

## Impact of Antioxidant Supplementation on Cardiovascular Health

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### ABSTRACT

**Background:** Cardiovascular diseases (CVDs) are a leading cause of morbidity and mortality worldwide, and oxidative stress has been identified as a key factor in their pathogenesis. Antioxidant supplementation, aimed at reducing oxidative damage, has garnered attention as a potential strategy for cardiovascular health. This study explores the impact of antioxidant supplementation on cardiovascular health, focusing on biomarkers of oxidative stress, lipid profile, and clinical outcomes.

**Methods:** A systematic review and meta-analysis were conducted, including randomized controlled trials (RCTs) that assessed the effects of antioxidant supplementation on cardiovascular health. A total of 25 RCTs, involving 5,000 participants aged 30–80 years, were included. Outcomes such as blood pressure, cholesterol levels, inflammatory markers, and incidence of cardiovascular events were evaluated. The effect size was calculated using mean differences and relative risk.

**Results:** Antioxidant supplementation significantly reduced levels of oxidative stress biomarkers, such as malondialdehyde (MDA), and improved endothelial function. Blood pressure was reduced by an average of 5 mmHg, and total cholesterol levels decreased by 10 mg/dL. However, the effect on major cardiovascular events, such as heart attacks and strokes, was inconclusive, with no significant reduction observed.

**Conclusion:** While antioxidant supplementation appears to improve certain biomarkers of cardiovascular health, its role in preventing clinical cardiovascular events remains uncertain. Further long-term studies are required to establish its definitive impact on cardiovascular disease prevention.

**Keywords:** Antioxidants, Cardiovascular Health, Oxidative Stress, Lipid Profile, Blood Pressure.

## INTRODUCTION

Cardiovascular diseases (CVDs), including coronary artery disease, stroke, and hypertension, represent a major global health burden. Oxidative stress, caused by an imbalance between reactive oxygen species (ROS) and the body's antioxidant defenses, is implicated in the pathophysiology of CVDs. Antioxidants are molecules that neutralize ROS and have been proposed as a potential therapy for CVD prevention. This study aims to review and synthesize existing evidence on the impact of antioxidant supplementation on cardiovascular health, with a focus on its effects on oxidative stress biomarkers, lipid profiles, and clinical outcomes.

## MATERIALS AND METHODS

### Study Design:

A systematic review and meta-analysis of randomized controlled trials (RCTs) published between 2000 and 2023. Studies were selected based on predefined inclusion and exclusion criteria.

### Participants:

RCTs involving adults (aged 30–80 years) with or at risk for cardiovascular disease, who received antioxidant supplementation (e.g., vitamins C and E, selenium, beta-carotene) for at least 8 weeks.

- **Inclusion Criteria:** Adults with elevated cardiovascular risk factors (e.g., hypertension, hyperlipidemia).

- **Exclusion Criteria:** Studies involving individuals with advanced CVD, those on medication for CVD treatment, or those with other chronic diseases affecting oxidative stress levels.

#### Interventions:

The antioxidants included in the trials were primarily vitamin C, vitamin E, selenium, and a combination of these. Dosages varied but typically ranged from 100 mg to 1,000 mg per day.

#### Outcomes:

Primary outcomes included changes in biomarkers of oxidative stress (e.g., MDA, superoxide dismutase). Secondary outcomes included blood pressure, lipid profile (total cholesterol, LDL, HDL), and incidence of cardiovascular events (heart attack, stroke, hospitalization for CVD).

#### Statistical Analysis:

Meta-analysis was performed using random-effects models to calculate pooled mean differences (MD) for continuous outcomes and relative risk (RR) for dichotomous outcomes. Heterogeneity was assessed using the  $I^2$  statistic, with a p-value of  $< 0.05$  considered statistically significant.

## RESULTS

#### Study Characteristics:

A total of 25 RCTs met the inclusion criteria, involving 5,000 participants (mean age 56 years, 55% male). The duration of supplementation ranged from 8 to 36 weeks.

#### Impact on Oxidative Stress Biomarkers:

- Antioxidant supplementation significantly reduced malondialdehyde (MDA) levels by a pooled MD of  $-0.15 \mu\text{mol/L}$  (95% CI:  $-0.20, -0.10$ ).
- A modest increase in superoxide dismutase (SOD) levels was observed, with a pooled MD of  $+1.2 \text{ U/mL}$  (95% CI:  $+0.8, +1.6$ ).

#### Impact on Lipid Profile:

- Total cholesterol decreased by an average of 10 mg/dL (95% CI:  $-12, -8 \text{ mg/dL}$ ).
- LDL cholesterol levels were reduced by 5 mg/dL (95% CI:  $-7, -3 \text{ mg/dL}$ ).
- HDL cholesterol remained unchanged.

#### Impact on Blood Pressure:

- Systolic blood pressure was reduced by an average of 5 mmHg (95% CI:  $-7, -3 \text{ mmHg}$ ).
- Diastolic blood pressure showed a reduction of 3 mmHg (95% CI:  $-4, -2 \text{ mmHg}$ ).

#### Impact on Cardiovascular Events:

- The incidence of heart attacks and strokes was not significantly different between the antioxidant and placebo groups (RR = 0.94, 95% CI: 0.75, 1.18).
- There was no significant reduction in overall mortality.

## TABLES

**Table 1: Summary of the Effect of Antioxidant Supplementation on Cardiovascular Risk Factors**

Measure	Mean Change (95% CI)
Oxidative Stress (MDA)	$-0.15 \mu\text{mol/L}$ ( $-0.20, -0.10$ )
Superoxide Dismutase (SOD)	$+1.2 \text{ U/mL}$ ( $0.8, 1.6$ )
Total Cholesterol	$-10 \text{ mg/dL}$ ( $-12, -8$ )
LDL Cholesterol	$-5 \text{ mg/dL}$ ( $-7, -3$ )
Systolic Blood Pressure	$-5 \text{ mmHg}$ ( $-7, -3$ )
Diastolic Blood Pressure	$-3 \text{ mmHg}$ ( $-4, -2$ )

**Table 2: Impact of Antioxidant Supplementation on Cardiovascular Events**

Outcome	RR (95% CI)
Heart Attack	0.94 (0.75, 1.18)
Stroke	0.90 (0.72, 1.12)
Overall Mortality	0.98 (0.84, 1.14)

## DISCUSSION

The findings of this meta-analysis indicate that antioxidant supplementation can reduce biomarkers of oxidative stress and improve certain cardiovascular risk factors, such as blood pressure and cholesterol levels. The reduction in MDA and

improvement in endothelial function suggest that antioxidants may play a role in reducing oxidative damage in the vasculature, potentially protecting against atherosclerosis.

However, the lack of a significant effect on major cardiovascular events, such as heart attacks and strokes, suggests that while antioxidants may offer protective benefits at the biochemical level, their clinical impact may be more limited. This finding is consistent with previous studies that showed mixed results regarding the role of antioxidants in long-term cardiovascular disease prevention.

The modest improvements in blood pressure and lipid profile observed in this analysis align with other research suggesting that antioxidants may have a modest, though clinically relevant, effect on cardiovascular risk factors. However, given the variability in study designs, dosages, and the types of antioxidants used, the findings should be interpreted with caution. Further large-scale, long-term trials are needed to definitively determine the clinical benefits of antioxidant supplementation for CVD prevention.

## CONCLUSION

Antioxidant supplementation appears to offer some benefits in reducing oxidative stress biomarkers and improving certain cardiovascular risk factors, such as blood pressure and cholesterol levels. However, its impact on preventing major cardiovascular events remains inconclusive. Until further research provides more definitive evidence, antioxidant supplementation should not be considered a stand-alone treatment for cardiovascular disease but may be beneficial as part of a broader approach to cardiovascular health management.

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