No Effect of Added Sugars Consumed at the Median American Intake Level on Glucose Tolerance or Insulin Resistance Joshua Lowndes, James Rippe Rippe Lifestyle Institute, Celebration, FL

Introduction

- Fructose is metabolized differently than other monosaccharides and recent research has focused on how this difference may contribute to obesity and increasing cardiovascular disease risk.
- In particular, high levels of fructose consumption has been shown to promote changes in insulin resistance and associated parameters.
- However, studies that have shown such an effect have used experimental models that are drastically different than how fructose is typically consumed by humans either using amounts far in excess of even the highest consumers and/or supplying it in isolation from other sugars or macronutrients.
- Debate continues over the effects of sugars at more typically consumed levels and whether the identity of the sugar consumed is important.

Methods

- This was a study with a ten week intervention that included 156 normotensive, normoglycemic, apparently healthy individuals who were weight stable (no change in weight greater than 3% over the past three months) prior to enrollment.
 - Male=69, Female=87,
 - Mean age 35.7 ± 11.4.
- Participants were randomly assigned to one of five groups four that contained low fat milk with added sugar in amounts equivalent to the 50th percentile of fructose consumption in the US, and one unsweetened low-fat milk control group.
- Milk was consumed in amounts so that the added sugar contributed a target percentage of the calories required for weight maintenance.
- The groups were as follows:
 - Fructose 9%, Glucose 9%, High fructose corn syrup (HFCS)18%, sucrose 18% and an unsweetened milk control in which milk contributed 18% of the weightmaintenance calories.
- The energy intake required for weight maintenance was estimated for each participant using the Miflin St Joer equation and using an appropriate activity factor determined by responses to a physical activity questionnaire.
- Both before and after the intervention, subjects provided blood samples following a 12 hour fast and underwent a standard oral glucose tolerance test (OGTT).
- Area under the curve (AUC) was calculated for glucose and insulin using the trapezoid method.
- Data from the OGTT were also used to calculate whole body insulin resistance using the Matsuda Insulin Sensitivity Index (ISI) and Hepatic Insulin Resistance.
- Data were analyzed using ANOVA with repeated measures and are presented as mean ± S.D.









Results

*** different than baseline, p<0.001

Discussion & Conclusion

• These data suggest that, when consumed at the median American intake, added sugars do not produce changes in measures of insulin sensitivity or glucose tolerance. • Furthermore, at this level of consumption, the identity of the added sugar is not important.

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