

● Imitation Milk
(Continued from Page 1)

ed upon to replace milk in the diets of children."

Coconut Oil
From a nutritional standpoint, there are differences between the fat in milk and the fat in coconut oil. Coconut oil is a highly saturated vegetable fat. This is important because of the manner in which these filled and imitation products are being promoted. As an example, many cartons of imitation products have on their side panels or in the advertising surrounding these products such statements as: "Contains no animal fat" — "Cholesterol free" — "No butterfat" — "Perfect for anyone on a low cholesterol diet."

This type of advertising is used, of course, to capitalize upon the confusion surrounding

the diet-heart disease controversy. While these statements are true, since a vegetable fat is indeed used, they are misleading to the health profession and to the consumer, because scientific reports show that coconut oil produces a high blood cholesterol level. Furthermore, it should be made unmistakably clear that although it is possible to lower serum cholesterol by changes in dietary fat, the value of such changes in preventing coronary heart disease has not been scientifically proven.

In addition to being misleading, advertising claims of this nature also raise unfounded doubts about the health benefits of butterfat to the consumer. Recent research has demonstrated that only certain saturated fatty acids are believed to raise blood cholesterol levels. These same fatty acids appear

in vegetable fats, including the so-called "polyunsaturated," as well as in butterfat. Since these fatty acids comprise only a fraction of butterfat, and since most market milk is 3.5% or less in fat, these fatty acids do not enter the diet in significant amounts from whole milk. Other research has shown that whole milk is no more responsible for elevating blood cholesterol than is the average American diet, and, not more so as claimed by many groups.

Coconut oil contains very little, if any, linoleic acid. This fatty acid is an essential nutrient, and is a matter of particular concern from the standpoint of infant nutrition. A deficiency of linoleic acid produces skin lesions as well as other symptoms. A diet consisting solely of coconut oil (presently most used fat ingredient of artificial milk) as a source of fat is routinely used in producing a linoleic acid deficiency in laboratory studies with rats.

There is very little clinical data on the suitability of using coconut oil in the diet of infants and children. In one study, a coconut oil formula was compared with evaporated milk in the diet of infants. The coconut oil formula was poorly tolerated by the infants; their weight gains were lower than with evaporated milk, and they developed diarrhea.

On January 17, 1968, National Dairy Council called together six leading nutritional authorities to obtain their opinion concerning the nutritional evaluation of some of the filled and imitation products appearing on the market today.

This group agreed unanimously that:

1. The imitation milks and certain of the filled milks as formulated today are unsuitable

for infants and children. One pediatrician said these products constitute a hazard for infants up to 6 months of age. However, another pediatrician extended this for children up to at least age 12.

2. These products were judged unsuitable not only from the standpoint of low content of protein, essential amino acids

and minerals, but also because of the type of fat used, namely, coconut oil.

3. These products were also judged to be potentially harmful for other vulnerable age groups such as pregnant and lactating women, and persons on marginal diets such as those in low income groups and the aged.



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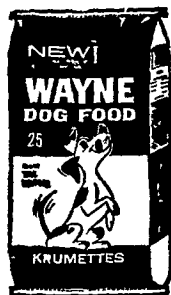
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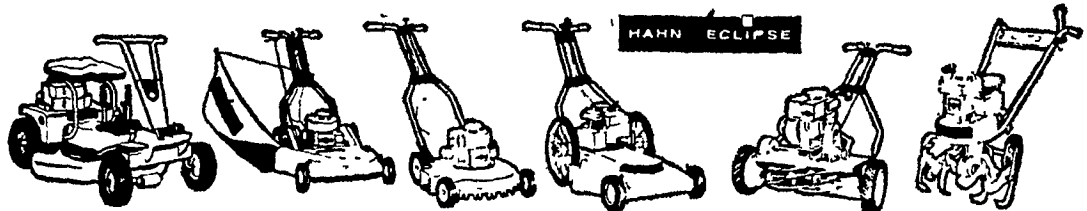


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