Omega-3 intake is low around the world. A new study suggests that intake may need to be increased to reduce cardiovascular risk.

According to a meta-analysis published in Mayo Clinic Proceedings covering 40 clinical trials, EPA/DHA supplementation is associated with major reductions in cardiovascular events:

- 35% reduced risk of fatal myocardial infarction (MI)*
- 13% reduced risk of MI*
- 10% reduced risk of coronary heart disease (CHD) events*
- 9% reduced risk of CHD mortality*
- 5% reduction of cardiovascular disease (CVD) events

The protective effect of EPA+DHA increased with dosage. An additional 1 g/day of EPA+DHA results in an additional:

- 9.0% reduction in the risk of myocardial infarction*
- 5.8% reduction in the risk of cardiovascular disease events*

* = statistically significant

EPA and DHA omega-3s are present naturally in fatty fish but achieving cardioprotective levels through diet alone may be a challenge. Dietary/food supplements or prescription omega-3s are reasonable alternatives to increase omega-3 intake. Patients should aim for 1000 mg of EPA+DHA per day.

Whether available by prescription or as dietary/food supplements, the active ingredients are the same: EPA and/or DHA. The advantage of supplements is that they are readily accessible, affordable and available without a prescription.

Talk to your patients about increasing omega-3 intake.

For more information about the science-backed benefits of EPA and DHA omega-3s, visit FatsOfLife.com

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