MiniReview Reducing blood cholesterol by a healthy diet

¹Izadi, Z., ²Nasirpour, A., ³Izadi, M. and ⁴Izadi, T.

 ¹Department of Biotechnology, College of engineering, Imam Khomeini International University, Qazvin, Iran.
 ²Department of Food Science and Technology, College of Agriculture, Isfahan University of Technology, Isfahan 84156, Iran.
 ³Department of Food Science and Technology, College of Agriculture, Shiraz University, Shiraz, Iran.
 ⁴Department of Food Science and Technology, College of Agriculture, Ferdowsi University of Mashhad, Mashhad, Iran

Abstract: The number of hypercholesterolemic people is increasing rapidly in the world. Diet and nutrition are important factors in the promotion and maintenance of health throughout life. According to the World Health Organization (WHO) and the Food and Agricultural Organization (FAO), several dietary patterns, along with lifestyle habits (exercise, smoking, and alcohol consumption), constitute major modifiable risk factors in relation to the development of non communicable diseases: cardiovascular diseases (CVD), cancer, type 2 diabetes, obesity, osteoporosis and dental diseases. Improving diet and lifestyle is a critical component of the American Heart Association's (AHA) strategy for cardiovascular disease risk reduction in the general population. Hypercholesterolemia is one of the major risk factors for heart disease. In this review, cholesterol reducing effects of different categories of food are presented. Also technical aspects of adding these functional components to foods are discussed.

Keywords: Cholesterol, functional food, cardiovascular disease, diet

Introduction

Cholesterol is a waxy, fat like substance made in the liver and found only in animal products. It is synthesized in many tissues from acetyl-CoA (Botham *et al.*, 2009). Cholesterol is required to build and maintain cell membranes. It also aids in bile production (which helps digest fats), and is also important for the metabolism of fat soluble vitamins. It is the major precursor for the synthesis of vitamin D and the various steroid hormones which include cortisol and aldosterone in the adrenal glands, and the sex hormones progesterone, the various estrogens, testosterone, and derivatives (Smith, 1991).

There are various types of cholesterol, including low density lipoprotein (LDL) which is a bad form of cholesterol, high density lipoprotein (HDL) which is considered as a good form of cholesterol and triglycerides, a form of fat carried through the bloodstream (James *et al.*, 1998). The main function of LDL is to transport cholesterol from the liver to tissues that incorporate it into cell membranes. HDL carries "old" cholesterol that has been discarded by cells back to the liver for recycling or excretion (Colpo, 2005).

The objective of this paper is an overview of making a few changes in diet. This can reduce cholesterol specially LDL and improves heart health and decrease the other problems caused by high level cholesterol. We present recent researches carried out on natural foods that help reducing or limiting cholesterol level of body. Finally, we will discuss about technical aspects of enrichment of food products with cholesterol reducing ingredients.

Cholesterol reducing foods

Phytosterols (plant sterols)

Plant sterols are naturally occurring components of plants, especially seeds and oils. Common plant sterols include the unsaturated sterols β -sitosterol, campesterol and stigmasterol and their saturated counterparts sitostanol and campestanol. Although phytosterols and cholesterol have similar chemical structures (vary in side chain), they differ markedly in their synthesis, intestinal absorption and metabolic fate (Moghadasian *et al.*, 1999).

As a food ingredient or additive, phytosterols have been shown to reduce total cholesterol and LDL-cholesterol in normocholesterolemic and hyperlipidemic populations (Micallef *et al.*, 2008). The phytosterols are thought to displace cholesterol from bile acid micelles and/or co-precipitate cholesterol in the intestinal lumen, thereby limiting its uptake (Yokoyama, 2004). Intake of phytosterols and/or phytostanols at the level of 1.5-3.0 g/day has been documented to reduce blood LDL-cholesterol by 10% (Katan *et al.*, 2003; Demonty *et al.*, 2009).

Technical Aspects

Enriched products with this functional ingredient are recently presented on the markets. Major problems related to enrichment of products with plant sterols are high melting temperature, chalky taste and low solubility in water phase. Administering crystalline phytosterols, however, did not promote a significant decrease in serum cholesterol when compared to phytosterols dissolved in edible fat products (Normén *et al.*, 2003). Esterification of the plant sterols and stanols with long chain fatty acids increases their lipid solubility and facilitates their incorporation into foods (Noakes *et al.*, 2005) to levels as high as 10-20% (Ostlund, 2002).

A study to compare the effects of phytosterol esters and plant free sterols on beta-carotene and alpha-tocopherol found that phytosterol esters reduced their bioavailability more than did plant free sterols (Richelle *et al.*, 2004).

In the USA, plant sterols, stanols and their esters were given Generally Recognized As Safe (GRAS) status. On the basis of this recognition, the US Food and Drug Administration (FDA) approved fat spreads containing up to 20% of either steryl or stanyl esters (Quilez *et al.*, 2003). EU Commission published Regulation 608/2004/EC concerning the labeling of foods and food ingredients with added phytosterols and/or phytosterol esters, requiring such products to be labeled with additional information including the words "with added plant sterols/plant stanols". In United Kingdom, the food with added phytosterols (labeling) Regulations 2004 were published to provide for the enforcement in England of Regulation 608/2004/EC (Anon., 2004).

Products enriched with phytosterols/stanols are innovative types of functional foods. In the phytostanol enriched margarines Netherlands. (Benecol®) and phytosterol-enriched margarines (Becel pro.activ[®]) are on the market since 1999 and 2000, respectively. Since 2006 the phytosterolenriched low-fat margarine, Reducol® has been introduced. Other phytosterol-enriched food products including dairy products have been introduced from 2003 onwards. The brands Becel pro.activ® and Reducol[®] launched also yoghurt type products, and Becel pro.activ® also includes a milk drink and a yoghurt drink in different flavours. Recently, a phytosterol-enriched cheese (ColActif[®]) became available in a number of Dutch supermarkets (De Jong et al., 2008).

Phytosterols have been combined with other

beneficial dietary components including fish and olive oils, psyllium and beta-glucan to enhance their effect on risk factors of CVD (Jones *et al.*, 2009). Table 1 shows reducing effect of plant sterols in yogurt and margarines. Moghadasian and Frohlich (1999) demonstrated that co-administration of plant sterol, soy protein material and isoflavone may synergistically decrease LDL and total cholesterol concentrations in the blood.

Table 1. Reducing effect of plant sterols in yogurt and margarine

Food carrier/ serving size per day	Daily intake	LDL reduction (%)	Reference
Margarine (25 g)	2 g	7.5	(Malcolm, 2000)
Yogurt (3×150 ml)	3 g	13.7	(Mensink <i>et al.</i> , 1992)
Yogurt (2×150 g)	1.8 g (stanols)	6.1	(Clifton <i>et al.,</i> 2004)
Phytosterol- enriched fermented milk	(multiple or single-dose drinkable or spoon yogurt)	10	(Hansel <i>et al.,</i> 2007)

Fibers

Dietary fiber is a collective term for a variety of plant substances that are resistant to digestion by human gastrointestinal enzymes. Dietary fibers classified in 2 major groups depending on their solubility in water, soluble and insoluble fibers. Studies have focused on soluble fibers such as oats, psyllium, pectin and guar gum, and qualitative reviews suggested that these fibers lower total and LDL cholesterol. Water insoluble wheat fiber and cellulose have no effect unless they displace foods supplying saturated fats and cholesterol (Brown *et al.*, 1999). It is thought that soluble fiber lowers blood cholesterol by binding bile acids, which are made from cholesterol to digest dietary fats, and then excreting them (Glore *et al.*, 1994).

β-glucan

β-glucan from barley or yeast has been shown to be hypocholesterolemic. There are several possible mechanisms by which β-glucan is thought to reduce serum cholesterol levels; many are related to the ability of soluble fibres to form viscous gel in the intestinal tract. It has been proposed that β-glucan reduces plasma cholesterol through its ability to bind acids in the gastrointestinal tract. As β-glucan bind bile acid in the intestinal tract, the bile cid level decreases in the body and thus the dietary cholesterol is utilized for the synthesis of bile acid by the liver (Saikia *et al.*, 2011).

Technical aspect

Cholesterol lowering effect of β -glucan from oat fiber in slightly hypercholesterolemic subjects may

decrease when β -glucan is incorporated into bread and cookies. β -glucan lowers serum concentrations of total and LDL cholesterol when incorporated into a fruit drink (Naumann *et al.*, 2006). Application of β -glucan prepared from spent brewer's yeast as a fat replacer in mayonnaise was studied, which resulted in the reduced fat (RF) mayonnaises with lower calorie but higher storage stability than their full fat (FF) (100% oil) counterpart. However, the addition of the β -glucan preparation adversely affected mayonnaise appearance and color leading to the significantly lower sensory quality as compared with the FF control sample. Nevertheless, the substitution levels of not more than 50% of oil used were found to be acceptable (Worrasinchai *et al.*, 2006).

Pectin

Pectin is a soluble dietary fiber and has a linear chain of 1-4 linked α -D-galacturonic acid that forms the pectin backbone. In the pharmaceutical industry, it is used to reduce blood cholesterol levels and gastrointestinal disorders (Thakur *et al.*, 1997). The mechanisms appeared to be related to 1) pectin can impair bile acid absorption *in vitro*, 2) certain complex carbohydrates have been shown to bind bile salts. By binding bile salts in the intestine, pectin may interfere with bile acid reabsorption, and thus, increase cholesterol degradation and excretion. Also, by the same mechanism, pectin may interfere with micelle formation which is essential in cholesterol absorption (Kelley *et al.*, 1978).

Technical aspect

In the food industry, pectin is used in jams, jellies, frozen foods, and more recently in low calorie foods as a fat and /or sugar replacer. Pectin can also be used to stabilize acidic protein drinks, such as drinking yogurt. For beverages the chosen pectin type is mixed with other powdered ingredients and then incorporated into the liquid matrix during the manufacturing process.

Guar Gum

Guar gum is a galactomannan, a storage polysaccharide, obtains from the cluster beans (*Cymposis tetragonoloba*). Guar gum, a great source of dietary fiber contains 80-85% total dietary fiber, almost in the soluble form may help to lower blood cholesterol and glucose levels (Pszczola, 2003). The mechanism responsible for the cholesterol lowering effect of dietary fiber like guar is partly related to enhanced excretion of bile acids. LDL cholesterol lowering effect of about 5-10% can be achieved with daily consumption of 8-36 g guar gum (Butt *et al.*,

2007).

Technical aspect

The largest market for guar gum (EU food additive code E412) is in the food industry due to its ability to hydrate without heating, where it is used as a thickener and binder of free water in sauces, salad dressings, ice creams, instant noodles, pet foods, processed meats, bread improvers and beverages.

Psyllium (Plantago ovate)

Psyllium, a water-soluble fiber, has been shown to reduce total cholesterol and LDL cholesterol in humans (Fernandez *et al.*, 1995). Reports of the use of psyllium, largely in hypercholesterolemic men, have suggested that it lowers serum cholesterol as a result of the binding of bile acids in the intestinal lumen and reduces risk of coronary heart disease (Van Rosendaal *et al.*, 2004).

The strong gelling property of psyllium polysaccharides is closely related to its health benefits and applications, such as use as a binding agent in the landscape industry. The origin of this gelling behaviour was due to the fibrillar gel structure of psyllium polysaccharide (Guo *et al.*, 2009).

Technical Aspect

Psyllium offers a potential adjunct to a lowfat diet for the treatment of hypercholesterolemia in the pediatric population because of its ease of incorporation into various foods (Davidson *et al.*, 1996). Psyllium can replace gluten in preparations, products made with modified dough had less fat and fewer calories (Zandonadi *et al.*, 2009).

Vegetables and herbs

The largest amount of published literature exists for guggul, fenugreek, red yeast rice and artichoke, on reductions in total serum cholesterol. Increases in HDL and decreases in LDL levels are seen with guggul (*Commiphora mukul*) and decreases in LDL levels are seen in studies of fenugreek (*Trigonella foenum-graecum*) and artichoke (*Cynara scolymus*), (Thompson Coon *et al.*, 2003).

Red yeast rice

Red yeast rice, an Asian dietary staple made by fermenting yeast (*Monascus purpureus*) on rice, is rapidly gaining recognition as a cholesterollowering agent in United States, Indonesia, Japan, Taiwan, and Philippine people are been used as Monascus-nata complex (Sheu *et al.*, 2000). The HMG-CoA reductase activity of red yeast rice comes from a family of naturally occurring substances called monacolins. Monacolins K, also known as mevinolin or lovastatine, is the ingredient in red yeast rice. However, red yeast rice contains a family of nine different monacolins, all of which have the ability to inhibit HMG-CoA reductase. Other active ingredients in red yeast rice include sterols (betasitosterol, campesterol, stigmasterol, sapogenin), isoflavones, and monosaturated fatty acides (Heber *et al.*, 1999). Red yeast rice modestly decreased total and LDL cholesterol, was well-tolerated, and was an acceptable alternative in patients intolerant of other lipid lowering medications (Venero *et al.*, 2010).

Technical aspect

Red yeast rice is used as a flavoring and coloring agent, and to preserve the flavor and color of products such as fish, meat and fruit flavored yogurt, also pigments produced by the mold, Monascus purpureus, offer a possible alternative to certified food dyes or natural pigments now used (Erdoğrul *et al.*, 2004).

Garlic

The active ingredients of garlic (*Allium sativum*), allicin, and other sulfur compounds may act as HMG-CoA reductase inhibitors reducing the production of cholesterol in the liver (Isaacsohn *et al.*, 1998). Allicin may prevent the retention of LDL cholesterol by the body. Reported mechanisms include reduced hepatic HMG-CoA reductase activity and increased bile acid excretion (Warshafsky *et al.*, 1993). Table 2 summaries some studies done on cholesterol reducing effect of garlic.

 Table 2. Summaries some studies done on cholesterol reducing effect of garlic

Serving	Effect on LDL	Reference
Fresh garlic (1.5-3 g/d) for 2-6 month	lower cholesterol by 9%	(Warshafsky et al., 1993)
Garlic supplemented diets	inhibit the synthesis of cholesterol in the liver	(Yeh <i>et al.,</i> 2001)
Garlic (600-900 mg/d) for one-to-four month period	lower cholesterol by 9 to 12%	(Silagy <i>et al.</i> , 1994)

Green tea

Green tea is a popular beverage derived from the tea plant (*Camellia sinensis*). Based on the observations, it is likely that green tea or its catechins lower the absorption and tissue accumulation of other lipophilic organic compounds (Koo *et al.*, 2007). In another study, it observed that heat treated catechins high in gallocatechin gallate (GCG) and catechin gallate (CG) were more effective in inhibiting cholesterol absorption than a catechin mixture high in epigallocatechin gallate (EGCG) and epicatechin gallate (ECG), (Ikeda *et al.*, 2003). The teaflavin enriched green tea extract is an effective adjunct to a low saturated fat diet to reduce LDL in hypercholesterolemic adults (Maron *et al.*, 2003). *Technical Aspects*

Rong and Zhou (2004) added various types of tea exracts to bread with good success. Table 3 presents cholesterol reducing effect of other herbs.

Table	3.	Presents	cholesterol	reducing	effect	of	some
edible herbs							

edible heros				
Herb	Effect on LDL reduction	Reference		
Artichoke	limits synthesis of cholesterol	(Andrew, 2005)		
Wild yam	decreases in LDL, increases in HDL	(Ulbricht et al., 2003)		
Berberine	lower serum cholesterol levels	(Kong et al., 2004)		
Maitake	reduces cholesterol by increasing fat metabolism	(Fukushima et al., 2001)		
Guggul	reduces serum cholesterol	(Urizar et al., 2003)		
Fenugreek	reduces serum total cholesterol, triacylglyceride and LDL- cholesterol	(Moosa <i>et al.,</i> 2006)		

Nuts

Nuts include dietary fiber, plant sterols and phytochemicals. Nuts are high in fat, mainly monounsaturated fatty acids (MUFAs) and polyunsaturated fatty acids (PUFAs). The benefit of nuts has been attributed to their high level of PUFAs, a high polyunsaturated/saturated (P/S) ratio, and their high MUFA content (Mattson et al., 1985). Over the past several decades evidence has accumulated suggesting that dietary intake of saturated fatty acids (SFA) and trans fats increase cardiovascular risk, but MUFA and PUFA intake decrease risk. The changes in dietary fat intake that have been occurring since the 1970s have been a reduction in SFA and replacement of SFA with PUFA. The apparent protective effect of increasing the PUFA/SFA ratio supports these dietary changes in the prevention of CVD (Erkkilä et al., 2008).

Walnuts

Walnuts display a high fat content (62-68%), being rich in MUFA and PUFA (Tapsell *et al.*, 2009), fiber (5-10%), phytosterols, vitamins, niacin, antioxidants and other micronutrients (Olmedilla-Alonso *et al.*, 2006). Research shows that adding walnuts to diet decreases LDL levels comparing to diets without the supplement (Tapsell *et al.*, 2004).

Macadamia

Macadamia nuts contain substantial levels of plant sterols (1.28 mg/g lipid), which are shown to inhibit cholesterol absorption. Macadamia nuts as part of a healthy diet favorably altered the plasma lipid profile, despite an increase in the dietary fat content (Garg *et al.*, 2003).

Pistachio

Pistachio nuts significantly decrease in total cholesterol levels and total cholesterol/HDL and LDL/HDL ratios, and an increase in HDL levels (Kocyigit *et al.*, 2006). The substitution of pistachio nuts for other fat calories in the form of snacks for a consecutive three-weeks period can significantly improve the lipid profile in patients with moderate hypercholesterolemia. It seems that it was due to a change in MUFA content of the pistachio diet (Edwards *et al.*, 1999).

Almonds

Almonds can help lower cholesterol. The almonds fiber content is a dietary factor known to reduce cholesterol and its plant sterols, which may help to limit cholesterol absorption. The fatty acid composition is also a main factor that lowers LDL cholesterol and preserves HDL cholesterol (Agunbiade *et al.*, 2006).

Technical Aspects

Nuts are generally high in vitamin E and fiber, characteristics which would make them healthier alternatives to snack foods such as microwave popcorn, buttered popcorn, most candy bars, potato chips, etc.

Milk and dairy products

Dairy products are including fermented and none fermented. Studies strongly suggest that fermented milk (FM) have an important cholesterol lowering potential (Anderson et al., 1999). Fermented milk has been shown to cause an increase in human gut bacterial content. These bacteria, once resident in the large intestine, are believed to ferment food derived indigestible carbohydrates. Such fermentation causes increased production of short chain fatty acids, which decreases circulatory cholesterol concentrations either by inhibiting hepatic cholesterol synthesis or by redistributing cholesterol from plasma to the liver. Furthermore, increased bacterial activity in the large intestine results in enhanced bile acid deconjugation (St-Onge et al., 2000). The mechanism of action is probably that the bacteria deconjugate bile acids which, when deconjugated, coprecipitate with cholesterol at a pH <5.5. The liver will compensate for the loss of bile acids by converting cholesterol into new bile acids. This conversion might lower serum cholesterol levels (De Roos et al., 1999). Consumption of milk products containing Lactobacillus acidophilus has the potential for reasons of preventing or controlling intestinal infections, improving lactose digestion in persons classified as lactose maldigestors, helping

control serum cholesterol levels and exerting anticarcinogenic activity (Lye *et al.*, 2009). Results showed that lactobacilli were able to reduce cholesterol via conversion of cholesterol to coprostanol, aided by the ability of strains to produce cholesterol reductase. The strains studied may be potential health adjunct cultures in fermented dairy products with possible in vivo hypocholesterolemic effects (Lye *et al.*, 2010). Based on newer knowledge of "*L. acidophilus*", a single strain of the organism probably will not produce all these benefits at optimal levels. Careful selection of specific strains of "*L. acidophilus*" combined with proper production and handling procedures is necessary to ensure that desired benefits are provided to consumers (Gilliland, 1989).

Acidophilus milk

Factors influencing the efficacy of acidophilus milk to lower serum cholesterol are type of milk employed for product manufacture, age, sex, food habits and initial concentration of cholesterol of test subjects. Consumption of acidophilus milk as a dietary adjunct can be recommended (Sarkar, 2003). It was hypothesized that the higher level of immunoglobulin G (IgG) was responsible for the decline in cholesterol concentrations (St-Onge *et al.*, 2000). "*L. acidophilus*", being the natural inhabitant of intestine and possessing bile salt hydrolase activity, can be exploited during the manufacture of acidophilus milk and its application as a means for reducing cholesterol level is recommended (Sarkar, 2003).

Kefir

Kefir is another fermented dairy product that may decrease LDL content of blood. Results indicate that Kefir grains contains cholesterol degrading enzyme (Farnworth, 2005).

Sea products (Omega-3 fatty acids)

Omega-3 fatty acids (n-3 fatty acids or ω -3 fatty acids) are a family of unsaturated fatty acids. Omega-3 PUFA concentrates provide a useful alternative for the intake of required amount of fatty acids (Kapoor *et al.*, 2011). Because these essential fatty acids (EFAs) cannot be synthesized in the human body, they must be derived from dietary sources. Flaxseed, hemp, canola, and walnuts are generally rich sources of the omega-3 PUFA Alpha-Linolenic Acid (ALA). Fish provide varying amounts of omega-3 fatty acids in the form of docosahexaenoic acid (DHA) and eicosapentaenoic acid (EPA) (Logan, 2003).

Omega-3 fatty acids lower plasma triglyceride levels, particularly in persons with

hypertriglyceridemia, by inhibiting the synthesis of very-low-density lipoprotein (VLDL) cholesterol and triglycerides in the liver (Kapoor *et al.*, 2011). Omega-3 fatty acids has demonstrated an efficacy and safety in adult patients with high and very high triglycerides adjunct to diet, and the reduction in serum triglyceride levels was dependent on the baseline triglyceride levels (McKenney *et al.*, 2007). The FDA has concluded that dietary dosages of up to 3 g per day of omega-3 fatty acids from marine sources are GRAS. For persons who are vegetarians or non-fish eaters, a total daily intake of 1.5 to 3 g per day of ALA seems to be beneficial (Kris-Etherton *et al.*, 2002).

Technical Aspects

Due to high oxidization susceptibility and undesirable aroma of these fatty acids, enrichment of foods with those sources, has a negative effect on sensory properties of enriched foods. It has been shown that microencapsulation protects PUFAs against oxidation (Barrow *et al.*, 2009). This is a technology that involves coating or entrapping of material within a secondary material or system (Madene *et al.*, 2006). The pioneer in launching an omega-3-enriched milk was the Italian dairy company Parmalat. Its 'Plus Omega 3' milk was launched in 1998 and is a semiskimmed milk enriched with 80 mg omega-3. It is recommended for use by all healthconscious consumers in a dose of half a litre per day (Mellentin *et al.*, 1999).

Conclusion

Cholesterol is a blood fat needed by the body in moderate amounts. High level of cholesterol can lead to several diseases like as coronary artery disease, arthrosclerosis and heart attack. There are several foods that have been shown to reduce cholesterol level. Most studied lowering cholesterol foods are, foods containing plant sterols, stanols, soluble fibers and omega-3 fatty acids. During the past decade, enrichment of food products with functional ingredients is a major objective of food product developers. The market of this category of products has a big increasing rate. For example, the market of functional dairy products had a value of about 50 billion dollar in 2005 and has 8% increasing rate until 2010 (Market research 2008). Cholesterol lowering foods in combination with a healthy lifestyle are the most effective ways of lowering cholesterol level naturally.

References

- Agunbiade, S. O. and Olanlokun, J. O. 2006. Evaluation of some nutritional characteristics of indian almond (*Prunus amygdalus*) nut. Pakistan Journal of Nutrition 5 (4): 316-318.
- Anderson, J. W. and Gilliland, S. E. 1999. Effect of fermented milk (yogurt) containing *Lactobacillus acidophilus* L1 on serum cholesterol in hypercholesterolemic humans. Journal of the American College of Nutrition 18 (1): 43-50.
- Andrew, W. 2005. Hepatocytes by Artichoke (*Cynara scolymus*) extracts. Journal of Pharmacology and Experimental Therapeutics 286 (3): 1122-1128.
- Anon, Commission Regulation (EC) No.608/2004 of March 2004 concerning the labeling of foods and food ingredients with added phytosterols, phytosterols esters, and phytostanols and/or phytostanol esters. 2004.
- Barrow, C. J., Nolan, C. and Holub, B. J. 2009. Bioequivalence of encapsulated and microencapsulated fish oil supplementation. Journal of Functional Foods 1 (1): 38-43.
- Botham, K. M. and Mayes, P.A. 2009. Cholesterol synthesis, transport, and excretion. In Murray, R. K., Bender, D. A., Botham, K. M., Kennelly, P. J., Rodwell, V. W. and Weil, P. A. (Eds). Harper's illustrated biochemistry, p. 224-233. McGraw Hill Medical.
- Brown, L., Rosner, B., Willett, W. W. and Sacks, F. M. 1999. Cholesterol-lowering effects of dietary fiber: a meta-analysis. American Journal of Clinical Nutrition 69 (1): 30-42.
- Butt, M. S., Shahzadi, N., Sharif, M. K. and Nasir, M. 2007. Guar gum: a miracle therapy for hypercholesterolemia, hyperglycemia and obesity. Critical Reviews in Food Science and Nutrition 47 (4): 389-396.
- Clifton, P. M., Noakes, M., Sullivan, D., Erichsen, N., Ross, D., Annison, G., Fassoulakis, A., Cehun, M. and Nestel, P. 2004. Cholesterol lowering effects of plant sterol esters differ in milk, yoghurt, bread and cereal. European Journal of Clinical Nutrition 58: 503-509.
- Colpo, A. 2005. LDL Cholesterol: "Bad" Cholesterol, or Bad Science? Journal of American Physicians and Surgeons 10 (3): 83-89.
- Davidson, M. H., Dugan, L. D., Burns, J. H., Sugimoto, D., Story, K. and Drennan, K. 1996. A psyllium enriched cereal for the treatment of hypercholesterolemia in children: a controlled, double-blind, crossover study. American Journal of Clinical Nutrition 63 (1): 96-102.
- De Jong, N., Ros, M. M., Ocké, M. C. and Verhagen, H. 2008. A general postlaunch monitoring framework for functional foods tested with the phytosterol/-stanol case. Trends in Food Science & Technology 19: 535-545.
- Demonty, I., Ras, R. T., van der Knaap, H. C. M., Duchateau, G. S. M. J. E., Meijer, L., Zock, P. L., Geleijnse, J. M. and Trautwein, E. A. 2009. Continuous dose-response relationship of the LDL-cholesterol-lowering effect of

phytosterol intake. Journal of Nutrition 139 (2): 271-284.

- De Roos, N. M., Schouten, G. and Katan, M. B. 1999. Yoghurt enriched with Lactobacillus acidophilus does not lower blood lipids in healthy men and women with normal to borderline high serum cholesterol levels. European Journal of Clinical Nutrition 53 (4): 277-280.
- Edwards, K., Kwaw, I., Matud, J. and Kurtz, I. 1999. Effect of pistachio nuts on serum lipid levels in patients with moderate hypercholesterolemia. Journal of the American College of Nutrition 18: 229-232.
- Erdoğrul, Ö. and Azirak, S. 2004. Review of the studies on the red yeast rice (*Monascus purpureus*). Turkish Electronic Journal of Biotechnology 2 (5): 37-49.
- Erkkilä, A., de Mello, V. D. F., Risérus, U. and Laaksonen, D. E. 2008. Dietary fatty acids and cardiovascular disease: An epidemiological approach. Progress in Lipid Research 47 (3): 172–187.
- Farnworth, E. R. 2005. Kefir-a complex probiotic. Food Science and Technology Bulletin: Functional Foods 2 (1): 1-17.
- Fernandez, M. L., Ruiz, L. R., Conde, A. K., Sun, D. M., Erickson, S. K. and McNamara, D. J. 1995. Psyllium reduces plasma LDL in guinea pigs by altering hepatic cholesterol homeostasis. Journal of Lipid Research 36: 1128-1138.
- Fukushima, M., Ohashi, T., Fujiwara, Y., Sonoyama, K. and Nakano, M. 2001. Cholesterol-lowering effects of Maitake (*Grifola frondosa*) fiber, Shiitake (*Lentinus edodes*) fiber, and Enokitake (*Flammulina velutipes*) fiber in rats. Experimental Biology and Medicine 226 (8): 758-765.
- Garg, M. L., Blake, R. J. and Wills, R. B. H. 2003. Macadamia nut consumption lowers plasma total and LDL cholesterol levels in hypercholesterolemic men. Journal of Nutrition 133: 1060-1063.
- Gilliland, S. E. 1989. Acidophilus milk products: a review of potential benefits to consumers. Journal of Dairy Science 72: 2483-2494.
- Glore, S. R., Van Treeck, D., Knehans, A. W. and Guild, M. 1994. Soluble fiber and serum lipids: a literature review. Journal of the American Dietetic Association 94 (4): 425-436.
- Guo, Q., Cui, S. W., Wang, Q., Goff, H. D. and Smith, A. 2009. Microstructure and rheological properties of psyllium polysaccharide gel. Food Hydrocolloids 23 (6): 1542-1547.
- Hansel, B., Nicolle, C., Lalanne, F., Tondu, F., Lassel, T., Donazzolo, Y., Ferrieres, J., Krempf, M., Schlienger, J. L., Verges, B., Chapman, M. J. and Bruckert, E. 2007. Effect of low-fat, fermented milk enriched with plant sterols on serum lipid profile and oxidative stress in moderate hypercholesterolemia. American Journal of Clinical Nutrition 86: 790-796.
- Heber, D., Yip, I., Ashley, J. M., Elashoff, D. A., Elashoff, R. M. and Go, V. L. 1999. Cholesterol- lowering effects of a proprietary Chinese red-yeast-rice dietary supplement. American Journal of Clinical Nutrition 69 (2): 231-236.

- Ikeda, I., Kobayashi, M., Hamada, T., Tsuda, K., Goto, H., Iamizumi, K., Nozawa, A., Sugimoto, A. and Kakuda, T. 2003. Heat-epimerized tea catechins rich in gallocatechin gallate and catechin gallate are more effective to inhibit cholesterol absorption than tea catechins rich in epigallocatechin gallate and epicatechin gallate. Journal of Agricultural and Food Chemistry 51 (25): 7303-7307.
- Isaacsohn, J. L., Moser, M., Stein, E. A., Dudley, K., Davey, J. A., Liskov, E. and Black, H. R. 1998. Garlic powder and plasma lipids and lipoproteins: a multicenter, randomized, placebo-controlled trial. Archives of Internal Medicine 158 (11): 1189-1194.
- James, I. C. and Claude, L. 1998. The national cholesterol education program: progress and prospects. Journal of American Medical Association 280 (24): 2099-2104.
- Jones, P. L. and AbuMweis, S. S. 2009. Phytosterols as functional food ingredients: linkages to cardiovascular disease and cancer. Current Opinion in Clinical Nutrition and Metabolic Care 12 (2): 147-151.
- Kapoor, R. and Patil, U. K. 2011. Importance and production of omega-3 fatty acids from natural sources. International Food Research Journal 18: 491-497.
- Katan, M. B., Grundy, S. M., Jones, P., Law, M., Miettinen, T. and Paoletti, R. 2003. Efficacy and safety of plant stanols and sterols in the management of blood cholesterol levels. Mayo Clinic Proceedings 78: 965-978.
- Kelley, J. J. and Tsai, A. C. 1978. Effect of pectin, gum arabic and agar on cholesterol absorption, synthesis, and turnover in rats. The Journal of Nutrition. 630-639.
- Kocyigit, A., Koylu, A. A. and Keles, H. 2006. Effects of pistachio nuts consumption on plasma lipid profile and oxidative status in healthy volunteers. Nutrition, Metabolism & Cardiovascular Diseases 16 (3): 202-209.
- Kong, W., Wei, J., Abidi, P., Lin, M., Inaba, S., Li, C., Wang,
 Y., Wang, Z., Si, S., Pan, H., Wang, S., Wu, J., Wang,
 Y., Li, Z., Liu, J. and Jiang, J. D. 2004. Berberine is
 a novel cholesterol-lowering drug working through
 a unique mechanism distinct from statins. Nature
 Medicine 10 (12): 1344-1351.
- Koo, S. I. and Noh, S. K. 2007. Green tea as inhibitor of the intestinal absorption of lipids: potential mechanism for its lipid-lowering effect. Journal of Nutritional Biochemistry 18 (3): 179-183.
- Kris-Etherton, P. M., Harris, W. S. and Appel, L. J. 2002. For the Nutrition Committee. AHA Scientific Statement: Fish consumption, fish oil, omega-3 fatty acids and cardiovascular disease. Circulation 106: 2747–2757.
- Logan, A. C. 2003. Neurobehavioral aspects of omega-3 fatty acids: possible mechanisms and therapeutic value in major depression. Alternative Medicine Review 8 (4): 410-425.
- Lye, H-S., Kuan, C-Y., Ewe, J-A., Fung, W-Y. and Liong, M-T. 2009. The improvement of hypertension by probiotics: effects on cholesterol, diabetes, renin, and phytoestrogens. International Journal of Molecular

Science 10 (9): 3755-3775.

- Lye, H.-S., Rusul, G. and Liong, M.-T. 2010. Removal of cholesterol by lactobacilli via incorporation and conversion to coprostanol. Journal of Dairy Science 93 (4): 1383-1392.
- Madene, A., Jacquot, M., Scher, J. and Desobry, S. 2006. Flavour encapsulation and controlled release - A review. International Journal of Food Science and Technology 41 (1): 1-21.
- Malcolm, R. 2000. Plant sterol and stanol margarines and health. Journal of Medicine 173 (1): 43-47.
- Market research. 2008. Global Market Review of Functional Foods -Forecasts to 2013. Market Research. USA. 77p.
- Maron, D. J., Lu, G. P., Cai, N. S., Wu, Z. G., Li, Y. H., Chen, H., Zhu, J. Q., Jin, X. J., Wouters, B. C. and Zhao, J. 2003. Cholesterol lowering effect of a teaflavin enriched green tea extract: a randomized controlled trial. Archives of Internal Medicine 163 (12): 1448-1453.
- Mattson, F. H. and Grundy, S. M. 1985. Comparison of effects of dietary saturated, monounsaturated and polyunsaturated fatty acids on plasma lipids and lipoproteins in man. Journal of Lipid Research 26 (2): 194-202.
- Mellentin, J. and Heasman, M. 1999. Functional foods are dead. long live functional foods. NNB 4 (7): 16–19.
- Mensink, R. P. and Katan, M. B. 1992. Effect of dietary fatty acids on serum lipids and lipoproteins. A metaanalysis of 27 trials. Arterioscler Thromb 12: 911-919.
- McKenney, J. M. and Sica, D. 2007. Prescription omega-3 fatty acids for the treatment of hypertriglyceridemia. American Journal of Health-System Pharmacy 64 (6): 595-605.
- Micallef, M. A. and Garg, M. L. 2008. The lipid-lowering effects of phytosterols and (n-3) polyunsaturated fatty acids are synergistic and complementary in hyperlipidemic men and women. Journal of Nutrition 138 (6): 1086-1090.
- Moghadasian, M. H. and Frohlich, J. J. 1999. Effects of dietary phytosterols on cholesterol metabolism and atherosclerosis: clinical and experimental evidence. American Journal of Medicine 107 (6): 588-594.
- Moosa, A. S. M., Ur Rashid, M., Asadi, A. Z. S., Ara, N., Uddin, M. M. and Ferdaus, A. 2006. Hypolipidemic effects of fenugreek seed powder. Bangladesh Journal Pharmacology 1: 64-67.
- Naumann, E., van Rees, A. B., Onning, G., Oste, R., Wydra, M. and Mensink, R. P. 2006. Beta-glucan incorporated into a fruit drink effectively lowers serum LDL-cholesterol concentrations. American Journal of Clinical Nutrition 83 (3): 601-605.
- Noakes, M., Clifton, P. M., Doornbos, A. M. E. and Trautwein, E. A. 2005. Plant sterol ester enriched milk and yogurt effectively reduce serum cholesterol in modestly hypercholerolemic subjects. European Journal of Nutrition 44 (4): 214-222.
- Normén, L., Frohlich, J. and Trautwein, E. 2003. The role of plant sterols in cholesterol lowering. In Dutta, P.

C. (Ed), Phytosterols as functional food components and nutraceuticals, p. 256-260. New York: Marcel and Dekker, Inc.

- Olmedilla-Alonso, B., Granado-Lorencio, F., Herrero-Barbudo, C. and Blanco-Navarro, I. 2006. Nutritional approach for designing meat-based functional food products with nuts. Critical Reviews in Food Science and Nutrition 46 (7): 537-542.
- Ostlund, R. E. 2002. Phytosterols in human nutrition. Annual Review of Nutrition 22: 533-549.
- Pszczola, D. E. 2003. Plot thickens, as gums: add special effects. Food Technology 57 (12): 34-47.
- Quilez, J., Garcia-Lorda, P. and Salas-Salvado, J. 2003. Potential uses and benefits of phytosterols in diet: present situation and future directions. Clinical Nutrition 22 (4): 343-351.
- Richelle, M., Enslen, M., Hager, C., Groux, M., Tavazzi,
 I., Godin, J. P., Berger, A., Métairon, S., Quaile,
 S., Piguet-Welsch, C., Sagalowicz, L., Green,
 H. and Fay, L. B. 2004. Both free and esterified plant sterols reduce cholesterol absorption and the bioavailability of beta-carotene and alpha-tocopherol in normocholesterolemic humans. American Journal of Clinical Nutrition 80 (1): 171-177.
- Rong, W. and Zhou, W. 2004. Stability of tea catechins in the bread making process. Journal of Agricultural and Food Chemistry 52 (26): 8224-8229.
- Saikia, D. and Deka, S. C. 2011. Cereals: from staple food to nutraceuticals. International Food Research Journal 18: 21-30.
- Sarkar, S. 2003. Potential of acidophilus milk to lower cholesterol. Nutrition and Food Science 33 (6): 273-277.
- Sheu, F., Wang, C. L. and Shyu, Y. T. 2000. Fermentation of *Monascus purpureus* on bacterial cellulose-nata and the color stability of Monascus-nata complex. Food Microbiology and Safety 65 (2): 342-345.
- Silagy, C. and Neil, A. 1994. Garlic as a lipid-lowering agent-a meta-analysis. Journal of the Royal College of Physicians of London 28 (1): 39-45.
- Smith, L. L. 1991. Another cholesterol hypothesis: cholesterol as antioxidant. Free Radical Biology and Medicine 11 (1): 47-61.
- St-Onge, M-P., Franworth, E. R. and Jones, P. J. H. 2000. Consumption of fermented and nonfermented dairy products: effects on cholesterol concentrations and metabolism. The American Journal of Clinical Nutrition 71 (3): 674-681.
- Tapsell, L. C., Gillen, L. J., Patch, C. S., Batterham, M., Owen, A., Baré, M. and Kennedy, M. 2004. Including walnuts in a low-fat/modified-fat diet improves HDL cholesterol-to-total cholesterol ratios in patients with type 2 diabetes. Diabetes Care 27 (12): 2777-2783.
- Tapsell, L. C., Batterham, M. J., Teuss, G., Tan, S. Y., Dalton, S., Quick, C. J., Gillen, L. J. and Charlton, K. E. 2009. Long-term effects of increased dietary polyunsaturated fat from walnuts on metabolic parameters in type II diabetes. European Journal of Clinical Nutrition 63 (8): 1008-1015.
- Thakur, B. R., Singh, R. K. and Handa, A. K. 1997.

Chemistry and uses of pectin- a review. Critical Reviews in Food Science and Nutrition 37 (1): 47-73.

- Thompson Coon, J. S. and Ernst, E. 2003. Herbs for serum cholesterol reduction. A systematic view. Journal of Family Practice 52 (6): 468-478.
- Ulbricht, C., Basch, E., Sollars, D., Hammerness, P. and Hashmi, S. 2003. Wild yam (*Dioscoreaceae*). Journal of Herbal Pharmacotherapy 3 (4): 77-91.
- Urizar, N. L. and Moore, D. D. 2003. Gugu lipid: A natural cholesterol lowering agent. Annual Review of Nutrition 23: 303-313.
- Van Rosendaal, G. M., Shaffer, E. A., Edwards, A. L. and Brant, R. 2004. Effect of time of administration on cholesterol-lowering by psyllium: a randomized cross-over study in normocholesterolemic or slightly hypercholesterolemic subjects. Journal of Nutrition 28: 17.
- Venero, C. V., Venero, J. V., Wortham, D. C. and Thompson, P. D. 2010. Lipid-lowering efficacy of red yeast rice in a population intolerant to statins. American Journal of Cardiology 105 (5): 664-666.
- Warshafsky, S., Kamer, R. S. and Sivak, S. L. 1993. Effect of garlic on total serum cholesterol: A meta-analysis. Annals of Internal Medicine 119: 599-605.
- Worrasinchai, S., Suphantharika, M., Pinjai, S. and Jamnong, P. 2006. β-Glucan prepared from spent brewer's yeast as a fat replacer in mayonnaise. Food Hydrocolloids 20 (1): 68-78.
- Yeh, Y. Y. and Liu, L. 2001. Cholesterol-lowering effect of garlic extracts and organosulfur compounds: human and animal studies. Journal of Nutrition 131: 989S-993S.
- Yokoyama, W. H. 2004. Plasma LDL cholesterol lowering by plant phytosterols in a hamster model. Trends in Food Science and Technology 15 (11): 528-531.
- Zandonadi, R. P., Botelho, R. B. A. and Araújo, W. M. C. 2009. Psyllium as a substitute for gluten in bread. Journal of the American Dietetic Association 109 (10): 1781-1784.