American Heart Association guidelines should include fat distribution Tulane-led study says

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Dr. Lu Qi is director of the Tulane University Obesity Research Center and professor of epidemiology at Tulane's School of Public Health and Tropical Medicine.

The seven metrics used by the American Heart Association to predict a person's risk of heart disease and stroke don't do enough to measure cardiovascular health because they fail to take into account the significance of where a person carries excess fat on their body, according to a new study.

A team headed by Dr. Lu Qi, director of the Tulane University Obesity Research Center and professor of epidemiology at Tulane's School of Public Health and Tropical Medicine, proposes a revised set of guidelines, which researchers believe can better predict the rate of death from all causes, as well as cardiovascular disease mortality.

"People who carry more fat around the waist are more likely to suffer from cardiovascular disease," Qi says. "The AHA guidelines should better reflect the distribution of body fat as an indicator of overall health."

The American Heart Association relies on Life's Simple 7 (LS7) metrics to assess and promote cardiovascular health. The guidelines list blood pressure, cholesterol and blood glucose levels, along with activity level, diet, weight and tobacco use as the seven most important predictors of heart health.

However, a growing amount of research has found that when it comes to weight, two people may have the same body mass index but where they carry their body fat may have the biggest implications on their overall health.

The current American Heart Association metrics also use an old version of the Healthy Eating Index, which uses a scoring system to evaluate foods and measure overall diet quality. The index was updated in 2015, while the association's LS7 metrics have not been revised. Recommendations for healthy blood pressures have also been updated in recent years, and Qi says the LS7 metrics should reflect that.

The research team used the health statistics of more than 13,000 adults surveyed as part of the U.S. National Health and Nutrition Examinations Surveys from 1988 to 2016 to estimate national trends. They found study participants who were younger, female, more educated, more likely to be non-Hispanic white, and less likely to consume alcohol were less likely to have the indicators of cardiovascular disease, cancer or all-cause mortality; though few US adults met 6 to 7 ideal revised LS7 metrics.

The **<u>new LS7 recommendations</u>** from the Tulane-led study are published on JAMA Network Open.