SOY: THE REAL DEAL

MYTHS VERSUS FACTS



What's the deal with soy?

There's a lot of misinformation percolating on the Internet about soy, and finding accurate and relevant facts to make an informed decision can be difficult at best. This guide should help shed some light on the peskiest falsehoods and help you navigate between the myths and the benefits of soy.

WHERE ARE THE SOY MYTHS COMING FROM?

There are actually only a few so-called "soy bashers" who are the main instigators in the war on soy. These anti-soy enthusiasts happen to be very vocal, and they're shouting most loudly about the effects of *isoflavones*, a group of naturally occurring, estrogenlike (read: estrogen-like, not estrogen) plant chemicals that are found in soybeans.^[1]

But, really, almost all the negative reports about soy stem from studies that involve rodents. The thing is, rodents *metabolize soy much differently than humans*, [2] so using these studies as scientific models for how soy foods affect humans isn't all that helpful. Therefore, let's take a look at **human** data.

HUMANS AND SOY

Other than those who are allergic to soy (statistics say less than 8%), [3] the vast majority of the medical and scientific communities agrees that people can safely consume soy foods. Numerous scientific results obtained from human data, population studies, and clinical research all validate a variety of health benefits – as well as the safety – of regular consumption of soy foods. [4] In fact, there are strong indications that soy foods offer *significant* health benefits, including reducing the risk of heart disease. [5]

мүтн 01

Consuming soy can increase the risk of breast cancer

The relationship between breast

cancer and soy is probably one of the most contentious issues out there – online and in real life. Regardless of who's yelling the loudest, the fact of the matter is that for more than 20 years, the U.S. National Cancer Institute, the Canadian Cancer Society, and laboratories around the world have been rigorously investigating the role of soy in breast cancer prevention. [6] Breast cancer P-R-E-V-E-N-T-I-O-N. Why? Well, Asian populations that traditionally consume soy as

Breast cancer P-R-E-V-E-N-T-I-O-N. Why? Well, Asian populations that traditionally consume soy as a dietary staple typically have far lower breast cancer rates than populations consuming a typical Western diet. And because roughly two thirds of breast cancer is estrogen sensitive, the anti-estrogenic effects of soy isoflavones may actually help decrease breast cancer risk. To top it off, studies have found that soy foods and soy isoflavones don't increase breast tissue density or cause breast cells to multiply, unlike hormone therapy does. In fact, consuming soy during the early years of life (the first 20 years, to be specific) may help reduce

And, in two recently published studies, soy consumption has actually been shown to be associated with reduced recurrence rates and improved survival in people with breast cancer.^[10, 11]

the risk of breast cancer later in life.[9]



мутн 02

Soy causes thyroid problems

If you're a healthy human, then according to more than 20 studies that have looked at the effects

of consuming soy foods (e.g., tofu), soy protein, and soy isoflavones on thyroid function, you have nothing to worry about.[12] In long-term studies (up to three years), no effect whatsoever was found in the thyroid functions of subjects who consumed copious amounts of soy.[13] However, it's important to note that people who take synthetic thyroid hormone medication should avoid taking it at the same time they ingest soy to avoid possible interference with the medication's absorption. But that doesn't mean it's necessary to avoid soy altogether. No, it just comes down to timing and consistency. If thyroid medication is taken as prescribed (typically on an empty stomach and 30 to 60 minutes before breakfast), and a consistent amount of soy is consumed in your day-to-day diet, then you're good to go.

мутн 03

Men shouldn't consume soy

This myth keeps coming back thanks to two reports published in scientific literature that have

described negative effects of excessive soy consumption – in exactly *two individuals*: men who consumed a massive 14 to 20 servings of soy per day!^[14, 15]

In contrast, a comprehensive scientific analysis of the research done on more average intakes of soy – more than 30 individual studies, we might add – found that neither soy foods nor *isoflavones* have any effect on male testosterone levels. That's right; in more than 30 individual studies, it was determined that neither soy foods nor isoflavones have any effect on male testosterone levels.^[16]

мүтн 04

There's no evidence of the health benefits of soy, including protection against heart disease

It's actually quite the opposite. Research suggests that incorporating soy foods into a healthful diet has many proven benefits for the following:

Osteoporosis

 Helps reduce bone fractures in postmenopausal women^[17, 18]

Menopause

 Reduces the severity and frequency of hot flashes (by 50% on average)^[19]

Prostate health

Lowers the risk of cancer^[20]

Heart disease

- Decreases LDL cholesterol (the bad cholesterol)^[21]
- Gives a modest boost to HDL cholesterol (the good cholesterol)
- Reduces triglyceride levels
- Lowers blood pressure[22]
- Promotes artery health^[23]

Basically, when soy foods replace conventional sources of protein (usually animal protein) in Western diets, all kinds of good things can and do happen. For instance, saturated fat intake is reduced and polyunsaturated fat intake is increased, which has the comparable cholesterollowering effect of the kind of soluble fibre found in oat bran. [24] In fact, as early as 1999, the U.S. Food and Drug Administration (FDA) allowed the following claim: "25 grams of soy protein a day, as part of a diet low in saturated fat and cholesterol, may reduce the risk of heart disease."

Soy and your diet

Canada's Food Guide and the 2010 U.S. Dietary Guidelines call for increasing the intake of plant protein in the average diet, and soy foods are an excellent way to do that. Based on soy intake in Asians – who have been consuming soy for thousands of years – as well as the amounts of soy shown to be beneficial in numerous clinical studies,

a good goal is to consume about 15 to 25 grams of soy protein per day (check product labels to determine how many servings this would be).









REFERENCES

- Oseni T, Patel R, Pyle J, Jordan VC. Selective estrogen receptor modulators and phytoestrogens. Planta Med. 2008. 74, 1656-65.
- Gu L, House SE, Prior RL, Fang N, Ronis MJ, Clarkson TB, Wilson ME, Badger TM. Metabolic phenotype of isoflavones differ among female rats, pigs, monkeys, and women. *J. Nutr.* 2006, 136, 1215-21.
- Vierk KA, Koehler KM, Fein SB, Street DA. Prevalence of self-reported food allergy in American adults and use of food labels. J. Allergy Clin. Immunol. 2007, 119, 1504-10.
- Zeitler P, Solberg P. Food and levothyroxine administration in infants and children. J. Pediatr. 2010, 95, 3067-72.
- Messina M, Watanabe S, Setchell KD. Report on the 8th International Symposium on the Role of Soy in Health Promotion and Chronic Disease Prevention and Treatment. J. Nutr. 2009, 139, 796S-802S.
- Messina M, Barnes S. The role of soy products in reducing risk of cancer. J. Natl. Cancer Inst. 1991, 83, 541-6.
- Wakai K, Suzuki S, Ohno Y, Kawamura T, Tamakoshi A, Aoki R. Epidemiology of breast cancer in Japan. Int. J. Epidemiol. 1995, 24, 285-91.
- Hooper L, Madhavan G, Tice JA, Leinster SJ, Cassidy A. Effects of isoflavones on breast density in pre- and post-menopausal women: a systematic review and meta-analysis of randomized controlled trials. *Hum. Reprod. Update*. 2010, 16, 745-60.
- prostate and breast among Japanese and white immigrants in Los Angeles County. Br. J. Cancer. 1991, 63, 963-6.

9. Shimizu H, Ross RK, Bernstein L, Yatani R, Henderson BE, Mack TM. Cancers of the

- Shu XO, Zheng Y, Cai H, Gu K, Chen Z, Zheng W, Lu W. Soy food intake and breast cancer survival. JAMA. 2009, 302, 2437-43.
- Caan BJ, Natarajan L, Parker BA, Gold EB, Thomson CA, Newman VA, Rock CL, Pu M, Al-Delaimy WK, et al. Soy food consumption and breast cancer prognosis. Cancer Epidemiol. Biomarkers Prev. 2011
- Messina M, Redmond G. Effects of soy protein and soybean isoflavones on thyroid function in healthy adults and hypothyroid patients: a review of the relevant literature. *Thyroid*. 2006, 16, 249-58.
- Bitto A, Polito F, Atteritano M, Altavilla D, Mazzaferro S, Marini H, Adamo EB, D'Anna R, Granese R, et al. Genistein aglycone does not affect thyroid function: results from a threeyear, randomized, double-blind, placebo-controlled trial. J. Clin. Endocrinol. Metab. 2010, 95, 3067-72.
- Martinez J, Lewi JE. An unusual case of gynecomastia associated with soy product consumption. *Endocr Pract.* 2008, 14, 415-8.
- Siepmann T, Roofeh J, Kiefer FW, Edelson DG. Hypogonadism and erectile dysfunction associated with soy product consumption. *Nutrition*. 2011.
- Messina M. Soybean isoflavone exposure does not have feminizing effects on men: a critical examination of the clinical evidence. Fertil. Steril. 2010, 93, 2095-104.
- Koh WP, Wu AH, Wang R, Ang LW, Heng D, Yuan JM, Yu MC. Gender-specific associations between soy and risk of hip fracture in the Singapore Chinese Health Study. Am. J. Epidemiol. 2009, 170, 901-9.
- Zhang X, Shu XO, Li H, Yang G, Li Q, Gao YT, Zheng W. Prospective cohort study of soy food consumption and risk of bone fracture among postmenopausal women. *Arch. Intern. Med.* 2005, 165, 1890-5.
- Messina M, Watanabe S, Setchell KD. Report on the 8th International Symposium on the Role of Soy in Health Promotion and Chronic Disease Prevention and Treatment. J. Nutr. 2009, 139, 796S-802S.
- Yan L, Spitznagel EL. Soy consumption and prostate cancer risk in men: a revisit of a meta-analysis. Am. J. Clin. Nutr. 2009, 89, 1155-63.
- Jenkins DJ, Mirrahimi A, Srichaikul K, Berryman CE, Wang L, Carleton A, Abdulnour S, Sievenpiper JL, Kendall CW, et al. Soy protein reduces serum cholesterol by both intrinsic and food displacement mechanisms. J. Nutr. 2010, 140, 2302S-2311S.
- Dong JY, Tong X, Wu ZW, Xun PC, He K, Qin LQ. Effect of soya protein on blood pressure: a meta-analysis of randomised controlled trials. Br. J. Nutr. 2011, 1-10.
- Li SH, Liu XX, Bai YY, Wang XJ, Sun K, Chen JZ, Hui RT. Effect of oral isoflavone supplementation on vascular endothelial function in postmenopausal women: a metaanalysis of randomized placebo-controlled trials. Am. J. Clin. Nutr. 2010, 91, 480-6.
- Ramsden CE, Hibbeln JR, Majchrzak SF, Davis JM. n-6 Fatty acid-specific and mixed polyunsaturate dietary interventions have different effects on CHD risk: a meta-analysis of randomised controlled trials. Br. J. Nutr. 2010, 104, 1586-600.
- Hughes GJ, Ryan DJ, Mukherjea R, Schasteen CS. Protein digestibility-corrected amino acid scores (PDCAAS) for soy protein isolates and concentrate: criteria for evaluation. J Agric Food Chem. 2011; 59(23):12707-12.

Did you know...?



The soybean is a legume (i.e., a plant) and is in the same family as black beans, fava beans, navy beans, lentils, chickpeas, pinto beans, snow peas, peanuts, green beans, cannellini beans, and many more.



Soy is a good source of vitamin B, iron, and potassium.



Soy has been consumed for thousands of years in Asia.



Unfermented soy protein is 90% digestible.[25]



Soybeans contain heart-healthy essential polyunsaturated omega-6 and omega-3 fatty acids.