fats can trigger additional health hazards. “Some fats are better for our bodies than others,” McDowell says. “We should really aim to eat the right types of fats.”

Foods can contain a mixture of different fats. Unsaturated fats are considered “good” fats. They’re sometimes listed as “monounsaturated” and “polyunsaturated” fat on Nutrition Facts labels. These can promote health if eaten in the right amounts. They are generally liquid at room temperature, and are known as oils. You’ll find healthful unsaturated fats in fish, nuts and most vegetable oils, including canola, corn, olive and safflower oils.

The so-called “bad” fats are saturated fats and trans fats. They tend to be solid at room temperature. Solid fats include butter, meat fats, stick margarine, shortening, and coconut and palm oils. They’re often found in chocolates, baked goods, and deep-fried and processed foods.

“When we eat too many solid fats, we put our bodies at risk. These fats tend to raise total blood cholesterol, as well as the part of cholesterol known as low-density lipoprotein (LDL) cholesterol,” says McDowell. “When those cholesterol levels are out of whack and too high, it’s a risk factor for cardiovascular disease.”

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**Definitions**

**Unsaturated Fats**

“Good” fats found in vegetable oils, seafood and nuts.

**Saturated Fats**

“Bad” fats found in whole milk; full-fat cheese; high-fat meats like sausage and bacon; and foods made with butter, lard and shortening.

**Trans Fats**

“Bad” fats found in some margarines and processed foods, including commercially baked cookies, crackers and pastries.

**Cholesterol**

A waxy, fat-like substance that your body needs to function normally. A high level in the blood, however, is a major risk factor for heart disease.
“When there’s too much cholesterol in the blood, the excess can get trapped in artery walls and build up,” adds Dr. Catherine Loria, an NIH expert on nutrition and heart health. “The buildup can develop into atherosclerosis, or hardening of the arteries, which can lead to coronary heart disease.”

Experts say that the total fat intake for adults ages 19 and older should be 20% to 35% of the calories eaten each day. For children ages 4 to 18, it should be 25% to 35%.

Experts also say you should get less than 10% of your calories from saturated fatty acids. NIH-funded studies have shown that replacing the solid fats in your diet with healthful unsaturated fats can have a positive impact. “When you look at total fat intake, using unsaturated fats in place of some of the saturated fats actually lowers your total cholesterol levels, and mainly your LDL cholesterol levels, which is a good thing,” says Loria.

Other NIH-funded research found that, when it comes to weight loss, the source of calories—whether from fat, protein or carbohydrate—isn’t as important as the number of calories you consume. But when it comes to risk factors for heart disease, replacing some carbohydrates with protein or unsaturated fats can greatly improve blood cholesterol. In a specialized diet designed to lower blood pressure, using unsaturated fats in place of some carbohydrates boosted blood levels of “good” cholesterol (HDL cholesterol) and caused a more healthful drop in blood pressure.

“It’s about becoming a label reader,” says Joanne Gallivan, a registered dietitian who heads NIH’s National Diabetes Education Program. To eat healthfully, she says, “you need to read the Nutrition Facts label to learn the amount of fat and calories in the food, the amounts per serving, and what percent of calories come from fat.” The nutrition label also shows the amounts of unhealthy saturated and trans fats.

Eating healthy fats and less total fat can be especially challenging over the holidays, however. “You want to enjoy the foods and the celebration. You shouldn’t think of the holidays as a time to deprive yourself,” says McDowell.

One way to cut fat at holiday gatherings is to simply reduce your portion sizes. “Choose more lean meats, like poultry without the skin. Eat more fruits, vegetables and whole-grain foods,” says Gallivan.

When preparing recipes, try to use lower-fat ingredients. “Low-fat and fat-free yogurt and milk still contain the important proteins and minerals found in the full-fat versions, but you’re getting less saturated fat and cholesterol,” McDowell says. “In some recipes, you can use applesauce or egg whites, instead of oil. In general, bake, broil or grill instead of frying.”

Learn to read between the lines on Nutrition Facts labels. “If a food is labeled ‘low-fat,’ that doesn’t necessarily mean it’s low in calories,” says Gallivan. Nonfat cookies, crackers and other products may contain added sugar and salt to boost their flavor. Added sugar can add calories, and too much salt can raise blood pressure.

“If you indulge a bit over the holidays, just be sure that the next day you go back to following a healthy meal plan and being active,” says Gallivan. And remember, when it comes to saturated or trans fats in your diet, you’ll help your health if you choose wisely and trim the fat.
You’re Never Too Old
Keep Active as You Age

We’ve all heard that exercise is good for you. Did you know that it’s as true for older people as it is for any age group? You’re never too old to get moving, get stronger and improve your health.

Fitting exercise and physical activity into your day can enhance your life in so many ways. Regular physical activity can improve your balance and boost or maintain your strength and fitness. It may also improve your mood and help you manage or lessen the impact of conditions like diabetes, heart disease, osteoporosis and depression.

Despite these proven benefits, exercise and physical activity rates among older people are surprisingly low. Only about 30% of people ages 45 to 64 say they engage in regular leisure-time physical activity. This falls to 25% of those between the ages of 65 and 74 and 11% of people age 85 and older.

Experts recommend 4 types of exercise for older adults: endurance, balance, strength and flexibility. Brisk walking, dancing and other endurance exercises improve the health of your heart, lungs and circulatory system. These exercises can make it easier for you to mow the lawn, climb stairs and do other daily activities. Strength exercises include lifting weights or using resistance bands. They can increase muscle strength to help with activities such as carrying groceries or lifting grandchildren.

Balance exercises can help prevent falls—a major health risk for older adults. Stretching, or flexibility exercises, can give you more freedom of movement for bending to tie your shoes or looking over your shoulder as you back out of the driveway.

“Even if you haven’t been active previously, it’s important to get started and stay active,” says Dr. Richard J. Hodes, director of NIH’s National Institute on Aging. “We know that people want to live independently for as long as they possibly can. By exercising regularly and including more physical activity in their daily routine, older people can preserve their physical function, which is key to doing the everyday things they want to do.”

To help you get started and keep moving, NIH brought together some of the nation’s leading experts on aging, exercise and motivation. They developed a guide to exercise for older adults. The guide serves as the basis for a new national exercise and physical activity campaign for people ages 50 and older. It’s called Go4Life.

“Older adults can exercise safely, even those who have physical limitations,” Hodes says. “Go4Life is based on studies showing the benefits of exercise and physical activity for older people, including those with chronic health conditions.”

Go4Life exercises are designed to be done safely at home without special equipment or clothing. The free book Exercise & Physical Activity: Your Everyday Guide from the National Institute on Aging is the core resource for the campaign. Other free materials, such as an exercise DVD and tip sheets, are also available. Workout to Go—a mini exercise guide at www.nia.nih.gov/HealthInformation/Publications/workout.htm—shows you how you can be active anytime, anywhere.

To learn more, visit Go4Life at www.nia.nih.gov/Go4Life. You’ll find exercises, success stories and tips to help you stay motivated. Or call 1-800-222-2225, or e-mail niaic@nia.nih.gov.
Yoga or Stretching Eases Low Back Pain

Weekly classes of yoga or intensive stretching can reduce low back pain and improve back movement, a new study shows. Both types of classes were equally effective, and their benefits lasted for months after the classes ended.

Low back pain is the most common cause of job-related disability and a leading reason for missed work. Many treatments exist, but none have proven highly effective against long-lasting back pain.

Small studies have hinted that yoga might help. Yoga often combines physical postures, breathing techniques and relaxation. Some experts suspected that yoga’s mind-body focus might give it an edge over other exercise treatments for back pain.

To investigate, NIH-funded scientists randomly divided over 200 people with low back pain into 3 groups. One had weekly classes of yoga for 3 months. Another had classes of intensive stretching. The third group received a self-care book that suggested exercises and lifestyle changes to reduce back pain.

After 3 months, the yoga group had less pain and more back movement than the self-care group. The yoga group remained better even at 6 months. However, stretching was just as effective as yoga.

“We expected back pain to ease more with yoga than with stretching, so our findings surprised us,” says Dr. Karen J. Sherman of the Group Health Research Institute in Seattle. “Our results suggest that both yoga and stretching can be good, safe options for people who are willing to try physical activity to relieve their moderate low back pain.”

Stroke Risk Linked to Thinking Problems

Known risk factors for stroke may also boost your chance of developing cognitive problems, according to a new study. The results suggest that keeping blood pressure in check might help protect cognitive health.

Strokes occur when blood vessels that supply the brain rupture or become blocked. Without nutrient-rich blood, brain cells malfunction and die. Strokes can harm memory, language and other cognitive abilities.

Your chances of having a stroke are affected by age, blood pressure, heart health and diabetes. But what if you’re at risk for stroke and haven’t had one? Can the factors that affect stroke risk cause cognitive decline as blood vessels deteriorate?

To learn more, NIH-funded scientists studied nearly 24,000 people for an average of 4 years. Annual tests looked at each participant’s cognitive health and likelihood of developing a stroke.

During the study, more than 1,900 people without an evident stroke showed cognitive impairment. The researchers found that high blood pressure, older age, and enlargement of the heart independently predicted cognitive decline.

“Our results emphasize the importance of early intervention to treat high blood pressure and preserve cognitive health prior to a stroke or other cerebral event,” says the study’s lead author, Dr. Frederick Unverzagt of Indiana University School of Medicine.