



## Position Statement On

### Wholefood Plant Based Diets

The Complete Health Improvement Program (CHIP) recommends adopting a wholefood plant-based eating pattern for optimal health. This position statement discusses the reasons for this recommendation.

#### Key messages

- *Plant-based dietary patterns have been associated with many health benefits*
- *Participants with the greatest need of clinical improvement are advised to make the change*
- *CHIP educates participants about the relationship between diet and lifestyle*

#### Wholefood Plant Based Diets

Plant-based dietary patterns, including Mediterranean type diets, have been associated with many health benefits, including increased longevity (1,2), sustained weight loss (3,4), reduced blood cholesterol (3-5), reductions in blood pressure, and the prevention and reversal of chronic diseases (*see Position Statement on Disease Reversal*). Evidence also points towards the benefits of plant-based diets in the treatment of acid reflux (6), constipation (7), haemorrhoids (8), diverticulosis (7), asthma (9) and kidney disease (10).

Diets high in animal foods tend to be associated with higher rates of non-communicable diseases [NCDs] (11). NCDs include cardiovascular diseases [CVDs] and diabetes and account for 63% of deaths worldwide (11). Dietary guidelines now reflect these findings with recommendations for increased consumption of fruits and vegetables (19,20), legumes, nuts (21) and wholegrain products (22, 23).

Plant foods contain many protective factors such as antioxidants and fiber, and are also low in nutrients associated with an increased risk of disease, such as saturated and trans fats. Conversely, animal foods such as meat and dairy tend to contain higher amounts of saturated fat and cholesterol, and they contain no dietary fiber. Consumption of red and processed meats, in particular, have been associated with an increased risk of obesity, type 2 diabetes, gestational diabetes, CVD, and some types of cancer (1). The World Cancer Research Fund considers the evidence convincing for the causal link between high intake of red meat and colorectal cancer (12).

Research has shown that there are increased benefits with increased conformity to eating an exclusively wholefood plant-based diet (13,14). Furthermore, wholefood plant-based diets that avoid all animal foods and that are naturally low in fat have been shown to arrest disease and in some cases contribute to its regression (15-18).

CHIP advises that participants with the greatest need of clinical improvement make as big a move towards whole plant-based foods as possible for the greatest clinical results in disease reversal (1, 11, 13, 14).

CHIP offers some optimal dietary reference points and goals, and allows people to choose their own level of implementation, which is usually based on their level of motivation, state of health, health goals and readiness to take action. CHIP strives to help people move along an eating and lifestyle continuum towards lower risk and better health outcomes using local foods and resources. The Eat More cookbook contains exclusively plant-based recipes to equip both those individuals who choose to adopt a completely plant-based eating pattern, and those who would like to incorporate more plant-based meals into their diets.

## References

1. Marsh K, Zeuschner C, Saunders A. Health Implications of a Vegetarian Diet: A Review. *Am J Lifestyle Med* 2012; 6(3): 250-267.
2. Sabate J. The contribution of vegetarian diets to health and disease: a paradigm shift? *Am J Clin Nutr* 2003; 78(suppl): 502S–7S.
3. Barnard, N.D., et al., *A low-fat vegan diet improves glycemic control and cardiovascular risk factors in a randomized clinical trial in individuals with type 2 diabetes*. *Diabetes Care*, 2006. 29(8): p. 1777-83.
4. Ornish, D., et al., *Intensive lifestyle changes for reversal of coronary heart disease*. *JAMA*, 1998. 280(23): p. 2001-7.
5. Esselstyn, C.B., Jr., et al., *A strategy to arrest and reverse coronary artery disease: a 5-year longitudinal study of a single physician's practice*. *J Fam Pract*, 1995. 41(6): p. 560-8.
6. Bhatia, S.J., et al., *Epidemiology and symptom profile of gastroesophageal reflux in the Indian population: report of the Indian Society of Gastroenterology Task Force*. *Indian J Gastroenterol*, 2011. 30(3): p. 118-27.
7. Key, T.J., G.K. Davey, and P.N. Appleby, *Health benefits of a vegetarian diet*. *Proc Nutr Soc*, 1999. 58(2): p. 271-5.
8. Alonso-Coello, P., et al., *Fiber for the treatment of hemorrhoids complications: a systematic review and meta-analysis*. *Am J Gastroenterol*, 2006. 101(1): p. 181-8.
9. Lindahl, O., et al., *Vegan regimen with reduced medication in the treatment of bronchial asthma*. *J Asthma*, 1985. 22(1): p. 45-55.
10. Odermatt, A., *The Western-style diet: a major risk factor for impaired kidney function and chronic kidney disease*. *Am J Physiol Renal Physiol*, 2011. 301(5): p. F919-31.
11. Stanton RA. A plant-based diet – good for us and for the planet. *MJA Open* 2012; 1 Suppl 2: 5-6.
12. World Cancer Research Fund and American Institute for Cancer Research. *Food, nutrition, physical activity, and the prevention of cancer: a global perspective*. Washington, DC: WCRF, 2007.
13. Hu FB. Plant-based foods and prevention of cardiovascular disease: an overview. *Am J Clin Nutr* 2003;78(suppl):544S–51S.
14. Tonsdat S, Butler T, Fraser GE. Type of Vegetarian Diet, Body Weight, and Prevalence of Type 2 Diabetes. *Diabetes Care* 2009;32:791–796.
15. [http://www.llu.edu/public-health/health/lifestyle\\_disease.page](http://www.llu.edu/public-health/health/lifestyle_disease.page) (accessed 4 Nov 2013)
16. Esselstyn CB. Is the Present Therapy for Coronary Artery Disease the Radical Mastectomy of the Twenty-First Century? *Am J Cardiol* 2010; 106(6); 902-904.
17. Wood M. Boning up on osteoporosis. *Agric Res*. 2003; 51(3);8-9
18. Bernard ND, Cohen J, Jenkins JA, Turner-McGrievy G, Gloede L, Green A, Ferdowsian H. A low-fat vegan diet and a conventional diabetes diet in the treatment of type 2 diabetes: a randomized, controlled, 74-wk clinical trial. *Am J Clin Nutr* 2009;89(suppl):1588S–96S.
19. Ornish, D., et al., *Can lifestyle changes reverse coronary heart disease? The Lifestyle Heart Trial*. *Lancet*, 1990. 336(8708): p. 129-33.
20. <http://www.fruitsandveggiesmorematters.org/dietary-guidelines-for-americans> (accessed 2 Dec 2014)
21. <http://www.fruitsandveggiesmorematters.org/myplate-and-what-is-a-serving-of-fruits-and-vegetables> (accessed 2 Dec 2014)
22. Ying Bao, M.D., Sc.D., et al., *Association of Nut Consumption with Total and Cause-Specific Mortality*. *Engl J Med* 2013;369:2001-11
23. Mellen PB, Walsh TF, Herrington DM. *Whole grain intake and cardiovascular disease: A meta-analysis*. *Nutr Metab Cardiovasc Dis*. 2007. Mellen PB, Walsh TF, Herrington DM. *Whole grain intake and cardiovascular disease: A meta-analysis*. *Nutr Metab Cardiovasc Dis*. 2007.
24. Jacobs DR, Jr., Andersen LF, Blomhoff R. *Whole-grain consumption is associated with a reduced risk of noncardiovascular, noncancer death attributed to inflammatory diseases in the Iowa Women's Health Study*. *American Journal of Clinical Nutrition*. 2007; 85:1606-14