

# Cholesterol NEWS



February 2016



Fund-raisers  
at the Places  
for People  
Leisure  
Blackwater  
centre in  
Maldon,  
Essex. See  
full story on  
pages 5-7

# Your continuing support enables us to carry on our valuable work

**C**holesterol issues continue to feature regularly in the media with HEART UK working hard with its corporate partners to raise awareness.

It often feels like an uphill struggle when there are inaccurate articles appearing in a handful of newspapers.

One of our greatest successes of last year was National Cholesterol Month, when our wonderful ambassadors, supporters and corporate partners did some amazing things to raise awareness and much-needed funds for our work.

Without your support, the work of HEART UK would grind to a halt. During October we can celebrate all the wonderful contributions people made to our cause.

At HEART UK we kicked off National Cholesterol Month with our virtual walk along the Great Wall of China.



**JULES PAYNE**  
Chief executive

## heart of the matter

At the same time people up and down the country started taking part in some fantastic events.

We saw swimming pools turned red, spinathons, virtual walks around the world and a whole lot more. Check out what happened on pages 5-7

Your invaluable help and donations enabled us to:

- Challenge NICE for refusing heart-risk

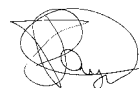
patients access to certain medicines (see more detail on the facing page).

- Campaign in Parliament for support for our nationwide projects.
- Provide information and support through booklets, information sheets and our incredibly busy helpline

HEART UK also now provides the secretariat for a European FH (familial hypercholesterolaemia) Network and I chair a committee of the 19 member countries (see picture on page 12).

The network helps members to develop services for FH and is a means of sharing ideas and good practice across country borders

So while HEART UK is small, our advice is invaluable, our authority is strong and our influence now stretches out internationally.



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## Our advice to help you

If you have any queries, questions or concerns related to heart health, cholesterol, diet or medication, call our **cholesterol helpline** where you can speak to one of our dietetic or nurse advisors, Monday to Friday, 10am – 3pm.

Advice is also available in Urdu, Punjabi and Hindi every Friday. Call **0345 450 5988** or email your question to [ask@heartuk.org.uk](mailto:ask@heartuk.org.uk).

HEART UK – the cholesterol charity no longer support or are involved with the online community "HealthUnlocked".

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Please consider a gift in your will to HEART UK helping us to save lives and keep families together longer.

For more information on providing the gift of a lifetime, please contact Charlotte on 01628 777046 or email [development@heartuk.org.uk](mailto:development@heartuk.org.uk)

[www.heartuk.org.uk/legacy](http://www.heartuk.org.uk/legacy)



# How we got NICE to change its mind over giving life-saving drug



● Campaigning at Parliament: from left, Dr Alan Rees, Medical Director and Trustee, HEART UK, Jamie Waterall, National Lead for NHS Health Checks, Jules, Stuart Andrew MP and Dr Roger Henderson GP

NICE has reversed its 2014 decision and is to allow more NHS patients to benefit from using the cholesterol-lowering medication Ezetimibe, following a strong campaign by HEART UK.

Last year NICE, the National Institute for Health and Care Excellence, reviewed its 2007 guidelines on the use of Ezetimibe to patients at high risk of developing cardiovascular disease and recommended that it be limited only to existing patients.

High cholesterol is a major cause of heart attacks in the UK and Ezetimibe is a valuable medicine which can be used alongside or instead of statins to help reduce cholesterol for millions of patients across the UK. Plans to limit the use of Ezetimibe caused us at HEART UK great concern.

We were very vocal in informing NICE that its review of the guidance and limiting access to Ezetimibe to patients was wrong and we were very pleased that they listened to our concerns and changed the policy.

However the fight goes on. NICE

have also blocked NHS patients using a new class of medicines, called PCSK9 inhibitors, which allow the liver to rid the body of LDL (bad) cholesterol by more than half.

HEART UK believes that denying access to PCSK9 inhibitors would leave a significant portion of patients at high risk without sufficient treatment options, which will put more pressure on the already-stretched NHS when the solution could save lives.

Denying NHS patients access to such new medications in this way is not only moving away from the Government's previous promise to invest more in science and technology but more importantly leaving high-risk patients in danger of having a heart attack or stroke.

We spoke in detail to Stuart Andrew, MP for Pudsey, Horsforth & Aireborough and Chair of the All Party Parliamentary Group on Heart Disease, who said:

"HEART UK have raised some valid concerns following NICE's decision to not make PCSK9 inhibitors available

on the NHS. These are drugs that will help patients to lower their cholesterol, relieving the health service of some preventable pressures and they have the potential to save lives.

"NICE should reconsider their decision and look again at the benefits that PCSK9 drugs offer the British public. I applaud HEART UK for raising this incredibly vital issue."

With the support of more than 107 healthcare professionals, including some of the UK's and world's leading experts together with more than 400 patients, HEART UK has again lobbied NICE to review its decision on these life-saving medicines.

With the support of Stuart Andrew and many other Parliamentarians, we will continue to ask why patients are being denied access to new medicines that save lives.

NICE will make a decision about PCSK9 inhibitors shortly, but at least the good news is that patients who need Ezetimibe can get it and that HEART UK stood up for them and the British public.

# Calling all health professionals: Join us and keep up-to-date

From just £3 a month you can be part of a unique organisation that brings health professionals together. Why not join our professional membership scheme and get access to current developments in the field of cholesterol and blood lipids?

Our members will be kept up to date on the latest research findings, policy updates and have the opportunity to network throughout the year.

You will have access to grants and bursaries, support for appropriate ACCEA applications, specialist information, publications and references to help with your clinical practice.

You will receive a discounted rate to attend our annual scientific conference and be able to benefit from specialist educational opportunities to support your career development. Memberships costs £36 per year or £3 a month for



health professionals and £60 per year or £5 a month for qualified doctors.

To join, just visit [www.heartuk.org.uk/healthcareprofessional](http://www.heartuk.org.uk/healthcareprofessional). You can pay online, call us on 01628 77046 or download and complete our online membership form and send this together with a cheque or payment details to HEART UK, 7 North Road, Maidenhead, Berks SL6 1PE. Self-employed professional membership expenses are an allowable tax benefit.

## Diary dates 2016

**March 15** – 9th North West Lipid Forum, Radisson Blu Hotel, Manchester Airport  
Info: email [alhelpi@doctors.org.uk](mailto:alhelpi@doctors.org.uk) or fax: 016127 64648

**May 27-28** – International Lipoprotein (a) Satellite Meeting, From Bench to Bedside University of Innsbruck, Austria  
Info: <http://lpa.i-med.ac.at/>

**May 29-June 1** – 84th EAS Congress Innsbruck, Austria  
Info: [www.eas2016.kenes.com/congress-information#.VqYYQsjw7Kd](http://www.eas2016.kenes.com/congress-information#.VqYYQsjw7Kd)

**June 6-8** – British Cardiac Society (BCS) Annual Conference Manchester Central  
Info: [www.bcs.com/ace/default2016.asp?navcatid=30](http://www.bcs.com/ace/default2016.asp?navcatid=30)

**July 6-8** – HEART UK 30th Annual Conference, Cholesterol – The Evolving Story. A Celebration of 30 Years of Lipidology' Edinburgh Conference Centre, Heriot-Watt University, Riccarton, Edinburgh, EH14 4AS  
Info: **Natasha Dougall, t: +44 (0) 1543 503 322; f: +44 (0) 1543 466 890, e: [wheldonevents@btconnect.com](mailto:wheldonevents@btconnect.com)**  
See more at: [www.heartuk.org.uk/news-and-events/meetings-conferences/heart\\_uk\\_annual\\_conference#sthash.fLGMDGi8.dpuf](http://www.heartuk.org.uk/news-and-events/meetings-conferences/heart_uk_annual_conference#sthash.fLGMDGi8.dpuf)

Further info on the all above events at: [heartuk.org.uk/news-and-events/meetings-conferences](http://heartuk.org.uk/news-and-events/meetings-conferences)

**THE conference for medical, scientific, healthcare and student attendees with an interest in lipids, atherosclerosis, cholesterol conditions, cardiovascular disease and nutrition.**

Single day or full conference registration options available.

Become a HEART UK member and enjoy competitive conference rates.



## 30th Annual Conference

Wednesday 6 - Friday 8 July 2016

Edinburgh Conference Centre, Heriot-Watt University, Scotland, UK

Cholesterol - The Evolving Story. A Celebration of 30 Years of Lipidology

### Learn, update and network

- 2 day conference (Thursday - Friday): Learning from the Past | The Here and Now | Looking to the future.
- Paediatrics and Hyperlipidaemia Education study day (Wednesday).
- The '**must go**' conference for anyone interested in lipids and working in primary or secondary care or industry.
- Informative plenary sessions given by eminent national and international speakers.
- Interactive sessions on clinical cases and patient and public issues.
- Sessions suited to clinicians in both primary and secondary care and scientists alike.

### KEY DEADLINES:

Deadline for abstract submissions:

**Friday 4 March**

Deadline for travel grant applications:

**Friday 1 April**

Deadline for early bird registrations:

**Tuesday 3 May**

[www.heartuk.org.uk/conference](http://www.heartuk.org.uk/conference)

Tel: 01543 503 322

HEART UK Registered Charity No. 1003904

Accreditation applied for:  
CPD via the Royal College of Physicians  
British Dietetic Association



# National Cholesterol Month raises an incredible £36,000

## UPDATE

### National Cholesterol Month

Huge thanks to everyone who got involved with National Cholesterol Month in October. We had a terrific month and to date have raised an incredible £36,000. Each year we manage to raise more than we did the year before which confirms that National Cholesterol Month is here to stay and growing from strength to strength!

With health care professionals, corporate partners, ambassadors, supporters, staff and trustees all involved it's no wonder that we had an



amazing month. The campaign focused on our "Great Cholesterol Challenge" and the benefits of being

physically active in helping to keep bad cholesterol levels at bay. Our fun 'virtual' challenges got everyone really engaged and raising money for HEART UK.

Fundraising should be fun, and last year's campaign lived up to that challenge!

We are really grateful to all our wonderful corporate partners who helped make National Cholesterol Month such a success.

**Benecol** sponsored the month and throughout October and November promoted HEART UK's National Cholesterol Month on more than two million Benecol yogurt drinks. Also 1000 lucky people won a fabulous



● Massive contributions: Jules Payne, left, receives a cheque from Lorraine King, Head of Marketing for Benecol; above, the Places for People Waendel centre raised more than £200 with a cyclathon



fitness tracker. Many, many thanks to Benecol for all their kind support.

Thanks also to corporate partners, **Places for People Leisure** who created their own amazing virtual challenges and raised more than £7,000 for HEART UK. The centres organised London to Paris cycle rides, row the

Channel and virtual swims; one centre even turned their pool red for the day to raise funds for us! (see pictures on page 6-7).

A huge thanks to everyone at Places for People Leisure for inspiring and

► Continued on next page

◀ Continued from page 5

co-ordinating the activity and to the gym teams for all their hard work and dedication to supporting us. We cannot include every centre but on the right is a snapshot of some of the amazing activity.

We would also like to extend our thanks to **Waitrose** for their kind donation of £3,000, and to the **BUPA** team who raised £1,564 with a Three Peaks challenge.



Celebrity Chef Ambassador **Cyrus Todiwala** created a special healthy chicken jalfrezi dish for National Cholesterol Month at his restaurant Café Spice and raised £244, see below.



One of our corporate partners **Porta Communications** raised nearly £1,000 with a cake bake and other events.

It's never too early to learn about heart health. **Highfield School** (situated opposite our offices in Maidenhead) got creative and ran a competition to design a collage using HEART UK's red laces! The results were amazing and local toy company Mattel donated the prizes.



● What amazing effort! Clockwise from left: The Edge, top fundraising centre with nearly £1,900 after a combined five marathon event on a treadmill; West Bromwich who were our 'social media' stars tweeting about their Route 66 challenge – together they raised more than £900; Waendel who with the help of HEART UK ambassador Nigel Scott, raised more than £200 with a cyclathon; Parish Wharf who turned their pool red for the day and raised just more than £200; Gosport who did a virtual swimming challenge 'down under' and raised more than £130



And finally, not forgetting those of you who supported Team HEART UK. Staff raised more than £1500 with our virtual Great Wall of China walk! So, an enormous thank you to everyone who took part.

The money you have raised goes directly to helping us support people living with high cholesterol and other blood fat conditions through the delivery of our vital services.

**Help us keep hearts running!**

Let us know if you would like to do a sporting challenge to raise money. Sporting challenges are a popular and healthy way of raising money and we would love to hear from anyone who would like to help us to 'keep hearts running' by doing a sporting challenge for us. Whether you have set your goals on a marathon, a half-marathon or want to do your own cycling,





swimming or walking challenge we are here to help. This year we have a record number of runners in the Virgin Money London Marathon on Sunday April 24 and we are really grateful to Team HEART UK who are giving up time to train and fundraise for us.



● Running for us: FH nurse Julie McCullough

If a marathon is too much – we have places available in the BUPA 10K on Bank Holiday Monday May 30. This popular event takes in many of London's iconic sights including Mansion House, the London Eye, Houses of Parliament and Big Ben. To find out

more about how you can help us with a sporting challenge email [fundraising@heartuk.org.uk](mailto:fundraising@heartuk.org.uk)

### Workplace charity partnerships

We are always looking for new companies to adopt HEART UK as their official charity. Could you help us? If you work for a company that has a social corporate responsibility policy please give us an introduction.

Working with companies is not only a great way to spread the word about the dangers of high cholesterol to employees, but it also gives us a chance to raise funds – all helping to save lives. You can find out more by emailing [fundraising@heartuk.org.uk](mailto:fundraising@heartuk.org.uk)

### Payroll giving is tax efficient

Want a tax efficient and easy way to give? Payroll giving is a scheme that allows people paid through PAYE to make donations to the charity of their choice.

The scheme is totally tax efficient in

that the donation includes the tax that would have been deducted from pay, so instead of the tax going straight to the Treasury it will go to the charity of your choice.

For example, if someone donates £5 a month it will only cost you £4 (if you pay tax at 20%) because HM Revenue and Customs pay the rest!

HEART UK has joined forces with the company **Payroll Giving in Action**. Payroll Giving in Action is an independent agency who work on our behalf to recruit donors. If members of staff want to sign up to the fund-raising scheme, you simply fill in a form and tick the charity of your choice.

It's that simple, please visit: [www.heartuk.org.uk/donate/payroll-giving](http://www.heartuk.org.uk/donate/payroll-giving) for more details.

# mailbag

This month we feature a couple of unusual questions on statins. If you have an urgent question, give us a call on 0345 450 5988 or email us at [ask@heartuk.org.uk](mailto:ask@heartuk.org.uk)

## Athletes and statins

**Q** I have just been told by my GP that I might have FH. I'm 56 and wanted some advice on taking statins as I am fairly active and am concerned about any effects the statins would have on my muscles.

**A** We would recommend that anyone who has been given a possible diagnosis of FH (familial hypercholesterolaemia) be referred to see a specialist at a lipid clinic, for a confirmed diagnosis and to start the process of cascade screening.

Cascade screening is the process of identifying other affected family members which starts with the screening of first degree relatives (brother, sister, mother, father, children). Anyone formally diagnosed with FH whose cholesterol levels are untreated are at an increased risk of cardiovascular disease. While exercise is an important part of a healthy lifestyle, the risk of an event is increased during exercise if cholesterol levels are not well-controlled.

We spoke to Dr Dermot Neely, HEART UK trustee and head of lipid and metabolic clinic in Newcastle, for his advice regarding statins and those who exercise. Dr Neely said that while high intensity exercise increases the risk of muscle symptoms during statin treatment, only a minority of people are affected and in most cases this can be prevented in a number of ways, which include avoiding prescribing high doses of statin and by choosing a statin which is less likely to be absorbed by muscles.

This type of statin is known as "hydrophilic" or "water soluble" which means it has better solubility in water and is less likely to interact with other medications. Hydrophilic statins are also removed from the body largely unchanged by the liver and are less likely to affect muscles. Rosuvastatin and pravastatin are both hydrophilic statins but they vary in potency.

Dr Neely went on to say that some

patients, under the medical supervision of their healthcare professional, choose to omit their statin for a few days before high intensity exercise such as in competitive or elite sports. This allows them to maintain satisfactory cholesterol control while enabling them to participate fully in the activities they enjoy.

Any issues regarding medication should always be discussed with your health professional. Watch out for HEART UK's new guide to different types of statins on our website in the near future

## Negative news stories and statins

**Q** I started taking statins 11 years ago after suffering a heart attack. Thankfully I have had no problems with them and my cholesterol is now well managed. Being retired I have plenty of time on my hands and have followed the news stories in the press about statins over the years. It is amazing how one week statins are the flavour of the month and the next thing they are blamed for all manner of ills. Surely this is irresponsible of the press? I can only imagine that the negative cover that statins suffer is causing people to think seriously about taking a statin in the first place and might even discourage people from continuing with their prescription. Is there any evidence of this?

**A** It is a really interesting point you raise. While we could not find any record in the UK there is a recent study in Denmark which highlighted the potential effects of negative news stories on people who take a statin. Dr Sune Nielsen and Dr Borge Nordestgaard from the University of Copenhagen in Denmark looked at more than 690,000 Danish adults who received a statin prescription between 1995–2010 for a maximum of four months.

The researchers found that when the media was dominated by negative news stories about statins, patients who were newly prescribed a statin were 9%

more likely to stop. Those who stopped taking a statin early were 25% more likely to have a heart attack and 18% were more likely to die compared with those who continued the medication.

They found that negative coverage of statins was not driven by a single news story but by the overall negative image of statins portrayed by the media. The researchers found that the number of negative news stories about statins rose from 30 to 400 between 1995-2009 and during this time, statin prescription had increased from less than 1% to 11%, while discontinuation had increased from 6% to 18%. To highlight this negative media further, the researchers did a Google search for "statin benefits" which resulted in 1,140,000 hits but when they did a search for "statin side effects" they found 6,480,000 hits in comparison. The researchers hoped that the results of their study would highlight the increasingly worrying issue of statin non-compliance to clinicians and the general population in Denmark.

They also made recommendations. These included a need to develop standard procedures to encourage new statin users to continue to take their medication, the need for the doctor or nurse to tell their patients of any potential side effects and to encourage the patient to report any suspected side effects to the doctor.

In addition they stressed the importance of doctors re-emphasizing the positive benefits that statins can have on their health by preventing further cardiovascular disease and putting this into context with any minor side effects which patients might experience. Of course HEART UK always recommend that anyone concerned about their medications should speak to their doctor.

HEART UK would be interested to hear from any health professionals and/or researchers who are keen to repeat this type of research in the UK. Research grants are available, on application from HEART UK, to fund this type of research.



# 2nd NHS Health Check Awards attract impressive 46 entries

The six winners of the HEART UK's 2015 NHS Health Check Awards were announced at the EMCC in Nottingham last November.

The winning teams in their categories were:

- Public Health, Bracknell Forest Council *for Most Improved Service Delivery*
- Pennine Care NHS Foundation Trust *for Best Impact on Patient Experience*
- Rowlands Pharmacy, Portsmouth *for Team/ Group of the Year*
- Public Health, London Borough of Bromley *for Most Improved Patient Outcomes*
- Kingswood Surgery, High Wycombe *for General Practice Team of the Year*
- Public Health, Cornwall Council *for Most Innovative Project*  
Public Health, Cornwall Council

There were an impressive 46 entries across the six categories. Feedback



● **Jamie Waterall: 'Beneficial for teams to work together to drive uptake'**

from the judges indicated that all submissions were of an extremely high standard, showcasing the fantastic work happening around the country.

Jamie Waterall, National Lead for NHS Health Checks, said: "Millions of people are now receiving an NHS Health Check each year. The awards

showed how beneficial it is for teams to work together to drive uptake of the programme and increase follow-up. This helps us work towards our main aim of reducing the number of preventable diseases and deaths which are caused by high cholesterol and other cardiovascular risks factors."

NHS Health Checks, which were introduced in 2009, are a health prevention programme aimed at people between the ages of 40-74 not otherwise being treated for a long-term condition.

HEART UK established the awards to recognise the exceptional service delivery for patients by organisations to achieve positive health outcomes.

The judges were: Jamie Waterall; Jules Payne; Jan Proctor King, Editor, British Journal for Primary Care Nursing; Prof. Mike Kirby, Editor, Primary Care Cardiovascular Journal; Terry McCormack, Editor, British Journal of Cardiology; Jo Loades, independent cardiovascular nurse; Michaela Nuttall, cardiovascular nurse specialist.

## Cardiovascular online training for HCPs

HEART UK are involved with two initiatives to help health care professionals looking for further training in cardiovascular medicine.

### Diploma MSc

We are pleased to endorse a new one-year postgraduate diploma and two-year masters programme in preventative cardiovascular medicine, set up by Diploma MSc, a company working in partnership with the University of South Wales.

These unique online courses have been developed to address holistically the best approach to vascular disease. The course authors and tutors are recognised experts and opinion leaders in their specialty areas, making this a truly accessible course of the highest standard. To find out more visit [www.diplomasc.com](http://www.diplomasc.com).

[goo.gl/Lonils](http://goo.gl/Lonils) and quote HEART UK as we will receive a small donation for anyone referred by us who registers on the course.

### Primary care

HEART UK have been working with the Royal College of GPs to develop an online learning resource for doctors all about lipid management.

The course will help the GP gain a better understanding of the physiology and pathology of human lipid metabolism.

Learning modules will also focus on the management of both genetic and lifestyle lipid conditions within primary care. It will be based on relevant NICE guidance and Quality Standards guidance. To find out more visit: [elearning.rcgp.org.uk/lipids](http://elearning.rcgp.org.uk/lipids)

## Latest genetic tests speed up FH diagnosis

HEART UK has provided editorial support and review of a new article in the Primary Care Cardiovascular Journal (PCCJ) by Professor of Cardiovascular Genetics Steve Humphries and Marta Futema, postdoctoral fellow at Institute of Cardiovascular Science, University College London

The article explores recent advances in next generation sequencing (NGS) which have reduced costs and made genetic diagnosis of FH quicker.

The article reviews some of the technological breakthroughs in DNA testing in FH and benefits to patients and clinicians and is available via the PCCJ online: [www.pccj.eu/](http://www.pccj.eu/)

# The truth about which cooking oils are better for your health

## Confused about cooking fats and oils?

Everyone has an opinion about which fat is best to cook with. Here we try to set out the facts and help you choose wisely.

Certain oils and fats are more suited to different kinds of cooking and it's important to use the right one where you can. When cooking at high temperatures you really need to use oils that have:

- A high smoke point
- Are more stable at high temperatures

The smoke point of an oil is basically the temperature at which it starts to smoke. This is an indication that some of the fatty acids are being broken down and that harmful substances are being produced. It is best not to heat an oil beyond its smoke point and to throw away any oil that has reached its smoke point after it has cooled down.

Repeat frying in the same oil is also not recommended because over time the oil can become more saturated, lose some of its protective antioxidant composition (e.g. vitamin E) and accumulate harmful trans fats and free radicals. So best to discard the deep fat fryer altogether.

Some oils are less stable and more susceptible to change during high temperature cooking. Oils rich in polyunsaturated fats (PUFA) are more prone to damage than those that are rich in monounsaturated fats (MUFA) or saturated fat. This is because the unsaturated bonds are where the oxidation takes place. MUFA have fewer unsaturated bonds and are therefore more stable.

## So which is the best oil to use for our health and for which cooking purpose?

Check out the two tables on this page where we have listed the smoke points of commonly used oils as well as the composition and the best oils/fats for each cooking method.

## Why is palm oil commonly used in food products?

Industrial processing of unsaturated fats (to produce partially hydrogenated fats) can also result in the production

## Typical composition of commonly used oils

Oils	Total fat g/100g	Saturates g/100g	MUFA g/100g	PUFA g/100g			Ratio of omega 6 to omega 3	Smoke point
				Total	Omega 6	Omega 3		
Rapeseed	99.9	6.6	59.3	29.3	19.7	9.6	2:1	204
Sunflower	99.9	12.0	20.5	63.3	63.2	0.1	632:1	246
Corn	99.9	14.4	29.9	51.3	50.4	0.9	56:1	236
Soya bean	99.9	15.6	21.3	58.8	51.5	7.3	7:1	241
Olive	99.9	14.3	73.0	8.2	7.5	0.7	11:1	225
Flaxseed	99.9	9.4	20.2	66.0	12.7	53.0	0.23:1	107
Peanut	99.9	20.0	44.4	31.0	31.0	0	*	231
Walnut	99.9	9.1	16.4	69.9	58.4	11.5	5:1	204
Sesame seed	99.9	14.6	37.5	43.4	43.1	0.3	144:1	232
Coconut	99.9	86.5	6.0	1.5	1.5	0	*	177
Palm	99.9	47.8	37.1	10.4	10.1	0.3	34:1	230

## Commercially available oils

Sunflower	100	9	57.3	28.9	28.7	0.04	717:1	
Hi Oleic sunflower	100	10	83	4	3.7	0.1	37:1	
Hi Oleic rapeseed	100	6.5	73	18	15	3	5:1	

## Best cooking oils for heart health

Cooking method	Most suitable	Why
High temperature – one use frying, grilling, roasting, pan frying, barbecuing	Rapeseed, sunflower or corn oils	High smoke point, heart healthy oils, mainly stable MUFA and low PUFA fats
Baking	Spreads made from healthy oils (sunflower, olive) or recipes using sunflower or rapeseed oil	Heart healthy oils/fats with neutral taste
Salad Dressings, marinating	Virgin olive and rapeseed oils, Walnut, sunflower oil	These heart healthy oils have distinct or neutral flavours making them most suitable.

of harmful trans fats. These represent “double trouble” because they not only increase harmful LDL cholesterol, they also decrease good HDL cholesterol. The food industry has therefore moved away from partially hydrogenated fats. Instead they are often replaced with palm oil because it is a very stable and functional oil. Unfortunately it is also high in saturated fat. So where palm oil is in the ingredients, check to see what proportion of the fat is present as saturated fat.

## What about food that is cooked in restaurants, cafés and chippies?

If you eat out regularly then it might be worth asking which fat the restaurant uses for deep frying or high temperature cooking. The food industry commonly use palm oil or a palm oil blend because these types of oils are also more stable and have a longer fry life. A new range of rapeseed and sunflower oils

are now becoming available to the food service industry which are both stable and heart healthy and therefore have a longer fry life.

## Why is coconut oil so popular?

A very clever marketing programme has seen coconut oil become a popular choice in health food stores and supermarkets. There are lots of stories about its health benefits but the evidence is sparse and scientists are far from convinced. Coconut oil is highly saturated – the highest of any oil – so not surprisingly it is also solid at room temperature. The heart benefits claimed rest on the suggestion that coconut oil can increase good (HDL) cholesterol and that the type of saturated fat is more quickly metabolised. However the fats in coconut oil significantly raise bad (LDL) cholesterol and this is of a far greater concern. So for now it's best to avoid coconut oil in the diet.



# Serve up tasty dishes for a health heart



● Baldeesh Rai

February is Heart Month. Why not celebrate with one of these heart healthy recipes? All the recipes are taken from *4 Steps to Lower Cholesterol* written and published last year by our very own dietitians Linda Main and Baldeesh Rai. The book is available online to order from Amazon or via your local book shop using the ISBN number on the right.

*4 Steps to Lower Cholesterol* is a practical and easy-to-use guide for anyone worried about

## Beef and orange casserole

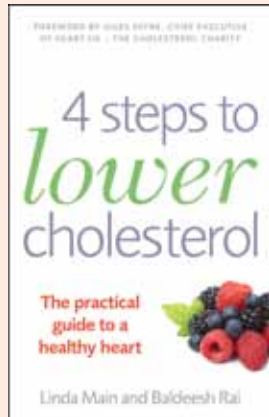
Preparation time 20 minutes  
Cooking time 2½ hours  
Serves 6

### Ingredients

- 675g diced lean stewing beef
- 4 tablespoons plain flour
- 3 tablespoons rapeseed oil
- 2 medium onions, chopped
- 1 clove of garlic, crushed
- 2 sticks of celery, chopped
- 2 medium carrots, sliced
- 2 beef stock cubes, preferably low salt
- 1 bay leaf
- 1 sprig of thyme
- 1 orange
- 150gm pitted prunes
- 60g raisins
- Black pepper to season

### Method

1. Season the flour with black pepper and toss the diced meat in it to coat it on all sides.
2. Brown the meat on all sides in a non stick frying pan, in two batches using one tablespoon of oil each time. Transfer the meat to a large casserole dish
3. Cook the onions and garlic in the remaining oil. After a few minutes add the celery and carrots and cook for a further 4-5 minutes on a low-moderate heat.
4. Transfer the vegetables to the casserole together with crusty bits remaining in the pan. Add two stock cubes crumbled, bayleaf and thyme and only just cover with hot water.
5. Bring to the boil on the stove and then place in the oven (160C) for two hours checking occasionally to make sure there is still enough liquid in the casserole.
6. Meanwhile place the zest of the orange, together with its juice and the prunes and raisins in a bowl and cover with cling film.
7. After two hours remove from the casserole from the oven, add the fruit, juice and zest mixture.



Return to the oven for 30 minutes.  
8. Serve with fruity, nutty couscous, see recipe on the right.

**Cooking tip** – You can cook the casserole up to the end of point 5 the day before you need it.

**Per serving:** Energy 364kcal/1529kj; Fat 11.4g; Saturates 2.1g; Sugars 21g; Salt 0.3g; Fibre 3.4g

## Lamb kebabs

Preparation time 15-20 minutes plus time to marinate  
Cooking time 20 minutes  
Serves 4

### Ingredients for the kebabs

- 400g lean lamb, cut into bite-sized pieces
- 1 large pepper, cut into 16 pieces
- 2 red onions each cut into 8 pieces
- 16 chestnut mushrooms
- 16 cherry tomatoes
- 8 wooden or metal skewers

### Ingredients for the marinade

- 4 tablespoons olive oil
- 4 tablespoons fresh lemon juice
- Zest of one lemon
- Ground black pepper
- 1 clove of garlic crushed
- 1 tablespoon of rosemary, finely chopped

their cholesterol. You'll learn how to make lasting lifestyle changes in four simple steps. Packed with recipes, answers to common questions and myth-busting advice this is the essential handbook for understanding your cholesterol and transforming your health.

● Readers can buy *4 Steps to Lower Cholesterol* (ISBN 9781785040177 – RRP: £12.99) for the special price of £10.40 including free UK p&p. To order please call 01206 255 800 and quote the reference HEART UK



● Linda Main

### Method

1. Make the marinade by mixing all the ingredients together. Use to coat the lamb, cover and marinate in the fridge ideally overnight.
2. Pre-soak any wooden skewers for 30 minutes.
3. Assemble the skewers with the mushrooms and tomatoes at the each ends of each skewer with the, lamb pepper and onion in the centre.
4. Cook under a medium grill or on a barbeque for 15-20 minutes; occasionally basting with any leftover marinade.
5. Serve with fruity, nutty couscous (see right) and a green salad.

**Per serving:** Energy 311kcal/1306kj; Fat 21g; Saturates 1.9g; Sugars 6.4g; Salt 0g; Fibre 2.7g

## Smoked salmon fish cakes

Preparation time – 20 minutes  
Cooking time – 20 minutes  
Serves 4-5 (makes 8-10)

### Ingredients

- 500g floury potatoes, peeled and boiled
- 200g smoked salmon pieces/trimmings
- 2 tablespoons chopped chives
- Zest from one lemon
- 4 spring onions finely chopped, use both the green and the white
- 1 tablespoon extra virgin olive oil
- Black pepper
- 50g flour, plain or gluten free
- 2 eggs, beaten
- 100g wholemeal breadcrumbs

### Method

1. Cook the potatoes in boiling water for around 20 minutes or until tender, drain, mash and allow to cool.
2. Add the smoked salmon pieces, chopped chives, lemon zest, spring onions and olive oil.

3. Season with black pepper and mix together and form into patties.
4. Dip all the patties in the flour. Then dip each one in the beaten egg followed by breadcrumbs.
5. Assemble on a non stick baking sheet and bake in a warm oven 200c for 20 minutes.
6. Serve with green salad and chilli sauce.

**Cooking tip:** These fish cakes can be made in advance, stored in the fridge and then cooked when needed or alternatively make in bulk and freeze. You will need to adjust the cooking time accordingly.

**Per fishcake:** Energy 134kcal/563kj; Fat 3.8g; Saturates 0.7g; Sugars 0.9g; Salt 0.7g; Fibre 2g

## Fruity nutty couscous

Preparation time 20 minutes  
Serves 6

### Ingredients

- 1 medium onion chopped
- ½ tablespoon rapeseed oil
- 120g couscous
- 50g mixed nuts chopped
- 50g dried fruit of your choice (e.g. apricots, sultans)
- 1 handful of roughly chopped parsley
- Black pepper to season

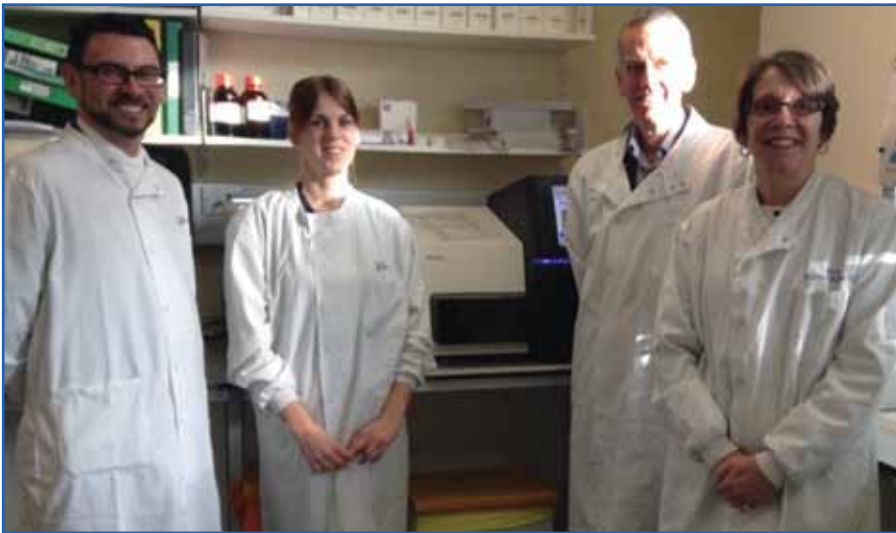
### Method

1. Gentle fry the onion in the oil for 5-10 minutes until softened but not coloured.
2. Meanwhile chop the nuts, fruit, parsley and prepare the couscous as per the packet instructions
3. Combine all the ingredients and serve either cold with a salad or warm as part of a main meal.

**Per serving:** Energy 160kcal/672kj; Fat 6.8g; Saturates 0.7g; Sugars 4.8g; Salt 0g; Fibre 2.6g



● Partners across Europe: Jules Payne, chair of the European FH Network, with members from the 19 affiliated countries. HEART UK provides the secretariat for the group



● Testing for family links: Jules Payne, right, and Simon Williams, left, from HEART UK, visit the Clinical Genetics service at NHS University Hospital Bristol with Graham Bailey, Consultant Biochemist at Bristol Royal Infirmary



● BHR Pharmaceuticals help out at cholesterol testing events at Monitor, Brakes, Porta Communications and the Houses of Parliament



● Healthy eating: Jim Shannon, MP for Strangford, with Jules Payne at the Benecol Cholesterol Management in Primary Care, a recent Parliamentary event