

Fettsnål/kolhydratrik kost, missfall och sterilitet

Forskare börjar nu misstänka att den fettsnåla kosten också bidrar till missfall och sterilitet. En följd av denna kost är att insulinregleringen kan komma i olag p g a att de kalorier, som fett egentligen skulle bidragit med, ersätts med kalorier från kolhydrater - ofta "snabba" kolhydrater - som snabbt frisätts som socker i blodet. Då överreagerar insulinregleringen och detta leder till alltför lågt blodsocker och då kommer hungern tillbaka, trots att vi nyss har ätit. Många forskare anser att det är detta som är den kanske viktigaste orsaken till övervikt och fetma i vårt samhälle, samt sjukdomar som kan relateras till detta.

En sådan följd är insulinresistens, som nu sätts i samband med missfall och sterilitet. Just insulinresistens är den underliggande orsaken till PCOS (Polycystic Ovary Syndrome) och insulinresistensen utlöser många hormonella störningar. Det är väl känt att PCOS har samband med infertilitet, att utveckla androgyna egenskaper samt missfall.

Från den diskussion som förs mellan forskare vill jag föra fram följande:

"It is a well known connection. Metformin and a low carbohydrate diet helps a lot in PCOS and improves fertility, this has both been published and it is also our clinical experience, since we treat a lot of PCOS women in our metabolic clinic with very good results. However the article mentioned below is not about PCOS women necessarily but women with insulin resistance in general, although the abstract does not mention whether women were actually tested for this condition.

"Pregnancy is a state of naturally occurring insulin resistance (but worsened by obesity, inactivity and wrong food choices), due to placental hormones and the degree of insulin resistance increases towards the end of pregnancy. This is a natural mechanism that allows all pregnant mammals to shift towards higher energy sparing and fat accumulation, in order to manage the increased energy needs of the embryos and lactation period post partum. Pregnant mammals are less mobile and able to hunt or gather food towards the end of pregnancy, and thus reduce their energy intake despite the fact that their energy needs are increased. It is in particular the high secretion of placental steroids that affects carbohydrate metabolism and induces insulin resistance and increased fat storage.

The problem in the industrialized world is that pregnant women continue having unlimited access to detrimental foods such as high glycemic carbohydrates (which displace the intake of both protein and essential fatty acids), not to mention sugar containing soda. Since insulin resistance is higher in pregnancy, carbohydrate tolerance is reduced, which explains the high and increasing incidence of gestational diabetes and preeclampsia in industrialized countries. A Norwegian Physician, Torunn Clausen just defended her doctorate these days on the connection between sugar and preeclampsia*. Unfortunately she only looked at sucrose and not at the total glycemic load of the womens' diet."

* Preeclampsia = Havandeskapsförgiftning

NEW YORK (Reuters Health) Sept 17 - Insulin resistance appears to be a risk factor for recurrent miscarriage, researchers report in the September issue of Fertility and Sterility.

Dr. William Kutteh, of the University of Tennessee at Memphis, and colleagues compared 74 women who experienced two or more consecutive pregnancy losses with 74 fertile, nonpregnant women who had borne at least one child.

Fasting insulin and glucose levels were measured in both groups. Dr. Kutteh's team defined insulin resistance as a fasting insulin level of at least 20 microunits/ml or a fasting insulin-to-glucose ratio of less than 4.5.

Overall, 27% of women with miscarriages had insulin resistance compared with 9.5% of controls, for an odds ratio of 3.55 ($p = 0.01$) for recurrent pregnancy loss with insulin resistance. Fasting insulin levels were significantly higher in the study group compared with controls.

A possible reason for recurrent miscarriage with insulin resistance is that high insulin levels are associated with changes in plasminogen activator inhibitor-1 (PAI-1), which is involved in maintaining normal coagulation in the clotting cascade, Dr. Kutteh told Reuters Health.

"Altered [PAI-1] levels may predispose an individual to microemboli, especially in the developing placenta, causing a decrease in essential nutrients for fetal survival," Dr. Kutteh added.

While management of insulin resistance is not well understood, "weight loss is absolutely essential," he said. "This cannot be overemphasized," he added. "One report using metformin (Glucophage) has demonstrated a decreased pregnancy loss rate in treated women with insulin resistance. Others are attempting to repeat these studies."

Fertil Steril 2002;78:487-490.

Min kommentar: Man måste ställa sig frågan om inte denna oförmåga hos våra myndigheter - att i sina kostråd snarast frångå de förlegade och grundlösa teorierna om den fettsnåla kostens positiva effekter - leder till orimliga konsekvenser för hälsan i det svenska samhället?

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