Table 1: Summary of studies that examined the effects of decreasing dietary saturated fat together with increasing n-6 fatty acids on apoB-100 metabolism

Ref	Authors (Year)	Tracer	Subjects (N)	Diet	Study Findings
31	Cortese *et al* (1983)	RI	Mild to moderate hypercholesterolemia and/or hypertriglyceridemia (6 men, 6 women)	Low fat (25% of energy), 340 mg/day cholesterol *vs.* High fat (45% of energy), 340 mg/day cholesterol *3 – 4 weeks intervention	↓ 20% LDL-apoB-100 PR ↑ 15% LDL-apoB-100 FCR ↔ VLDL-apoB-100 PR or FCR
				High n-6 PUFA (P:S ratio 0.12), 365 mg/day cholesterol *vs.* Low n-6 PUFA (P:S ratio 3.8), 365 mg/day cholesterol *In both diets, 45% of energy as fat *4 weeks intervention	↓ 23% LDL-apoB-100 PR ↓ 31% VLDL-apoB-100 PR ↔ VLDL or LDL-apoB-100 FCR
32	Shepherd *et al* (1980)	RI	Healthy normolipidemic (8 men)	High n-6 PUFA (P:S ratio 4.0), 400 mg/day cholesterol *vs.*	↑ 9% LDL-apoB-100 FCR ↔ LDL-apoB-100 PR

				Low n-6 PUFA (P:S ratio 0.25), 400 mg/day cholesterol *In both diets, 40% of energy as fat * 5 weeks intervention	
33	Turner *et al* (1981)	RI	5 normolipidemic. 6 FH 2 FCH 2 FHTG (8 men, 7 women) Analysis performed based on high vs. low LDL cholesterol	High n-6 PUFA (P:S ratio 8.0), <150 mg/day cholesterol (except 2 subjects; 210 and 240 mg/day) *vs.* Low n-6 PUFA (P:S ratio 0.2), <150 mg/day cholesterol (except 2 subjects; 210 and 240 mg/day) *In both diets, 40% of energy as fat * 7 – 9 weeks intervention	In 7 “low LDL cholesterol” men ↓ 10% LDL-apoB-100 PR ↔ LDL-apoB-100 FCR In 8 “high LDL cholesterol” men and women ↓ 25% LDL-apoB-100 PR ↑ 17% LDL-apoB-100 FCR

FCH: familial combine hyperlipidemia; FCR: fractional catabolic rate; FH: familial hypercholesterolemia; FHTG: familial hypertriglyceridemia; PR: production rate; PUFA: polyunsaturated fatty acids; P:S ratio: polyunsaturated to saturated fatty acid ratio; RI: radioisotope