

A review of the effects of nuts on appetite, food intake, metabolism, and body weight^{1–3}

Sze Yen Tan, Jaapna Dhillon, and Richard D Mattes

ABSTRACT

Tree nuts and peanuts are good sources of many nutrients and antioxidants, but they are also energy dense. The latter often limits intake because of concerns about their possible contribution to positive energy balance. However, evidence to date suggests that nuts are not associated with predicted weight gain. This is largely due to their high satiety value, leading to strong compensatory dietary responses, inefficiency in absorption of the energy they contain, a possible increment in resting energy expenditure, and an augmentation of fat oxidation. Preliminary evidence suggests that these properties are especially evident when they are consumed as snacks. *Am J Clin Nutr* 2014;100(suppl):412S–22S.

INTRODUCTION

The long-standing pillars of nutrition advice to optimize health are to practice balance, moderation, and variety. If followed, no food must be excluded from the diet and each food can make some useful contribution, the value of which is determined by the health status and needs of the individual. In an era in which positive energy balance has dominated health concerns in Western nations and is a growing problem globally, high-fat, energy-dense foods have often been identified as especially problematic. Nuts are an example, and one in which the science does not support this perspective. This review focuses on the role of nut consumption on appetite, energy intake, energy metabolism, and body weight. Recent studies that report the effects of nuts on various aspects of human energy balance are summarized in **Table 1**.

NUTS IN THE CONTEXT OF A WHOLE DIET

Nuts contribute to energy and nutrient intake directly and indirectly via multiple mechanisms. First, nuts themselves are rich sources of energy, various nutrients (eg, tocopherols, magnesium, potassium), and antioxidants (1, 2). Each form of nut has its own inherent sensory profile that is more or less appealing to individual consumers and so will influence their ingestive decisions. However, the sensory profile of the raw nut is commonly modified through processing. Roasting and frying darken the color, increase brittleness, and develop new flavor compounds (3–5). Changes in physical properties are of particular importance for the acceptability of nuts (6). A wide array of flavor compounds (eg, salt, sugar, cinnamon, and capsaicin) is also added directly to the surface of nuts to enhance their appeal. Broadly, such modifications increase sensory variety and, by

ameliorating monotony effects (7), may facilitate regular nut consumption and intake of the nutrients they contain. Sensory properties are among the strongest determinants of ingestive decisions (8, 9).

There are also indirect effects of nut consumption on total energy and nutrient intake. The sensory, nutrient, and/or physical properties of nuts alter gut hormone secretion (10, 11) and appetitive responses by consumers (12). In addition, nuts are frequently incorporated into the matrix of other foods (eg, confections, baked goods, ice cream), changing the flavor profile of both and creating a unique new unified sensory stimulus (13) that may guide intake of that item or influence the acceptability and selection of other items in the broader diet (14, 15). Whether this promotes greater energy intake remains to be determined.

APPETITE AND ENERGY INTAKE

With a few exceptions (16, 17), human feeding trials have shown that nut ingestion moderates appetite postprandially. Specifically, the inclusion of almonds and peanuts suppresses hunger (18, 19) and desire to eat (19) and increases fullness ratings after ingestion (17). Daily consumption of peanuts for 4 d also increased fasting satiety and fullness levels (20). These are important properties in weight management because a postprandial reduction in hunger may prolong meal latency; a decrease in desire to eat may prevent eating in the absence of hunger, and higher fasting satiety and fullness levels may translate into smaller meal sizes.

The satiating effects of nuts depend on 2 important factors. First, the form of nuts exerts differential effects on appetitive sensations. Smaller hunger suppression and greater hunger rebound (180 min postingestion) were observed when peanuts were consumed in the form of butter compared with whole nuts (18). However, whole almonds reportedly induce fullness levels comparable to those of almond butter (17). Second, the timing of nut consumption can affect appetite. The consumption of almonds together with a meal does little to augment the

¹From the Department of Nutrition Science, Purdue University, West Lafayette, IN.

²Presented at the symposium “Sixth International Congress on Vegetarian Nutrition” held in Loma Linda, CA, 24–26 February 2013.

³Address correspondence to RD Mattes, Department of Nutrition Science, Purdue University, 212 Stone Hall, 700 West State Street, West Lafayette, IN 47907-2059. E-mail: mattes@purdue.edu.

First published online June 11, 2014; doi: 10.3945/ajcn.113.071456.

TABLE 1
A summary of recent trials on human energy balance using a variety of nuts¹

| Type of nut and first author (ref) | Year | Design | Length | n | Treatments | EI | Appetite | Fat absorption | Diet compensation | EE | Fat oxidation | Weight | Body fat |
|------------------------------------|------|-----------------------|------------------|-----|--|----|------------|-----------------------------|-------------------|----|---------------|--------|----------|
| Almonds | | | | | | | | | | | | | |
| Kirkmeyer (18) | 2000 | Randomized, crossover | 180 min and 24 h | 24 | 500 kcal almonds vs no load condition and preloads matched on weight and volume | — | ↓ | — | 57% | — | — | — | — |
| Fraser (31) | 2002 | Randomized, crossover | 6 mo | 81 | 320 kcal almonds/d vs no almonds | ↑ | — | — | 54–78% | ↔ | ↔ | ↔ | — |
| Jenkins (32) | 2002 | Randomized, crossover | 4 wk | 27 | 22.2%E from almonds or 11.1%E from almonds + 11.1%E from muffins vs 22.2%E from muffins | ↑ | — | — | — | — | — | ↔ | — |
| Wien (115) | 2003 | RCT weight loss | 24 wk | 65 | 84 g almonds/d vs isocaloric complex carbs | — | — | — | — | — | — | ↓ | ↓ |
| Hollis (33) | 2007 | Randomized, crossover | 10 wk | 20 | 344 kcal almonds/d vs no almonds | ↓ | — | — | 74% | ↔ | — | ↔ | ↔ |
| Mori (17) | 2011 | Randomized, crossover | 490 min | 14 | 43 g almonds vs no almonds, almond flour, and almond oil groups, all matched on 75 g available carbohydrate in breakfast meals | — | ↑ Fullness | — | — | — | — | — | — |
| Novotny (61) | 2012 | Randomized, crossover | 18 d | 18 | 42 and 84 g almonds/d vs no almonds | — | — | –4.5 g (42 g) –9.1 g (84 g) | — | — | — | — | — |
| Foster (125) | 2012 | RCT weight loss | 18 mo | 123 | 56 g/d vs no almonds | — | — | — | — | — | — | ↓ | — |
| Tan (19, 21) | 2012 | RCT (suppl) | 4 wk | 137 | 43 g/d vs no almonds | ↔ | ↓ | — | — | — | — | ↔ | ↔ |
| Hazelnuts | | | | | | | | | | | | | |
| Mercanligil (34) | 2007 | Randomized, crossover | 4 wk | 15 | 40 g hazelnuts/d vs low-fat diet (no hazelnuts) | ↑ | — | — | — | — | — | ↔ | — |

(Continued)

TABLE 1 (Continued)

| Type of nut and first author (ref) | Year | Design | Length | n | Treatments | EI | Appetite | Fat absorption | Diet compensation | EE | Fat oxidation | Weight | Body fat |
|------------------------------------|------|-----------------------|------------------|--------|---|----|----------|-----------------------------|-------------------------|----|---------------|--------|---------------------|
| Yucesan (35) | 2010 | Prospective (suppl) | 4 wk | 21 | 1 g hazelnuts/kg per day | ↑ | — | — | — | — | — | ↔ | — |
| Macadamia nuts Garg (36) | 2003 | Prospective (suppl) | 4 wk | 17 | 40–90 g/d (15%E from macadamia nuts) | — | — | — | — | — | — | ↓ | — |
| Peanuts Kirkmeyer (18) | 2000 | Randomized, crossover | 180 min and 24 h | 24 | 500 kcal peanuts and PB vs no load condition and preloads and preloads matched on weight and volume | ↔ | ↓ | — | Peanuts: 104%; PB: 151% | — | — | — | — |
| Alper (37) | 2002 | Crossover | 30 wk | 15 | ~500 kcal peanuts/d: FF vs ADD vs SUB | ↔ | ↔ | — | 66% (FF) | ↑ | — | ↔ | ↔ (SUB, FF) ↑ (ADD) |
| Griehl (14) | 2004 | Epidemiology | NS | 14,262 | Users vs nonusers | — | — | — | — | — | — | — | — |
| Traoret (64) | 2008 | Randomized, crossover | 7–9 d | 16 | 70 g peanuts/d vs no peanuts | ↑ | — | ↓ | — | — | — | — | Negative assoc |
| Devitt (22) | 2011 | Randomized, crossover | 300 min | 66 | 300 kcal peanuts vs isocaloric load | ↔ | ↔ | — | ↑ As snacks | — | — | — | — |
| Pecans Morgan (39) | 2000 | Prospective (suppl) | 8 wk | 19 | 68 g pecans/d | ↑ | — | — | — | — | — | ↔ | — |
| Rajaram (40) | 2001 | Randomized, crossover | 4 wk | 23 | 20%E from pecans vs no pecans, both treatments as part of Step 1 diet | ↔ | — | — | — | — | — | ↔ | — |
| Pistachios Kocoyigit (41) | 2006 | Prospective (suppl) | 3 wk | 44 | 20%E from pistachios | — | — | — | — | — | — | ↔ | — |
| Sheridan (42) | 2007 | Randomized, crossover | 4 wk | 15 | 15%E from pistachios vs no pistachios | ↔ | — | — | — | — | — | ↔ | — |
| Li (123) | 2010 | RCT weight loss | 12 wk | 59 | 53 g pistachios/d vs 56 g pretzels/d | — | — | — | — | — | — | ↓ | — |
| Baer (69) | 2012 | Randomized, crossover | 3 wk | 18 | 42 and 84 g pistachios/d vs no pistachios | — | — | —4.5 g (42 g) –6.7 g (84 g) | — | — | — | — | — |

(Continued)

TABLE 1 (Continued)

| Type of nut and first author (ref) | Year | Design | Length | n | Treatments | EI | Appetite | Fat absorption | Diet compensation | EE oxidation | Weight | Body fat |
|------------------------------------|------|------------------------|-----------------|--------------|--|----|----------|----------------|-------------------|--------------|--------|----------|
| Almario (43) | 2001 | Crossover | 6 wk | 18 | 48 g walnuts/d vs no walnuts | ↑ | — | — | — | — | ↔ | — |
| Tapsell (89) | 2004 | RCT weight maintenance | 6 mo | 58 | 30 g walnuts/d vs no walnuts | ↔ | — | — | — | — | ↔ | ↓ (NS) |
| Sabaté (120) | 2005 | Randomized, crossover | 6 mo | 90 | 28–56 g/d (12%E from walnuts) vs no walnuts | ↑ | — | — | — | — | ↑ | ↑ |
| Walnuts Casas-Augustench (16) | 2009 | Randomized, crossover | 5 h | 29 | 33%E PUFAs from walnut-enriched meal vs olive oil (MUFAs)– and dairy product (saturated fat)–enriched isocaloric meals | — | ↔ | — | — | ↑ (NS) | — | — |
| Tapsell (85) | 2009 | Randomized, crossover | 8 h | 16 | 30 g walnut-enriched meal vs olive oil–enriched isocaloric meal | — | — | — | — | ↔ | — | — |
| Tapsell (79) | 2009 | RCT weight maintenance | 12 mo | 50 | 30 g walnuts/d vs lower-fat diet (no walnuts) | ↓ | — | — | — | ↔ | ↓ | ↓ (NS) |
| Brennan (20) | 2010 | Randomized, crossover | 4 d | 20 | 48 g walnuts/d vs isocaloric placebo | — | ↓ | — | — | ↔ | — | — |
| Pine nuts Pasman (11) | 2008 | Randomized, crossover | 240 min | 18 | 3 g pine nut FFA or 3 g TGs vs 3 g placebo (olive oil), all in combination with breakfast | — | ↓ | — | — | — | — | — |
| Nut not specified Ellsworth (108) | 2001 | Epidemiology | 12-y follow-up | 34,111 women | Eating frequency per week | — | — | — | — | — | — | — |
| Albert (106) | 2002 | Epidemiology | 12-mo follow-up | 21,454 men | Eating frequency per week | — | — | — | — | — | — | — |
| Bes-Rastrollo (107) | 2007 | Epidemiology | Median 28 mo | 8865 | Eating frequency per week | — | — | — | — | — | — | — |
| Mozaffarian (111) | 2011 | Epidemiology | NS | 120,877 | Serving size | — | — | — | — | — | — | — |

↑, ADD, added to diet; assoc, association; EE, energy expenditure; EI, energy intake; FF, free feeding; FFA, free fatty acids; PB, peanut butter; RCT, randomized controlled trial; ref, reference; SUB, replaced equal amount of fat in diet; suppl, supplement; TG, triglyceride; ↓, significantly higher; ↑, significantly lower; ↔, no change; %E, percentage of energy; —, did not measure.

appetite-modulating effects of that meal, whereas consuming almonds alone as snacks blunts hunger and desire-to-eat ratings compared with individuals who received no nuts (19, 21). Other work noted that the ingestion of peanuts or peanut-containing snacks (300 kcal/d) tended to induce greater energy compensation when ingested as snacks relative to when they were consumed as part of a lunch meal (22). Hence, the form and timing of nut consumption may modulate appetitive sensations, with suggestive evidence that satiation/satiety effects may be greater for whole nuts consumed as snacks.

The underlying mechanisms for the appetitive effects of nut consumption are not well understood due to a paucity of studies on the issue. However, the available evidence indicates that the satiating effects of nuts are not likely to be mediated by delayed gastric emptying (23) or the release of selected appetite-regulating gut peptides including glucagon-like peptide 1 (GLP-1), glucose-dependent insulinotropic polypeptide (GIP), or ghrelin (10, 17, 20). However, the effect of nut consumption on protein YY (PYY) secretion is mixed (10, 20). Furthermore, feeding 3 g of pine nut oil (in the form of fatty acids or triglycerides) reportedly decreased prospective food-intake ratings and increased the secretion of cholecystokinin (CCK) (11). Together, these studies suggest that the satiating effects of nuts may be mediated by CCK and/or PYY secretion and that this effect may stem from the dietary protein or fat content of nuts. Their high unsaturated fat content has been proposed as the primary driver of satiety (24, 25). This hypothesis was based on evidence that unsaturated fat is oxidized more readily than saturated fats (26) and so would generate a more rapid and stronger satiety cue. However, several trials have directly tested this hypothesis and have not provided experimental support (27–30).

An expectation of appetite modulation by nuts is that it will translate into reduced energy intake from the balance of the diet by evoking a strong compensatory dietary response. Compensation data from trials that used almonds (31–33), hazelnuts (34, 35), macadamia nuts (36), peanuts (37, 38), pecans (39, 40), pistachios (41, 42), and walnuts (43) suggest that values range from 54% to 104% (18, 31, 33, 37). Thus, the majority of the energy provided by nuts is offset by spontaneous adjustments in the total diet. Dietary compensation may depend on the form of nuts consumed. Peanuts, in the form of peanut butter, produced higher dietary compensation than whole peanuts (104% compared with 151%) (18), despite evoking a weaker satiety effect (44). In summary, nut ingestion suppresses hunger and desire to eat and promotes fullness. These sensations may aid dietary compensation that offsets much of the energy contributed by nuts. However, strong compensation can also occur independently of reported appetitive effects. This may reflect imprecision in appetite measurement or a truly independent uncharacterized mechanism.

MASTICATION AND THE EFFICIENCY OF NUTRIENT ABSORPTION

Although the nutritive value of nuts is well documented, a growing body of evidence indicates that the published values may be substantively modified by the nut's physical properties (45). In particular, the structure and high fiber content of nuts modify the bioaccessibility and bioavailability of the nutrients they contain. To access the nutrients in nuts, their parenchymal

cell walls must be disrupted. This may occur by enzymatic or microbial degradation or mechanical processing in the mouth (chewing) and stomach. The fiber nuts provide may bind with food constituents such as fatty acids, reducing the efficiency of their absorption (46). Fiber may also alter gastric emptying and gastrointestinal transit times and gut hormone secretion, with implications for appetite and energy intake (47). In addition, the cell walls may serve as a source of fermentable fiber in the colon, affecting energy balance and gut health (48, 49). Because these dynamic processes will largely determine the nutritional impact of nut consumption, they are attracting increasing research attention (50).

Nuts require considerable oral processing effort and this may, in part, account for the often-noted less-than-predicted effect of their consumption on body weight (31, 35, 39, 43). The mechanical act of chewing reportedly generates satiation signals through cognitive (51), neural (52), endocrine (12, 53), and physical (eg, gastric emptying) (54) mechanisms; augments cephalic phase responses linked to appetite (55–58); influences digestion efficiency (12, 59–61); modestly increases energy expenditure (62); and elicits dietary compensation (63).

A number of studies have evaluated the efficiency of energy absorption from ground and tree nuts through feeding trials. All showed substantive increases in fecal fat loss with nut consumption, although the values ranged widely from ~5% to >20% (12, 61, 64–70). One early trial, in which peanut products constituted 95% of daily fat intake, reported the percentage of dietary fat excreted was 17.8% for whole peanuts, 7.0% for peanut butter, and 4.5% for peanut oil (68). These results documented a food form effect. However, there was also an effect of background diet because these fecal fat-loss values were observed when participants were consuming 20 g crude fiber daily, but decreased to 16.8%, 4.2%, and 1.8% for the 3 peanut forms when the background dietary fiber content was reduced to 5 g/d. Presumably, there was greater binding of energy-yielding nutrients, especially fatty acids, to the fiber in the high-fiber condition, leading to greater fecal excretion. The contribution of background diet to treatment effects may account, in part, for differences in absorption efficiency across studies. Subsequent work showed elevated fecal fat excretion with nut consumption across different types of nuts, including almonds (12, 65, 67, 70), pecans (66), pistachios (69), and peanuts (64). In some (67, 70), but not all (61, 69), studies, the increment in fecal fat followed a dose-response pattern. In the latest studies conducted in the same laboratory under comparable conditions, fecal fat losses associated with 42 g almond and pistachio loads/d were comparable at ~4.5 g/d (61, 69). However, they were higher with almonds (~9.1 g/d) compared with pistachios (~6.7 g/d) at higher nut intakes (84 g/d). This suggests relative consistency across nuts for effects at suggested levels of consumption and possibly a nonlinear dose-response relation for some types of nuts.

These trials raise a number of nutritional issues. First, the inefficiency of absorption is a double-edged sword. Whereas this may be beneficial with respect to moderating energy intake and the possible contribution of nuts to positive energy balance and weight gain, it also likely reduces the absorption efficiency of lipid-soluble nutrients and other macronutrients. Fat accounts for ~55% of the increment in fecal energy loss when nuts are included in the diet (64), so other energy-yielding substances

must also be affected. Vitamin E extraction is lower in whole compared with finely ground and defatted almonds with added almond oil (45). The availability of all nutrients is increased with longer gastrointestinal residence time due, in part, to swelling of cell walls and leakage of nutrients out of the parenchymal cells (45). Consequently, nut form can be used for selective purposes: that is, consumption of whole nuts when moderating energy intake is of primary concern; consumption of chopped, sliced, or finely ground nuts or butter or oils when maximization of nutrient intake is the priority. The delayed absorption of lipid from whole nuts may also moderate postprandial lipemia (71) and glycemia (17). Processing of nuts is an additional factor that influences nutrient bioaccessibility (4). Roasting of almonds leads to smaller fragments with greater bioaccessibility of cell contents when chewing. Mastication studies of peanuts confirm that the physical properties of nuts influence their disintegration characteristics (13). They also show that the matrix in which peanuts are embedded modifies chewing behavior but without modifying the final nut particle size. Simulated gastric processing of peanuts shows graded disintegration rates, from the fastest to the slowest in the following order: frying > roasting > boiling > raw (5).

Second, the data on energy bioaccessibility raise questions about the use of Atwater conversion factors for nutrient labeling. A goal of labeling based on standardized servings is to permit consumers to make informed choices about the energy content of different foods to meet their nutritional goals. The structure of nuts may be different enough from other foods to render labels sufficiently inaccurate to warrant another basis for determination of their energy contribution to the diet (61, 69, 72).

Third, with the introduction of flavorings to nuts to enhance their appeal, questions have been raised as to whether flavors modify chewing and health outcomes. Because flavors are applied to the outer surface of nuts, they exert a strong sensory impact (73) and the actual amount added is limited. Consequently, they would not be expected to directly influence health risks associated with the flavor principle (eg, exacerbation of hypertension by sodium or hyperglycemia by sugar). However, they could theoretically alter oral processing and modify nutrient availability from the nuts themselves. The limited available data suggest that among the varieties tested (ie, raw, roasted unsalted, roasted salted, and honey roasted), no effects of flavor were reported on masticatory outcomes including particle size distribution (74, 75).

Issues of bioaccessibility raise questions about nutrient delivery between types of nuts. Almonds and peanuts have markedly different hardness. The initial break forces for almonds and peanuts are reported as follows: raw nut (7442 ± 332 compared with 3046 ± 380 g), honey roasted (5981 ± 172 compared with 1834 ± 232 g), roasted unsalted (5004 ± 209 compared with 1545 ± 337 g), and roasted salted (4940 ± 267 compared with 1195 ± 289 g) (74, 75). These differences in hardness lead to variation across forms and between nut types for indexes of oral processing effort such as number of chews, chewing rate, and time spent chewing, but the end result is a strikingly similar profile of particle sizes (Figure 1). No differences related to BMI have been reported, but processing effort is stronger in the fasted compared with sated states (74, 75). Thus, to the extent that particle size proxies for nutrient availability, the present literature suggests more commonalities across nuts than differences. This coincides with

a large body of literature showing similar effects of different nuts on cardiovascular disease risk, postprandial glycemia, and body weight (15, 76–78).

ENERGY EXPENDITURE

A limited number of trials have explored the effects of nut consumption on thermogenesis, either postprandially (also known as diet-induced thermogenesis) or on resting energy expenditure (REE). The fatty acid composition of nuts has been the target of much of this work. In an acute-feeding setting, the consumption of a meal containing walnuts (33% of energy from PUFAs) increased diet-induced thermogenesis significantly when compared with a dairy-containing meal (32% of energy from saturated fat) (16). An isoenergetic meal containing olive oil (31% of energy from MUFAs) yielded comparable results to the walnut meal. The test diets were not perfectly matched, so the authors' attribution of the elevation of energy expenditure and fat oxidation to the higher PUFA content of the walnut and the higher MUFA content in the olive oil meals cannot be verified. In addition, the inclusion of almonds [60 g (74) or 54.3 g (31)] and peanuts [52.5 g (37)], both rich sources of unsaturated fats, into meals has not led to elevated thermogenesis. The acute postprandial thermogenic effect of nuts is yet to be confirmed.

Mixed findings on thermogenesis have been reported from short- and longer-term (ranging from 4 d to 12 mo) trials of nut consumption. No effects have been documented with walnuts (20, 79). One study with almonds reported no effect, whereas another observed an increase that accounted for ~14% of the energy contributed by the almonds (31, 33). Several studies with peanuts have noted an increase in REE. In one trial, there was an 11% increase after 8 wk of peanut consumption (52.5 g/d). When lean and overweight adults were supplemented with peanut oil (as 30% of REE) for 8 wk in another study, REE was elevated by 5%, but only in overweight individuals (80). Collectively, there is some evidence that nut consumption increases thermogenesis, but the data are not robust and there is no clear mechanism. One possibility is that the lipid from nuts is absorbed over a prolonged period of time, leading to a small but sustained source of substrate that fuels thermogenesis and could appear as an increase in REE.

ADIPOSE TISSUE AND FAT METABOLISM

It has been proposed that nut consumption elevates fat oxidation and preferentially reduces body fat mass, especially in the viscera. These actions are attributed to their high unsaturated fat content. If true, their inclusion in the diet could help to prevent or mitigate the effects of metabolic syndrome. Animal studies have shown that higher PUFA intakes suppress adipocyte differentiation and downregulate adipocyte P2 and adipin genes (81). However, PUFAs did not have an effect on adipose tissue size (82). In rodent retroperitoneal (but not subcutaneous) adipose tissues, fatty acid synthase (FAS), hormone-sensitive lipase (HSL), phosphoenolpyruvate carboxykinase (PEPCK), lipoprotein lipase (LPL), CCAAT/enhancer binding protein α (C/EBP α), and leptin mRNA concentrations decrease with higher PUFA intake, suggesting targeting of the visceral fat pool (82). There are also indications that fat metabolism is enhanced by higher PUFA intake (83). Mitochondrial protein gene expression

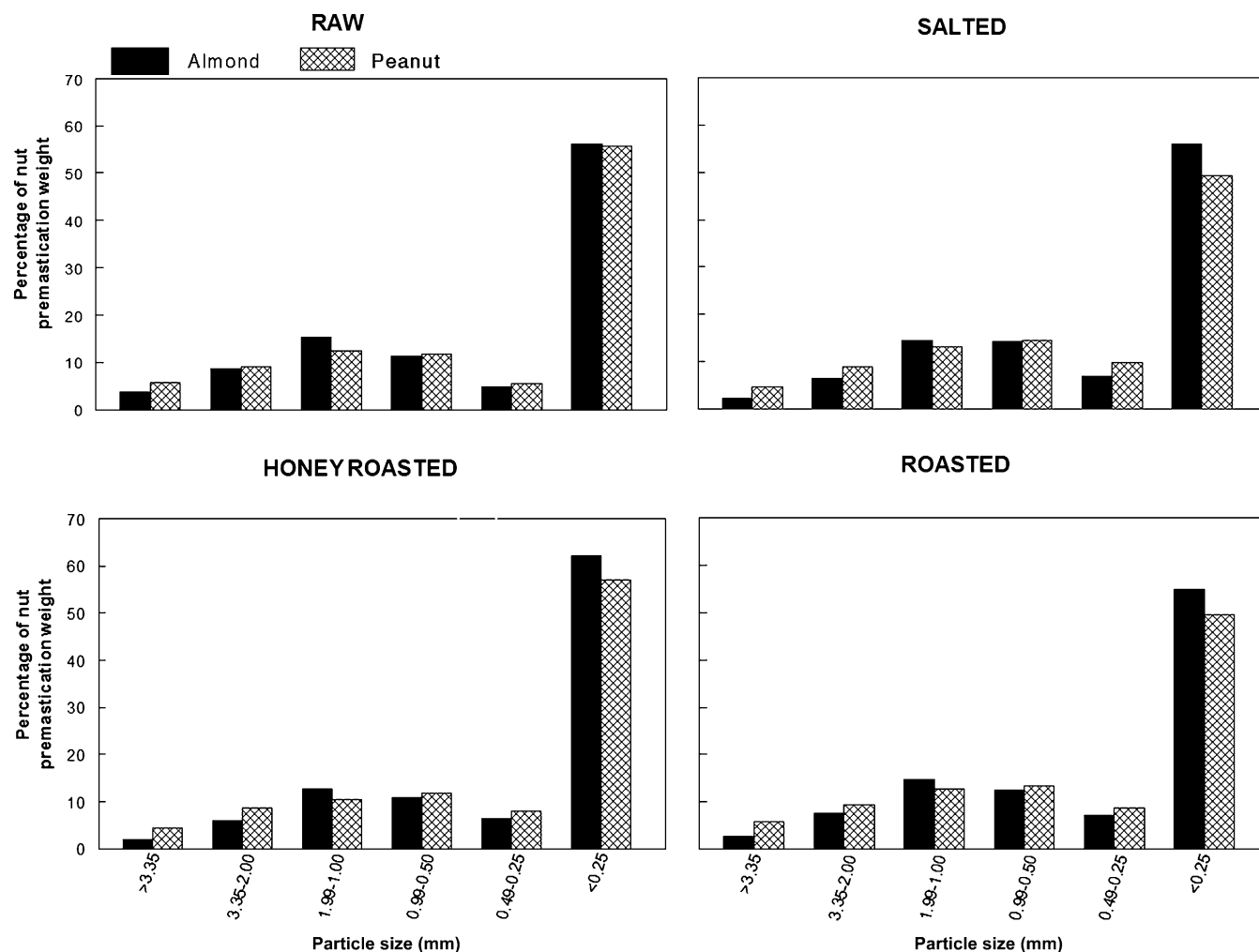


FIGURE 1. Particle sizes (in mm) of raw, salted, roasted, and honey roasted almonds and peanuts after mastication. The x axis indicates the size of particles after mastication before swallowing.

is upregulated in the epididymal fat of mice fed PUFAs (84). The expression of genes that regulate oxidative metabolism [eg, peroxisome proliferator-activated receptor α (*PPAR* α), peroxisome proliferator-activated receptor γ coactivator 1 α (*Pparg1a/Pgc1a*), and nuclear respiratory factor 1 (*Nrf1*)] are also elevated (84).

In one acute-feeding study, a high-PUFA diet (33% of energy) enriched with walnuts increased fat oxidation in humans (albeit not significantly) (16). In another study, fat oxidation was significantly elevated ($\sim 50\%$ higher compared with a control diet) when 30–35 g of walnuts were ingested by overweight and obese adults (85). The stronger effects noted in this trial may reflect the difference in participant BMI status. Blunted fat oxidation has been reported in adults with high body weight (86), but the inclusion of walnuts appears to reverse or normalize impaired fat oxidation. Notably, in the latter study, the dietary fat concentration and the composition of fat subtypes were matched, suggesting that the fat-oxidizing property of walnuts was not limited to their PUFA content alone. There are no human studies of fat oxidation with other nuts, which limits extrapolation of the walnut findings. Other nuts are richer sources of MUFAs compared with the high PUFA content of walnuts, and MUFAs are reported to induce comparable or higher

fat oxidation rates (87, 88). This suggests that equal or greater effects on fat oxidation may be expected with other nuts.

Several clinical trials have examined whether elevated fat oxidation induced by walnuts translates into fat mass loss over time. In one trial (89), the inclusion of walnuts in a weight-maintenance diet of type 2 diabetic adults led to a small reduction in body fat, although body weight remained stable during the 6-mo study period. Body fat increased in individuals who adhered to the control diet (low-PUFA), and the difference between the groups approached significance ($P = 0.057$). The trend persisted when the intervention period was extended to 1 year, where the inclusion of walnuts produced greater fat mass loss relative to the control group despite comparable weight in the groups (79). Early evidence suggests that the loss of fat mass derived predominantly from the subcutaneous and less from the visceral fat pools, although the size of both fat depots decreased over time in the walnut group (79). The effects of PUFAs on different body fat pools have been studied more intensively with the use of animal models (81, 90–95). This work consistently shows that higher PUFA intake reduces visceral fat. However, findings in humans, to date, do not replicate these results (79). Indeed, just the opposite has been reported, in which PUFAs appeared to

preferentially reduce subcutaneous fat. No explanation for the inconsistent outcomes between human and rodent studies is apparent. Because subcutaneous and visceral fats are part of total body fat, evidence has shown that visceral fat loss is primarily determined by total fat mass loss (96). Human studies incorporating different nuts into the diet at realistic doses are needed to determine the effect of nut consumption on body composition. Findings may yield insights for management of body fatness and risk of metabolic syndrome.

NUT CONSUMPTION AND BODY WEIGHT

The literature on nut consumption and body weight has been the topic of several reviews (76, 97–104). Generally, epidemiologic studies indicate that incorporating nuts into diets on a regular basis does not compromise, and may aid, weight maintenance (14, 105–111). Because energy balance is the ultimate determinant of body weight, not surprisingly, controlled feeding studies using almonds, walnuts, pecans, and macadamia nuts all indicate that nut consumption does not cause changes in body weight when energy intake is continually adjusted (14, 40, 112–115). More important, when total energy intake is less controlled, studies that involve the inclusion of nuts in habitual diets of free-living individuals have also shown that nut consumption does not lead to weight gain (36, 116–119). However, it must be noted that these were relatively short-term trials with limited power to detect small changes in body weight. Although there are reports of small, but significant increases in body weight with nut consumption (30, 120–122), the preponderance of evidence indicates that under controlled or free-living situations, nut consumption does not promote weight gain.

Several studies assessing the role of nut consumption in weight-maintenance programs have noted a decrease in body weight from baseline (32, 36, 40, 79, 113, 114). Whether this is due to a greater thermic effect of food or REE effect of the nuts compared with the foods they displaced in the diet has not been established. Nevertheless, current data indicate that the inclusion of nuts in a weight-maintenance program will not lead to weight gain and may aid weight loss.

The inclusion of nuts in energy-restriction regimens does not impede weight loss (115, 123–126). In several trials in which nuts did not augment weight loss (125, 126), there was a reduction in cardiovascular disease risk indexes in the nut-consuming groups, suggesting that such benefits derive from properties of the nuts rather than just weight change. There is a need for long-term randomized intervention studies with body weight as a primary outcome to establish the effect of nuts consumed daily in realistic quantities on maximal and sustainable weight loss.

CONCLUSIONS

It is now well established that body weight and fatness are functions of energy balance rather than the macronutrient content of the diet (125, 127, 128). Nuts are a high-fat, energy-dense food, but the evidence indicates that they pose little challenge to and may even aid weight management. This is attributable to the strong dietary compensation effects they elicit, inefficiency in the absorption of the energy they provide, and possibly an elevation of energy expenditure and fat oxidation. Although energy is the determinant of body weight and composition, the greater health

effects of diets will be determined by their macronutrient content and other constituents. Nuts are rich sources of unsaturated fats, minerals, vitamins, antioxidants, and fiber, which can contribute to a healthful diet.

The authors' responsibilities were as follows—SYT, JD, and RDM: conceived the study and shared equal responsibility in writing the manuscript and of its final content. All authors read and approved the final manuscript. RDM receives research support from the Almond Board of California. SYT and JD had no conflicts of interest.

REFERENCES

- Segura R, Javierre C, Lizarraga MA, Ros E. Other relevant components of nuts: phytosterols, folate and minerals. *Br J Nutr* 2006;96 (suppl 2):S36–44.
- López-Uriarte P, Bullo M, Casas-Agustench P, Babio N, Salas-Salvado J. Nuts and oxidation: a systematic review. *Nutr Rev* 2009;67:497–508.
- Varela P, Aguilera JM, Fiszman S. Quantification of fracture properties and microstructural features of roasted Marcona almonds by image analysis. *Food Sci Technol* 2008;41(1):10–7.
- Varela P, Salvador A, Fiszman S. On the assessment of fracture in brittle foods: the case of roasted almonds. *Food Res Int* 2008;41:544–51.
- Kong F, Oztop MH, Singh RP, McCarthy MJ. Effects of boiling, roasting and frying on disintegration of peanuts in simulated gastric environment. *Food Sci Technol* 2013;50:32–8.
- Varela P, Salvador A, Gambaro A, Fiszman S. Texture concepts for consumers: a better understanding of crispy-crunchy sensory perception. *Eur Food Res Technol* 2008;226:1081–90.
- Inman JJ. The role of sensory-specific satiety in attribute-level variety seeking. *J Consum Res* 2001;28:105–20.
- International Food Information Council Foundation. 2011 Food and health survey: consumer attitudes toward food safety, nutrition & health. Washington, DC: International Food Information Council Foundation, 2011.
- Ward PR, Mamerow L, Henderson J, Taylor AW, Meyer SB, Coveney J. The social determinants of food purchasing practices: who chooses price-before-health, taste-before-price or organic foods in Australia? *Food Nutr Sci* 2012;3:461–70.
- Reis CEG, Ribeiro DN, Costa NMB, Bressan J, Alfenas RC, Mattes RD. Acute and second-meal effects of peanuts on glycaemic response and appetite in obese women with high type 2 diabetes risk: a randomised cross-over clinical trial. *Br J Nutr* 2013;109:2015–23.
- Pasman WJ, Heimerikx J, Rubingh CM, van den Berg R, O'Shea M, Gambelli L, Hendriks HFJ, Einerhand AWC, Scott C, Keizer HG, et al. The effect of Korean pine nut oil on in vitro CCK release, on appetite sensations and on gut hormones in post-menopausal overweight women. *Lipids Health Dis* 2008;7:10.
- Cassady BA, Hollis JH, Fulford AD, Considine RV, Mattes RD. Mastication of almonds: effects of lipid bioaccessibility, appetite, and hormone response. *Am J Clin Nutr* 2009;89:794–800.
- Hutchings SC, Foster KD, Bronlund JE, Lentle RG, Jones JR, Morgenstern MP. Mastication of heterogeneous foods: peanuts inside two different food matrices. *Food Qual Prefer* 2011;22:332–9.
- Griel AE, Eissenstat B, Juturu V, Hsieh G, Kris-Etherton PM. Improved diet quality with peanut consumption. *J Am Coll Nutr* 2004; 23:660–8.
- King JC, Blumberg J, Ingwersen L, Jenab M, Tucker KL. Tree nuts and peanuts as components of a healthy diet. *J Nutr* 2008;138(suppl): 1736S–40S.
- Casas-Agustench P, Lopez-Uriarte P, Bullo M, Ros E, Gomez-Flores A, Salas-Salvado J. Acute effects of 3 high-fat meals with different saturation on energy expenditure, substrate oxidation and satiety. *Clin Nutr* 2009;28:39–45.
- Mori AM, Considine RV, Mattes RD. Acute and second-meal effects of almond form in impaired glucose tolerant adults: a randomized crossover trial. *Nutr Metab (Lond)* 2011;8:6–8.
- Kirkmeyer SV, Mattes RD. Effects of food attributes on hunger and food intake. *Int J Obes Relat Metab Disord* 2000;24:1167–75.

19. Tan SY, Mattes RD. Appetitive, dietary and health effects of almonds consumed with meals or as snacks: a randomized, controlled trial. *Eur J Clin Nutr* 2013;67:1205–14.
20. Brennan AM, Sweeney LL, Liu X, Mantzoros CS. Walnut consumption increases satiety but has no effect on insulin resistance or the metabolic profile over a 4-day period. *Obesity (Silver Spring)* 2010;18:1176–82.
21. Zaveri S, Drummond S. The effect of including a conventional snack (cereal bar) and nonconventional snack (almonds) on hunger, eating frequency, dietary intake and body weight. *J Hum Nutr Diet* 2009;22:461–8.
22. Devitt AA, Kuevi A, Coelho SB, Lartey A, Lokko P, Costa N, Bressan J, Mattes RD. Appetitive and dietary effects of consuming an energy-dense food (peanuts) with or between meals by snackers and non-snackers. *J Nutr Metab* 2011;2011:9.
23. Mattes RD. Food palatability, rheology, and meal patterning. *J Parenter Enteral Nutr* 2008;32:572–4.
24. Lawton CL, Delargy HJ, Brockman J, Smith FC, Blundell JE. The degree of saturation of fatty acids influences post-ingestive satiety. *Br J Nutr* 2000;83:473–82.
25. Maljaars J, Romeyn EA, Haddeman E, Peters HPF, Masclee AAM. Effect of fat saturation on satiety, hormone release, and food intake. *Am J Clin Nutr* 2009;89:1019–24.
26. Langhans W, Leitner C, Arnold M. Dietary fat sensing via fatty acid oxidation in enterocytes: possible role in the control of eating. *Am J Physiol Regul Integr Comp Physiol* 2011;300:R554–65.
27. French SJ, Conlon CA, Mutuma ST, Arnold M, Read NW, Meijer G, Francis J. The effects of intestinal infusion of long-chain fatty acids on food intake in humans. *Gastroenterology* 2000;119:943–8.
28. Strik CM, Lithander F, McGill A-T, MacGibbon AK, McArdle BH, Poppitt SD. No evidence of differential effects of SFA, MUFA or PUFA on post-ingestive satiety and energy intake: a randomised trial of fatty acid saturation. *Nutr J* 2010;9:24.
29. Alfenas RC, Mattes RD. Effect of fat sources on satiety. *Obes Res* 2003;11:183–7.
30. Iyer SS, Boateng LA, Sales RL, Coelho SB, Lokko P, Monteiro JB, Costa NM, Mattes RD. Effects of peanut oil consumption on appetite and food choice. *Int J Obes (Lond)* 2006;30:704–10.
31. Fraser GE, Bennett HW, Jaceldo KB, Sabate J. Effect on body weight of a free 76 kilojoule (320 calorie) daily supplement of almonds for six months. *J Am Coll Nutr* 2002;21:275–83.
32. Jenkins DJA, Kendall CWC, Marchie A, Parker TL, Connelly PW, Qian W, Haight JS, Faulkner D, Vidgen E, Lapsley KG, et al. Dose response of almonds on coronary heart disease risk factors: blood lipids, oxidized low-density lipoproteins, lipoprotein(a), homocysteine, and pulmonary nitric oxide: a randomized, controlled, crossover trial. *Circulation* 2002;106:1327–32.
33. Hollis J, Mattes R. Effect of chronic consumption of almonds on body weight in healthy humans. *Br J Nutr* 2007;98:651–6.
34. Mercanligil SM, Arslan P, Alasalvar C, Okut E, Akgül E, Pnar A, Geyik PÖ, Tokgözü L, Shahid F. Effects of hazelnut-enriched diet on plasma cholesterol and lipoprotein profiles in hypercholesterolemic adult men. *Eur J Clin Nutr* 2007;61:212–20.
35. Yücesan FB, Örem A, Kural BV, Örem C, Turan I. Hazelnut consumption decreases the susceptibility of LDL to oxidation, plasma oxidized LDL level and increases the ratio of large/small LDL in normolipidemic healthy subjects. *Anadolu Kardiyol Derg* 2010;10:28–35.
36. Garg ML, Blake RJ, Wills RBH. Macadamia nut consumption lowers plasma total and LDL cholesterol levels in hypercholesterolemic men. *J Nutr* 2003;133:1060–3.
37. Alper CM, Mattes RD. Effects of chronic peanut consumption on energy balance and hedonics. *Int J Obes Relat Metab Disord* 2002;26:1129–37.
38. Johnston CS, Buller AJ. Vinegar and peanut products as complementary foods to reduce postprandial glycemia. *J Am Diet Assoc* 2005;105:1939–42.
39. Morgan WA, Clayshulte BJ. Pecans lower low density lipoprotein cholesterol in people with normal lipid levels. *J Am Diet Assoc* 2000;100:312–8.
40. Rajaram S, Burke K, Connell B, Myint T, Sabaté J. A mono-unsaturated fatty acid-rich pecan-enriched diet favorably alters the serum lipid profile of healthy men and women. *J Nutr* 2001;131:2275–9.
41. Kocyigit A, Koylu AA, Keles H. Effects of pistachio nuts consumption on plasma lipid profile and oxidative status in healthy volunteers. *Nutr Metab Cardiovasc Dis* 2006;16:202–9.
42. Sheridan MJ, Cooper JN, Erario M, Cheifetz CE. Pistachio nut consumption and serum lipid levels. *J Am Coll Nutr* 2007;26:141–8.
43. Almaro RU, Vonghavaravat V, Wong R, Kasim-Karakas SE. Effects of walnut consumption on plasma fatty acids and lipoproteins in combined hyperlipidemia. *Am J Clin Nutr* 2001;74:72–9.
44. Stunkard AJ, Messick S. The Three-Factor Eating Questionnaire to measure dietary restraint, disinhibition and hunger. *J Psychosom Res* 1985;29:71–83.
45. Mandalari G, Faulks RM, Rich GT, Lo Turco V, Picout DR, Lo Curto RB, Bisignano G, Dugo P, Dugo G, Waldron KW, et al. Release of protein, lipid, and vitamin E from almond seeds during digestion. *J Agric Food Chem* 2008;56:3409–16.
46. Baer DJ, Rumpel WV, Miles CW, Fahey GCJ. Dietary fiber decreases the metabolizable energy content and nutrient digestibility of mixed diets fed to humans. *J Nutr* 1997;127:579–86.
47. Slavin JL. Dietary fiber and body weight. *Nutrition* 2005;21:411–8.
48. Mallillin AC, Trinidad TP, Raterter R, Dagbay K, Loyola AS. Dietary fibre and fermentability characteristics of root crops and legumes. *Br J Nutr* 2008;100:485–8.
49. Mandalari G, Faulks RM, Bisignano C, Waldron KW, Narbad A, Wickham MSJ. In vitro evaluation of the prebiotic properties of almond skins (*Amygdalus communis* L.). *FEMS Microbiol Lett* 2010;304:116–22.
50. Tulipani S, Llorach R, Jáuregui O, López-Urriarte P, Garcia-Aloy M, Bullo M, Salas-Salvado J, Andrés-Lacueva C. Metabolomics unveils urinary changes in subjects with metabolic syndrome following 12-week nut consumption. *J Proteome Res* 2011;10:5047–58.
51. Forde CG, van Kuijk N, Thaler T, de Graaf C, Martin N. Oral processing characteristics of solid savoury meal components, and relationship with food composition, sensory attributes and expected satiety. *Appetite* 2013;60:208–19.
52. Fujise T, Yoshimatsu H, Kurokawa M, Fukagawa K, Nakata M, Sakata T. Food consistency modulates eating volume and speed through brain histamine in rat. *Brain Res Bull* 1993;32:555–9.
53. Zhang XJ, Zhou LH, Ban X, Liu DX, Jiang W, Liu XM. Decreased expression of CD36 in circumvallate taste buds of high-fat diet induced obese rats. *Acta Histochem* 2011;113:663–7.
54. Kong F, Singh RP. Disintegration of solid foods in human stomach. *J Food Sci* 2008;73:R67–80.
55. Brand JG, Cagan RH, Naim M. Chemical senses in the release of gastric and pancreatic secretions. *Annu Rev Nutr* 1982;2:249–76.
56. Teff K. Cephalic phase insulin release in humans: mechanism and function. In: Fernstrom J, Miller G, eds. *Appetite and body weight regulation*. Boca Raton, FL: CRC Press, 1994:1688–95.
57. Power ML, Schulkin J. Anticipatory physiological regulation in feeding biology: cephalic phase responses. *Appetite* 2008;50:194–206.
58. Zafra MA, Molina F, Puerto A. The neural/cephalic phase reflexes in the physiology of nutrition. *Neurosci Biobehav Rev* 2006;30:1032–44.
59. Rémond D, Machebeuf M, Yven C, Buffière C, Mioche L, Mosoni L, Mirand PP. Postprandial whole-body protein metabolism after a meal is influenced by chewing efficiency in elderly subjects. *Am J Clin Nutr* 2007;85:1286–92.
60. Björck I, Granfeldt Y, Liljeberg H, Tovar J, Asp NG. Food properties affecting the digestion and absorption of carbohydrates. *Am J Clin Nutr* 1994;59(suppl):699S–705S.
61. Novotny JA, Gebauer SK, Baer DJ. Discrepancy between the Atwater factor predicted and empirically measured energy values of almonds in human diets. *Am J Clin Nutr* 2012;96:296–301.
62. Levine J, Baukol P, Pavlidis I. The energy expanded in chewing gum. *N Engl J Med* 1999;341:2100 (editorial).
63. Murakami K, Sasaki S, Takahashi Y, Uenishi K, Yamasaki M, Hayabuchi H, Goda T, Oka J, Baba K, Ohki K, et al. Hardness (difficulty of chewing) of the habitual diet in relation to body mass index and waist circumference in free-living Japanese women aged 18–22 y. *Am J Clin Nutr* 2007;86:206–13.
64. Traoret CJ, Lokko P, Cruz AC, Oliveira CG, Costa NM, Bressan J, Alfenas RC, Mattes RD. Peanut digestion and energy balance. *Int J Obes (Lond)* 2008;32:322–8.

65. Ellis PR, Kendall CWC, Ren Y, Parker C, Pacy JF, Waldron KW, Jenkins DJA. Role of cell walls in the bioaccessibility of lipids in almond seeds. *Am J Clin Nutr* 2004;80:604–13.
66. Haddad E, Sabate J. Effects of pecan consumption on stool fat. *FASEB J* 2000;14:A294 (abstr).
67. Zemaitis J, Sabate J. Effect of almond consumption on stool weight and stool fat. *FASEB J* 2001;15:A602 (abstr).
68. Levine AS, Silvis SE. Absorption of whole peanuts, peanut oil, and peanut butter. *N Engl J Med* 1980;303:917–8.
69. Baer DJ, Gebauer SK, Novotny JA. Measured energy value of pistachios in the human diet. *Br J Nutr* 2012;107:120–5.
70. Kendall CWC, Jenkins DJA, Marchie A, Ren Y, Ellis PR, Lapsley KG. Energy availability from almonds: implications for weight loss and cardiovascular health. A randomized controlled dose response trial. *FASEB J* 2003;17:A339 (abstr).
71. Berry SEE, Tydeman EA, Lewis HB, Phalora R, Rosborough J, Picout DR, Ellis PR. Manipulation of lipid bioaccessibility of almond seeds influences postprandial lipemia in healthy human subjects. *Am J Clin Nutr* 2008;88:922–9.
72. Lapsley K, Clemens R. Food, medicine & health—re-examining the energy value of food. *Food Technol* 2012;66:17.
73. Mattes RD. Sensory influences on food intake and utilization in humans. *Hum Nutr* 1987;41(2):77–95.
74. Frecka JM, Hollis JH, Mattes RD. Effects of appetite, BMI, food form and flavor on mastication: almonds as a test food. *Eur J Clin Nutr* 2008.
75. McKiernan F, Mattes RD. Effects of peanut processing on masticatory performance during variable appetitive states. *J Nutr Metab* 2010;2010:6.
76. Mattes RD, Kris-Etherton PM, Foster GD. Impact of peanuts and tree nuts on body weight and healthy weight loss. *J Nutr* 2008;138(suppl):1741S–5S.
77. Kris-Etherton PM, Hu FB, Ros E, Sabate J. The role of tree nuts and peanuts in the prevention of coronary heart disease: multiple potential mechanisms. *J Nutr* 2008;138(suppl):1746S–51S.
78. Jenkins DJA, Hu FB, Tapsell LC, Josse AR, Kendall CWC. Possible benefit of nuts in type 2 diabetes. *J Nutr* 2008;138(suppl):1752S–6S.
79. Tapsell LC, Batterham MJ, Teuss G, Tan S-Y, Dalton S, Quick CJ, Gillen LJ, Charlton K. Long-term effects of increased dietary polyunsaturated fat from walnuts on metabolic parameters in type 2 diabetes. *Eur J Clin Nutr* 2009;63:1008–15.
80. Coelho SB, de Sales RL, Iyer SS, Bressan J, Costa NMB, Lokko P, Mattes RD. Effects of peanut oil load on energy expenditure, body composition, lipid profile, and appetite in lean and overweight adults. *Nutrition* 2006;22:585–92.
81. Okuno M, Kajiwara K, Imai S, Kobayashi T, Honma N, Maki T, Suruga K, Goda T, Takase S, Muto Y, et al. Perilla oil prevents the excessive growth of visceral adipose tissue in rats by down-regulating adipocyte differentiation. *J Nutr* 1997;127:1752–7.
82. Raclot T, Groscolas R, Langin D, Ferre P. Site-specific regulation of gene expression by n-3 polyunsaturated fatty acids in rat white adipose tissues. *J Lipid Res* 1997;38:1963–72.
83. Crespo N, Esteve-Garcia E. Dietary linseed oil produces lower abdominal fat deposition but higher de novo fatty acid synthesis in broiler chickens. *Poult Sci* 2002;81:1555–62.
84. Flachs P, Horakova O, Brauner P, Rossmeisl M, Pecina P, Franssen-van Hal N, Ruzickova J, Sponarova J, Drahotka Z, Vlcek C, et al. Polyunsaturated fatty acids of marine origin upregulate mitochondrial biogenesis and induce β -oxidation in white fat. *Diabetologia* 2005;48:2365–75.
85. Tapsell L, Batterham MJ, Tan S-Y, Warensjo E. The effects of a calorie controlled diet containing walnuts on substrate oxidation during 8 hours in a room calorimeter. *J Am Coll Nutr* 2009;28:611–7.
86. Kim JY, Hickner RC, Cortright RL, Dohm GL, Houmard JA. Lipid oxidation is reduced in obese human skeletal muscle. *Am J Physiol Endocrinol Metab* 2000;279:E1039–44.
87. Pan DA, Hulbert AJ, Storlien LH. Dietary fats, membrane phospholipids and obesity. *J Nutr* 1994;124:1555–65.
88. Jones PJ, Pencharz PB, Clandinin MT. Whole body oxidation of dietary fatty acids: implications for energy utilization. *Am J Clin Nutr* 1985;42:769–77.
89. Tapsell LC, Gillen LJ, Patch CS, Batterham M, Owen A, Bare M, Kennedy M. Including walnuts in a low-fat/modified-fat diet improves HDL cholesterol-to-total cholesterol ratios in patients with type 2 diabetes. *Diabetes Care* 2004;27:2777–83.
90. Belzung F, Raclot T, Groscolas R. Fish oil n-3 fatty acids selectively limit the hypertrophy of abdominal fat depots in growing rats fed high-fat diets. *Am J Physiol* 1993;264:R1111–8.
91. Jang IS, Hwang DY, Chae KR, Lee JE, Kim YK, Kang TS, Hwang JH, Lim CH, Huh YB. Role of dietary fat type in the development of adiposity from dietary obesity susceptible Sprague-Dawley rats. *Br J Nutr* 2003;89:429–38.
92. Hun CS, Hasegawa K, Kawabata T, Kato M, Shimokawa T, Kagawa Y. Increased uncoupling protein2 mRNA in white adipose tissue, and decrease in leptin, visceral fat, blood glucose, and cholesterol in KK-Ay mice fed with eicosapentaenoic and docosahexaenoic acids in addition to linolenic acid. *Biochem Biophys Res Commun* 1999;259:85–90.
93. Sanz M, Lopez-Bote CJ, Menoyo D, Bautista JM. Abdominal fat deposition and fatty acid synthesis are lower and β -oxidation is higher in broiler chickens fed diets containing unsaturated rather than saturated fat. *J Nutr* 2000;130:3034–7.
94. Crespo N, Esteve-Garcia E. Dietary fatty acid profile modifies abdominal fat deposition in broiler chickens. *Poult Sci* 2001;80:71–8.
95. Newman RE, Bryden WL, Fleck E, Ashes JR, Buttermer WA, Storlien LH, Downing JA. Dietary n-3 and n-6 fatty acids alter avian metabolism: metabolism and abdominal fat deposition. *Br J Nutr* 2002;88:11–8.
96. Hallgreen CE, Hall KD. Allometric relationship between changes of visceral fat and total fat mass. *Int J Obes (Lond)* 2008;32:845–52.
97. Martínez-González MA, Bes-Rastrollo M. Nut consumption, weight gain and obesity: epidemiological evidence. *Nutr Metab Cardiovasc Dis* 2011;21(suppl 1):S40–5.
98. Flores-Mateo G, Rojas-Rueda D, Basora J, Ros E, Salas-Salvado J. Nut intake and adiposity: meta-analysis of clinical trials. *Am J Clin Nutr* 2013;97:1346–55.
99. Natoli S, McCoy P. A review of the evidence: nuts and body weight. *Asia Pac J Clin Nutr* 2007;16:588–97.
100. Rajaram S, Sabaté J. Nuts, body weight and insulin resistance. *Br J Nutr* 2006;96(suppl 2):S79–86.
101. Russo P, Siani A. The role of nuts in the optimal diet: time for a critical appraisal? *Nutr Metab Cardiovasc Dis* 2012;22:1019–23.
102. Sabaté J. Nut consumption and change in weight: the weight of the evidence. *Br J Nutr* 2007;98:456–7.
103. Vadivel V, Kunyanga CN, Biesalski HK. Health benefits of nut consumption with special reference to body weight control. *Nutrition* 2012;28:1089–97.
104. Jackson CL, Hu FB. Long-term associations of nut consumption with body weight and obesity. *Am J Clin Nutr* 2014;100(suppl):408S–11S.
105. Fraser GE, Sabate J, Beeson WL, Strahan TM. A possible protective effect of nut consumption on risk of coronary heart disease: the Adventist Health Study. *Arch Intern Med* 1992;152:1416–24.
106. Albert CM, Gaziano JM, Willett WC, Manson JE. Nut consumption and decreased risk of sudden cardiac death in the Physicians' Health Study. *Arch Intern Med* 2002;162:1382–7.
107. Bes-Rastrollo M, Sabate J, Gomez-Gracia E, Alonso A, Martinez JA, Martinez-Gonzalez MA. Nut consumption and weight gain in a Mediterranean cohort: the SUN study. *Obesity (Silver Spring)* 2007;15:107–16.
108. Ellsworth JL, Kushi LH, Folsom AR. Frequent nut intake and risk of death from coronary heart disease and all causes in postmenopausal women: the Iowa Women's Health Study. *Nutr Metab Cardiovasc Dis* 2001;11:372–7.
109. Hu FB, Stampfer MJ, Manson JE, Rimm EB, Colditz GA, Rosner BA, Speizer FE, Hennekens CH, Willett WC. Frequent nut consumption and risk of coronary heart disease in women: prospective cohort study. *BMJ* 1998;317:1341–5.
110. Jiang R, Manson JE. Nut and peanut butter consumption and risk of type 2 diabetes in women. *JAMA* 2002;288:2554–60.
111. Mozaffarian D, Hao T, Rimm EB, Willett WC, Hu FB. Changes in diet and lifestyle and long-term weight gain in women and men. *N Engl J Med* 2011;364:2392–404.
112. Curb JD, Wergowske G, Dobbs JC, Abbott RD, Huang B. Serum lipid effects of a high-monounsaturated fat diet based on macadamia nuts. *Arch Intern Med* 2000;160:1154–8.

113. Iwamoto M, Imaizumi K, Sato M, Hirooka Y, Sakai K, Takeshita A, Kono M. Serum lipid profiles in Japanese women and men during consumption of walnuts. *Eur J Clin Nutr* 2002;56:629–37.
114. Sabaté J, Fraser GE, Burke K, Knutsen SF, Bennett H, Lindstedt KD. Effects of walnuts on serum lipid levels and blood pressure in normal men. *N Engl J Med* 1993;328:603–7.
115. Wien MA, Sabate JM, Ikle DN, Cole SE, Kandeel FR. Almonds vs complex carbohydrates in a weight reduction program. *Int J Obes Relat Metab Disord* 2003;27:1365–72.
116. Abbey M, Noakes M, Belling GB, Nestel PJ. Partial replacement of saturated fatty acids with almonds or walnuts lowers total plasma cholesterol and low-density-lipoprotein cholesterol. *Am J Clin Nutr* 1994;59:995–9.
117. Colquhoun DM, Humphries JA, Moores D, Somerset SM. Effects of a macadamia nut enriched diet on serum lipids and lipoproteins compared to a low fat diet. *Food Aust: Off J Counc Aust Food Technol Assoc Aust Inst Food Sci Technol* 1996;48:216–22.
118. Spiller GA, Jenkins DA, Bosello O, Gates JE, Cragen LN, Bruce B. Nuts and plasma lipids: an almond-based diet lowers LDL-C while preserving HDL-C. *J Am Coll Nutr* 1998;17:285–90.
119. Zambón D, Sabate J, Munoz S, Campero B, Casals E, Merlos M, Laguna JC, Ros E. Substituting walnuts for monounsaturated fat improves the serum lipid profile of hypercholesterolemic men and women: a randomized crossover trial. *Ann Intern Med* 2000;132:538–46.
120. Sabaté J, Cordero-MacIntyre Z, Siapco G, Torabian S, Haddad E. Does regular walnut consumption lead to weight gain? *Br J Nutr* 2005;94:859–64.
121. Lovejoy JC, Most MM, Lefevre M, Greenway FL, Rood JC. Effect of diets enriched in almonds on insulin action and serum lipids in adults with normal glucose tolerance or type 2 diabetes. *Am J Clin Nutr* 2002;76:1000–6.
122. Durak I, Köksal I, Kaçmaz M, Büyükoçak S, Cimen BM, Öztürk HS. Hazelnut supplementation enhances plasma antioxidant potential and lowers plasma cholesterol levels. *Clin Chim Acta* 1999;284:113–5.
123. Li Z, Song R, Nguyen C, Zerlin A, Karp H, Naowamondhol K, Thames G, Gao K, Li L, Tseng C-H, et al. Pistachio nuts reduce triglycerides and body weight by comparison to refined carbohydrate snack in obese subjects on a 12-week weight loss program. *J Am Coll Nutr* 2010;29:198–203.
124. McManus K, Antinoro L, Sacks F. A randomized controlled trial of a moderate-fat, low-energy diet compared with a low fat, low-energy diet for weight loss in overweight adults. *Int J Obesity Rel Metab Disord* 2001;25(10):1503–11.
125. Foster GD, Shantz KL, Veur SSV, Oliver TL, Lent MR, Virus A, Szapary PO, Rader DJ, Zemel BS, Gilden-Tsai A. A randomized trial of the effects of an almond-enriched, hypocaloric diet in the treatment of obesity. *Am J Clin Nutr* 2012;96:249–54.
126. Pelkman CL, Fishell VK, Maddox DH, Pearson TA, Mauger DT, Kris-Etherton PM. Effects of moderate-fat (from monounsaturated fat) and low-fat weight-loss diets on the serum lipid profile in overweight and obese men and women. *Am J Clin Nutr* 2004;79:204–12.
127. Sacks FM, Bray GA, Carey VJ, Smith SR, Ryan DH, Anton SD, McManus K, Champagne CM, Bishop LM, Laranjo N, et al. Comparison of weight-loss diets with different compositions of fat, protein, and carbohydrates. *N Engl J Med* 2009;360:859–73.
128. Gardner CD, Kiazand A, Alhassan S, Kim S, Stafford RS, Balise RR, Kraemer HC, King AC. Comparison of the Atkins, Zone, Ornish, and LEARN diets for change in weight and related risk factors among overweight premenopausal women: the A TO Z Weight Loss Study: a randomized trial. *JAMA* 2007;297:969–77.