

Reply to “Role of Western Diet in Inflammatory Autoimmune Diseases” by Manzel et al. in *Current Allergy and Asthma Reports* (Volume 14, Issue 1, January 2014)

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Published online: 20 June 2014
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To the Editor,

Regarding the recent review “Role of Western Diet in Inflammatory Autoimmune Diseases” [1], while I appreciate the importance of this topic and the authors’ review, I noted several shortcomings in this review and have questions about the omission of certain information. The authors failed to include relevant and important human data while instead relying on animal studies (their Table 1). The authors also include erroneous information, without appropriate citation.

The authors state that “a high-fat diet is a prominent factor in promoting obesity” but failed to provide citation for this. Importantly, other researchers have shown that high-fat ketogenic diets promote weight loss rather than obesity.

I found the reliance on animal data (especially their Table 1) and the exclusion of human data inappropriate for a review article of this nature and at this time in biomedical history. Several clinical trials have already documented the effectiveness of dietary intervention in human autoimmune diseases. For example, diets which emphasize increased consumption of plant foods (excluding gluten-containing grains) and dietary alteration of gastrointestinal flora have already shown clinical benefits [2]. Exclusion of gluten is of critical

importance for some patients, and well established is gluten’s role in inflammation, alteration of gastrointestinal flora, increasing intestinal permeability, and direct stimulation of inflammatory pathways. The authors mentioned hypertension four times in their review but failed to mention the remarkable efficacy of therapeutic fasting for this condition [3]. Clinical trials showing the safety and efficacy of dietary fatty acid supplementation were also excluded from the review, despite showing remarkable clinical safety and antirheumatic efficacy [4]. Antiinflammatory mechanisms of dietary intervention not mentioned in their review include alleviation of oxidative stress, alleviation of dysbiosis, reduced reactivity to dietary antigens, normalization of intestinal hyperpermeability, and alleviation of proinflammatory mitochondrial dysfunction [5].

References

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