

HEALTH BENEFITS OF COCONUT

Various recent researches have shown that coconut/coconut oil is a real source of health benefits- a true nutrition powerhouse- in contrast to the negative perception some years ago. In a published article, C. Castro quoted Dr. Bruce Fife, N.D. as saying that coconut oil contains about seven calories per gram which is 20% lower than other fats available today.¹ Hence, a good way to cut down on calorie intake is to switch to coconut oil and coconut products for baking, frying and similar applications. Other researchers are looking into the possibility that coconut oil could be a powerful antioxidant to mop up dangerous free radicals before they could attack and damage delicate intestinal cells.²

Saturated fats are considered essential to health and they comprise 50% of the human cell membranes. Some proportion of saturated fats is found in all fats and oils, whether plant based or animal based.³ In his review, K. Lombard reported that coconut oil is composed of 92% saturated fatty acids, 6% monounsaturated and 2% polyunsaturated. Media reports have blamed saturated fats for clogging arteries that lead to heart disease. However, a research study at Wynn Institute for Metabolic Research in London found out that the “artery clogging fats” in those who died from heart disease were composed of 74% polyunsaturated fatty acids and 26% saturated fats. The findings implied a direct influence of dietary polyunsaturated fatty acids on aortic plaque formation and that no associations were found with saturated fatty acids.⁴ In today’s modern societies, polyunsaturated fats are commonly found in foods prepared using vegetable oils.⁵ These oils are unstable, have short shelf-life and easily becomes rancid.⁶

¹Caitlin Castro, “*The Amazing Fat that Could Actually Make You Thin,*” *Woman’s World Magazine* (Nov. 26, 2000), p. 18

²*ibid.*

³Tropical Traditions, “*The Science Behind the Coconut Diet,*” (2004)

⁴Kevin Lombard, “*Reviewing the Coconut (Cocos nucifera L.), Tree of Life,*” (TexasTech University, 2001)

⁵Tropical Traditions, *op. cit.*

⁶Emil Carandang, “*Coconut Oil: Uses and Issues on its Health & Nutraceutical Benefits,*” in CoconutOil.com (2003)

There are two types of saturated fats according to E. Carandang: the medium chain (those fatty acids with carbon length of 3 to 12) and long chain (those fatty acids with carbon length of more than 12). Animal fats have long chain fatty acids that have the ability to raise cholesterol and are stored easily in the body as fats. Polyunsaturated vegetable oils also have long chain fatty acids that easily combine with oxygen in air resulting to peroxide formation that can trigger mutations.⁷

In a paper written and presented by K. Lombard at the Texas Tech University in 2001, he mentioned that during a US Senate testimony members of the Harvard Medical School stated that “there is simply no scientific basis for deciding coconut oil is a health risk.”⁸ Saturated fats are composed principally of medium chain triglycerides or medium chain fatty acids (MCFAs) that do not elevate serum cholesterol when taken as part of a normal diet. The fatty acids burned off quickly as energy source and are not available for incorporation into body fat nor for synthesis of cholesterol (Persley, 1992).⁹

Coconut oil has the largest concentration of MCFAs in contrast to other oils that contain long chain fatty acids (LCFAs). According to scientific literature, LCFAs tend to produce fat in the body, while MCFAs promote what is known as thermogenesis. Thermogenesis increases the body’s metabolism, thus, producing energy.¹⁰ In a study by Baba, Bracco and Hashim (American Journal of Nutrition), it was their conclusion that “overfeeding MCFA diet results in decreased body fat related to increased metabolic rate and thermogenesis.”¹¹ Other studies at Vanderbilt University show that coconut oil is a top source of MCFAs proven to kick-start metabolism. This happens because instead of being stored as fat, the MCFAs go directly to the liver where they are used to produce energy.¹²

⁷ibid.

⁸Kevin Lombard, op. cit.

⁹ibid.

¹⁰Tropical Traditions, op. cit.

¹¹ibid.

¹²Caitlin Castro, op. cit.

Carandang reported that coconut oil as MCFA is faster to digest and has better solubility in biological fluids. It is readily absorbed and carried to the liver where rapid oxidation and release of energy take place. Because of this, coconut oil is the preferred choice by those having difficulty digesting fat. In supplying fat to infant milk formulation, coconut oil is also used as it facilitates absorption of calcium and magnesium both of which are essential for bone development.¹³ In contrast, LCFAs of animal fats need pancreatic lipase to be digested as they do not easily mix with biological fluids. LCFAs bypass the liver and go around to all parts of the circulatory system with heavy loads of cholesterol before going to the liver for final oxidation.¹⁴

Lauric acid is the primary MCFA in coconut oil.¹⁵ Research studies show that coconut oil is almost 48% lauric acid, a fatty acid that is harmless to human cells (anti-aging) but which doctors say can destroy illness-causing viruses, fungi and bacteria instantly on contact¹⁶ similar to the colostrum of mother's milk which is also rich in lauric fatty acid.¹⁷ Lauric acid is good for geriatric patients as it contributes to faster surgical recovery. It is excellent for cooking as well because it can withstand high temperature and does not break down easily.¹⁸

In an article "The Science Behind the Coconut Diet," a study at the Institute of Biology of the University of Iceland¹⁹ found out that MCFAs were shown to kill gram-positive cocci. Another study from the same university showed that two of MCFAs found in coconut oil (capric acid and lauric acid) killed *Candida albicans*, a common yeast infection found in those who have used antibiotic drugs excessively. In other trials, lauric acid destroyed Cytomegalovirus (virus believed to cause 35% of all heart disease), Epstein-Barr virus, bugs that cause measles, leukemia, hepatitis C and bacteria that cause ulcers, staphylococcus and streptococcus infections.²⁰

¹³Emil Carandang, op. cit.

¹⁴ibid.

¹⁵Tropical Traditions, op. cit.

¹⁶Caitlin Castro, op. cit.

¹⁷Emil Carandang, op. cit.

¹⁸ibid.

¹⁹Tropical Traditions, op. cit.

²⁰Caitlin Castro, op. cit.

To study the effects of coconut oil on human nutrition, the best indication is to look at the populations that get most of their caloric intake of saturated fat from frequent use of coconut oil. Reasoning follows that if the lipid theory of heart disease and obesity (a theory blaming high cholesterol levels as the cause) were correct, populations with the highest consumption of saturated fats would be the most overweight and would have the highest rates of heart disease.²¹ But this is not the case based on the following reports:

A research study started in 1960s and published in 1981 of two South Pacific islands examined the effects of saturated fat and dietary cholesterol in determining serum cholesterol levels over a period of time before and after western foods become prevalent in the diets of either culture. Coconuts were staple in the diets with about 60% of caloric intake coming from the saturated fat of coconut. The study found very healthy people who were relatively free from the modern diseases of western cultures, obesity included. It further concluded that “vascular disease is uncommon in both populations and there is no evidence of the high saturated fat intake having a harmful effect” to the population.²²

Another study in the Indian subcontinent compared traditional cooking oils (including coconut oil) with modern oils in relation to the prevalence of atherosclerotic heart disease and Type II diabetes. The study concluded that the alarming increase in the two diseases among Indians was attributable to the increased dietary fat intake caused by the replacement of the traditional cooking fats with refined vegetable oils containing polyunsaturated fatty acids.²³

²¹Tropical Traditions, op. cit.

²²ibid.

²³ibid.

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