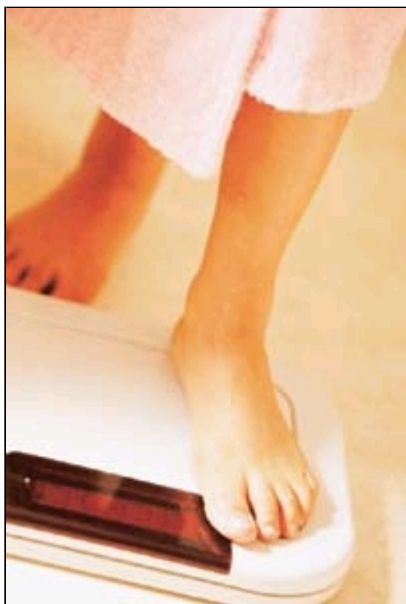


Q&A

CLA

How and when to take it

Q I purchased a bottle of CLA (1000 mg) to help manage my weight. But the dosage recommendation for the product is not consistent. In one instance it states that they should all be taken at once, on an empty stomach. While in another place it states: to be taken with food, in divided doses, and should be taken early in the day. Why early in the day and what does that mean?



A The recommended dosage for CLA based on studies is to take between three and four softgels daily. The Foundation has been offering CLA for a few years now and has been receiving feedback from our members, which provided us with more information, hence the additional dosing recommendations. For example, a few people claimed that if they took CLA close to bedtime they couldn't fall asleep easily. That is why the recommendation states, "take early in the day." However, you can experiment and see how your body reacts. Most people can take CLA after a late dinner and have no problems sleeping.

If you take CLA with fiber, high amounts can absorb some of the CLA, so we have recently added the recommendation to avoid taking CLA with fiber supplements or high fiber meals. Whole fruits and vegetables are fine; this recommendation pertains to very high fiber foods, such as specialty cereals. The best thing to do is to take the CLA an hour or so after a high fiber meal or supplements.

In reference to how much CLA to take at one time and whether or not it should be taken with meals, that depends on how your body reacts. A few people experience nausea or diarrhea taking an oil-based supplement without food, but the vast majority have no problem. In fact, some people find taking one to three or four softgels of CLA one half hour before meals helps them become satisfied faster and as a result consume less calories. Please keep in mind that there are no hard and fast rules for taking CLA except that you should take at least

three softgels daily (consistency is important) and avoid taking it with fiber supplements or very high fiber foods. The other dosing recommendations depend upon your individual system and diet.

Q I have been using Perilla oil for several months for cholesterol management. I understand that GLA/DHA and Perilla oil are forms of linolenic acid. I am wondering if I should use Super GLA/DHA instead of Perilla oil. Can you please tell me the difference between the two?

A Perilla oil provides the same omega-3 essential fatty acids as flax seed oil. By supplying an abundance of alpha-linolenic acid, Perilla oil provides the body with the precursor to the beneficial EPA and DHA fatty acids found in fish oil. Perilla oil is recommended to those who cannot tolerate fish oil due to gastrointestinal side effects. The Super GLA/DHA contains EPA and DHA from fish oil, but the main difference is that it also contains gamma linolenic acid (GLA) while Perilla oil only contains alpha linolenic acid. To obtain optimum benefits from fatty acids, they are best taken in a specific balance.

The reason why people over age 50 should consider using a supplement like Super GLA/DHA or high-potency fish oil and borage oils is that these products directly provide the body with EPA, DHA and GLA. When Perilla or flax oil is consumed it requires the enzyme delta-6 desaturase to convert the alpha linolenic acid into EPA and DHA in the body. Over age 50, many people are deficient in this enzyme, so they do not convert as much of the alpha linolenic acid in Perilla and flax oils into critically important EPA and DHA. The delta-6 desaturase enzyme is also used to convert linoleic acid into gamma linolenic acid (GLA). So the advantage of using a supplement like Super GLA/DHA is that it directly provides GLA, DHA and EPA. Perilla and flax oils, on the other hand, require the presence of enzymes to convert alpha linolenic acid to these life-supporting fatty acids.

You can read more about this in the July 2001 Life Extension magazine article entitled "Fats For Life." Recent research has discovered the benefits of two specific acids, GLA and DHA, and pointed to an ideal balance between them that could guard against disease and age-related disorders. These key fatty acids help lower blood pressure and protect the cardiovascular system by raising good (HDL) cholesterol while lowering bad (LDL) cholesterol and triglyceride levels [van Jaarsveld et al., 1997].

Q I have been drinking about a cup of soymilk daily and eating other soy products. I suffered from severe lower back pain, and a medically trained friend suggested that it might have been kidney stones, which runs in my family. One of the health newsletters I receive was quite adamant that soy foods could cause kidney stones. My intake of calcium is good (excellent bone density scan recently). Are there studies linking soy with kidney stones?

A Oxalate is any salt or ester of oxalic acid capable of forming an insoluble salt with calcium, interfering with its absorption by the body, and may precipitate to form kidney stones. One study found the seeds from 11 cultivars of soybean showed relatively high oxalate levels. This study indicated that the amount of oxalate found in soy foods might be too high for someone with a history of kidney stones [J Agric Food Chem. 2001 Sep;49 (9):4262-6]. Since this problem runs in your family, you might wish to cut back on your soy food consumption. Keep in mind that the problem with oxalate pertains to soy foods, not soy isoflavone extract supplements. You can still obtain the benefits of soy by taking a high potency soy extract, like Mega Soy. For more information on Mega Soy, go to www.lef.org. Finally, it may be a good idea to confirm the cause of your back pain by consulting your physician.



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