

**Limited evidence for benefits of omega-6 fats for prevention of cardiovascular disease**

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<b>Clinical Question</b>	What are the effects of increasing omega-6 fats (linoleic acid, gamma-linolenic acid, dihomo-gamma-linolenic acid and arachidonic acid) on cardiovascular disease (CVD) and all-cause mortality?
<b>Bottom Line</b>	There was low-quality evidence that increasing omega-6 fats reduced risk of myocardial infarction (MI) (NNTB=53). Increasing omega-6 fats made little or no difference to all-cause mortality or CVD events (low-quality evidence), and the effects on CVD mortality, coronary heart disease (CHD), major adverse cardiac and cerebrovascular events and stroke were uncertain (very low-quality evidence). Increasing omega-6 fats reduced blood cholesterol (high-quality evidence), probably had little or no effect on body weight adjusted for height (moderate-quality evidence), and made little or no difference to triglycerides, high-density lipoprotein or low-density lipoprotein (low-quality evidence). Although benefits of omega-6 fats remain to be proven, increasing omega-6 fats may be of benefit in people at high risk of MI.
<b>Caveat</b>	Evidence was weakened by study design problems, small numbers of events, low numbers of participants from developing countries, and few women.
<b>Context</b>	Some evidence suggests that a higher intake of omega-6 fats, along with a lower intake of saturated fat can reduce CHD. In contrast, there is concern that high levels of omega-6 fats may worsen cardiovascular risk by increasing inflammation.
<b>Cochrane Systematic Review</b>	Hooper Let al. Omega-6 fats for the prevention of primary and secondary cardiovascular disease. Cochrane Reviews, 2018, Issue 11. Art. No.: CD011094.DOI: 10.1002/14651858. CD011094.pub4. This review contains 19 studies involving 6,461 participants.

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Systematic review link:

<https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD011094.pub4/full>