

WHAT SORT OF PERSON CLAIMS TO BE ON A CHOLESTEROL-LOWERING DIET?**D.R. WOODWARD, F.J. CUMMING* and P.J. BALL****

Recent risk factor prevalence surveys indicate that several percent of Australian adults follow diets which they describe as intended to lower blood cholesterol. However, we know little about the characteristics of these people.

We have recently undertaken a mail survey of factors influencing adult dietary choices. Adults aged 18 years and over (N=1682), selected randomly from Tasmanian electoral rolls, were asked about their socio-demographic background, dietary habits and attitudes to selected foods.

The questions included the following, closely based on other Australian surveys: 'Which of the following best describes your usual way of eating?' Some 11% of respondents indicated that they were on a diet to lower blood cholesterol, and we compare here their characteristics with those of respondents who did not claim to be on a cholesterol-lowering diet.

Of the socio-demographic characteristics examined, age ($P<0.001$) and educational attainment ($P<0.01$) were significantly linked to reported use of a cholesterol-lowering diet. Prevalences ranged from 3% in the 18-29 age-group to 27% in the 60-69 age-group, and those who had undertaken post-compulsory education (ie, past grade 10) had a prevalence of 8%, compared to 13% for those who had not. However, the prevalence of 'cholesterol-lowering' diets did not differ significantly ($P<0.01$) between males and females, those born in Tasmania and those born elsewhere, the five electorates, or those with gross household incomes below and above \$30000.

Personal experience of cardiovascular disease was significantly linked to prevalence of cholesterol-lowering diets, which were more common among those diagnosed with high blood cholesterol, angina, heart attack, high blood pressure or stroke (each $P<0.001$). However, only 40% of heart attack survivors and 43% of those told of hypercholesterolaemia were following such diets.

Experience of cardiovascular disease among relatives was also significantly linked to prevalence of cholesterol-lowering diets. Such diets were more common ($P<0.001$) among those where a heart attack or stroke had been experienced by a sibling (28%), spouse (21%) or parent (15%).

We conclude that the typical person on a 'cholesterol-lowering' diet is likely to be older and less-educated than the average. He or she is more likely to have been diagnosed as having cardiovascular disease, and to have had a close relative affected by a heart attack or stroke. However, even direct personal experience of a heart attack only stimulates a minority of people to adopt such a dietary pattern.

Department of Biochemistry, University of Tasmania, Hobart, Tasmania 7001

*School of Nutrition and Public Health, Deakin University, Geelong, Victoria 3217

**Department of Psychology, University of Tasmania, Hobart, Tasmania 7001