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Choice of cooking oils--myths and realities.

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In contrast to earlier epidemiologic studies showing a low prevalence of atherosclerotic heart disease (AHD) and type-2 dependent diabetes mellitus (Type-2 DM) in the Indian subcontinent, over the recent years, there has been an alarming increase in the prevalence of these diseases in Indians--both abroad and at home, attributable to increased dietary fat intake. Replacing the traditional cooking fats condemned to be atherogenic, with refined vegetable oils promoted as "heart-friendly" because of their polyunsaturated fatty acid (PUFA) content, unfortunately, has not been able to curtail this trend. Current data on dietary fats indicate that it is not just the presence of PUFA but the type of PUFA that is important--a high PUFA n-6 content and high n-6/n-3 ratio in dietary fats being atherogenic and diabetogenic. The newer "heart-friendly" oils like sunflower or safflower oils possess this undesirable PUFA content and there are numerous research data now available to indicate that the sole use or excess intake of these newer vegetable oils are actually detrimental to health and switching to a combination of different types of fats including the traditional cooking fats like ghee, coconut oil and mustard oil would actually reduce the risk of dyslipidaemias, AHD and Type-2 DM.

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