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Weight loss associated with low-energy diets with different glycaemic loads does not improve arterial stiffness: a randomised clinical trial

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Abstract

We evaluated the effects of two low-energy diets with different glycaemic loads on arterial stiffness in adults with excess weight. This was a 45-day parallel-group, randomised clinical trial including seventy-five participants (20–59 years; BMI 32 kg/m²). They were assigned to two similar low-energy diets (reduction of ~750 kcal.d⁻¹) with macronutrient composition (55 % carbohydrates, 20 % proteins and 25 % lipids) but different glycaemic loads: high-glycaemic load (HGL 171 g.d⁻¹; n 36) or low-glycaemic load (LGL 67 g.d⁻¹; n 39). We evaluated: arterial stiffness (pulse wave velocity, PWV); augmentation index (AIx@75); reflection coefficient; fasting blood glucose; fasting lipid profile; blood pressure and body composition. We found no improvements in PWV ($P = 0.690$) and AIx@75 ($P = 0.083$) in both diet groups, but there was a decrease in the reflection coefficient in the LGL group ($P = 0.003$) compared with baseline. The LGL diet group showed reductions in body weight ($\Delta -4.9$ kg; $P = 0.001$), BMI ($\Delta -1.6$ kg/m²; $P = 0.001$), waist circumference ($\Delta -3.1$ cm; $P = 0.001$), body fat ($\Delta -1.8$ %; $P = 0.034$), as well as TAG ($\Delta -14.7$ mg/dl; $P = 0.016$) and VLDL ($\Delta -2.8$ mg/dl; $P = 0.020$). The HGL diet group showed a reduction in total cholesterol ($\Delta -14.6$ mg/dl; $P = 0.001$), LDL ($\Delta -9.3$ mg/dl; $P = 0.029$) but a reduction in HDL ($\Delta -3.7$ mg/dl; $P = 0.002$). In conclusion, a 45-day intervention with low-energy HGL or LGL diets in adults with excess weight was not effective to improve arterial stiffness. However, the LGL diet intervention was associated with a reduction of reflection coefficient and improvements in body composition, TAG and VLDL levels.

Keywords

Glycaemic index

Glycaemic load

Overweight

Obesity

Pulse wave velocity

Type

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