THE BRITISH CARDIAC PATIENTS ASSOCIATION



Diet

The recommendations below are aimed at preventing or reducing the risks of heart disease. They do not apply to children under five years old or to people training for sports or who are ill. Also, some people have personal, religious, medical, taste, smell, or other reasons for their beliefs, choices and preferences; so may not fully agree with or want to follow these suggestions.

Have a balanced diet including vitamins, minerals and proteins. A balanced diet has roughly

- <u>one third carbohydrates</u> some at each main meal, preferably mostly low GI or medium GI, and minimise sugar and salt
- one third vegetables and fruit five portions with a variety of types & colours
- one third everything else meat, fish, eggs, cheese, milk (a pint a day or eg 1/3 pint milk, small yoghourt, and portion of cheese), yoghourt, nuts, pulses (beans & lentils), fats (minimise saturated fats), and enough to drink.

In more detail

One third carbohydrates Eat sufficient <u>carbohydrate</u> foods like porridge, wholemeal bread, pasta, wholegrain rice, and potatoes for your energy needs; but not too much which may make one obese. Reduce or avoid refined carbohydrates like foods containing <u>sugar</u>.

Preferably have low <u>Glycaemic Index</u> foods – eg apple, carrot, green vegetables, porridge, spaghetti, yoghurt, wholegrain / basmati rice. Minimise high GI foods – eg chocolate, mashed or jacket potato, cornflakes, ice cream, short-grain white rice.

Minimize your sodium-based salt intake, explained under Salt.

One third vegetables and fruit Eat at least five portions of fruit and/or vegetables each day, preferably aboveground vegetables; as these contain essential minerals and compounds that one's body needs in small or trace quantities. Frozen, chilled, tinned, and dried fruit all count as fresh fruit and vegetables.

One third everything else Have fresh or frozen fish twice a week. This includes oily fish at least once a week – eg salmon, pilchards, tuna, sardines, trout, mackerel, or herring. Fresh and frozen fish are slightly more beneficial than canned, as the process removes some of the beneficial omega-3.

Also at least twice a week have some meat, preferably *poultry* – chicken, turkey or similar. See <u>Some meat and fish weekly</u> below for why. Preferably cut off and do not eat the animal fat or skin, which are saturated fats.

Of **fats**, omega-3, polyunsaturated and monounsaturated fats are healthy, but <u>saturated</u> fats and <u>trans</u> fats are unhealthy. So reduce or keep down total fat consumption, and in particular reduce the intake of saturated fat – see <u>Reducing the undesirable fats in diet</u> below. Replace saturated fat with polyunsaturated and/or monounsaturated fats.

Moderate levels of appropriate forms of <u>alcohol</u> (as explained there) provide protective cardiac health benefits, particularly to those at risk from coronary heart disease.

Plan meals in advance and check food labels. The information can sometimes be surprising.

Diet – Some meat and fish weekly. Research in the 1950s and early 1960s showed that older* people with deteriorations in health and with multiple deficiencies of proteins, vitamins, minerals, and/or other compounds had to have some fish and some meat each week before their body systems could again get correct the other deteriorations and deficiencies. For some reason not understood, where a person did not have any fish or meat or some other source of certain essential** things, their body eventually could not absorb and/or produce the correct levels of various other compounds needed for health.

*This research was only on older people, over 50, but probably applies to adults of all ages.

**Unfortunately, the actual relevant essential things could not then be determined, and this is still not known, but are probably proteins. The researchers found that those older people who had cut down on meat, fish, and cooking – perhaps to save money and work – had gradually developed many other deteriorations and became frail – a vicious circle. But these older people's health slowly improved again after appropriate changes.

Reducing the undesirable fats in diet by the following.

Reduce total fat consumption, and in particular reduce the intake of saturated fat. Remove the skin from meat. Cut excess fat off meat before cooking. Drain excess fat off after cooking.

Have white meats such as poultry – chicken or turkey; rather than red meats – beef, lamb, pork, bacon, ham, or similar.

Have about two servings of fish, including at least one serving of oily fish per week.

Minimize the pork or beef sausages, burgers, pasties, pies, and similar foods that typically contain animal fats and/or saturated fats.

Try semi-skimmed or skimmed milk. Reduce or avoid full cream milk.

- Reduce the butter or margarine on bread or toast, jacket potatoes, mashed potatoes, and vegetables; and/or change to a cholesterol-lowering spread eg a cholesterol-lowering product such as Flora pro.activ® or Benecol®. This is available as: a low-fat spread, a milk drink, or a yogurt. You should aim for three portions per day.
- When having something moist such as baked beans or egg on toast, reduce or try omitting the butter or margarine completely.
- Grill foods rather than frying them. Cut down on fried foods preferably to not more than once per week. Do not keep fat used for frying for reuse, as reheating turns <u>cis</u> bonds in the fat into trans.
- Use less oil in salad dressings, or use fat free dressings.
- Try low-fat cheese. As explained in the separate <u>factsheet on Cheeses fat content</u>, the following low-fat cheeses can be eaten freely: cottage cheese, Quark, reduced fat cottage cheese, reduced fat cheese spread, reduced fat Edam, Ricotta.
- Reduce or avoid crisps, dumplings, Yorkshire puddings, pastry, cakes, biscuits, and cream. Some of these also have undesirable excess salt and/or sugar.
- If you cut down on the undesirable fats as above, you may need slightly more carbohydrate like porridge, wholemeal bread, pasta, wholegrain rice, and/or potatoes.

First published in this form 2002, and updated 2005, 2007, 2008.

All rights reserved. No part of this work may be reproduced, stored in a retrieval system or transmitted, in any form or by any means, without written permission from the BCPA Head Office.

We give permission for copies to be stored and made within the BCPA and any UK hospital; and these hospitals may give printed but not electronic copies to patients provided the source and copyright is acknowledged on the copies – eg include the page footer.