

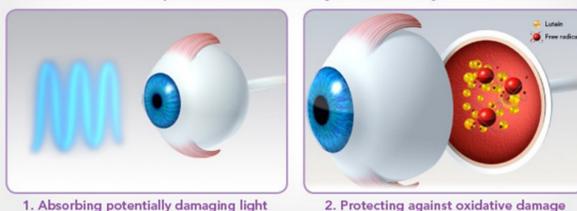
The Effect of Seasonal Variations on Concentrations of Lutein and Zeaxanthin in the Diet, Blood, and Retinal Tissue

Introduction

Lutein and Zeaxanthin

- Naturally occurring carotenoids
 - Green, leafy vegetables
 - Brightly colored fruits
- Major components of the human retina (Bone et al., 1985)
 - Measured via macular pigment density (Snodderly et al., 2004)
- Blue light filters
 - Protect retina from high-energy photons of blue light (Snodderly, 1995)
- Antioxidants
 - Inhibit free radical damage and decreases oxidative stress (DiMascio, 1991)

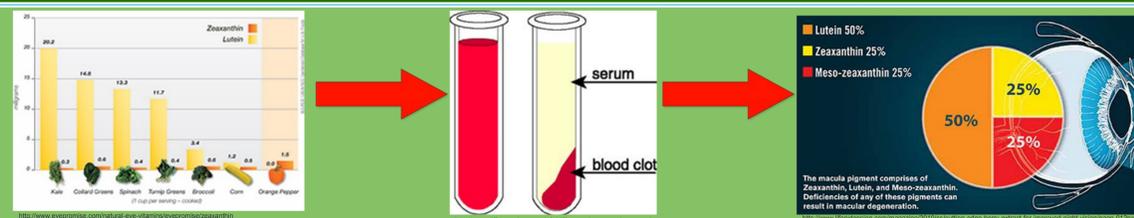
Lutein concentrates in the retina to help protect important cells in the eye. It works by⁹⁻¹⁰



<https://highvision.com/fairnutrition/antioxidant-formulas>

Review of Literature

Progression Through The Body



Effects of Lutein and Zeaxanthin on Visual Function

- Lutein may influence early maturation of the retina (Hammod, 2008)
- Carotenoid supplementation may improve vision/ visual performance
- May help further reduce the risk of late Age-Related Macular Degeneration (Age-Related Eye Disease Study Research Group, 2013)

	Kaplan-Meier Probability of Progression		Comparison With Placebo Reduction in Progression to Advanced AMD		
	Rate	n	Hazard ratio	CI (range)	P-value
Placebo	31%	493 eyes of 406 participants			
Lutein and zeaxanthin	29%	468 eyes of 399 participants	0.90	98.7% (0.76-1.07)	.12
DHA and EPA	31%	507 eyes of 416 participants	0.97	98.7% (0.82-1.16)	.70
Lutein and zeaxanthin and DHA and EPA	30%	472 eyes of 387 participants	0.89	98.7% (0.75-1.06)	.10

Abbreviations: AREDS, Age-Related Eye Disease Study; AMD, age-related macular degeneration; DHA, docosahexaenoic acid; EPA, eicosapentaenoic acid.
*Adapted from the AREDS2 Study Group, JAMA. 2013;309(19):2005-2015.
<http://eyelubed.com/2013/05/areds2-substituting-lutein-and-zeaxanthin-for-beta-carotene-may-be-warranted>

Seasonal Variations in Blood Lipid Levels

- L and Z are found exclusively on lipoproteins
- Mean serum lipid values peak in the winter and trough in the summer
 - Light exposure
 - Plasma volumes (Ockene et al., 2004)
 - Hormones, lipoprotein lipase activity (Donahoo et al., 2004)
- Seasonal variations in certain chronic diseases associated with high cholesterol and triglyceride levels (Marti-Solder et al., 2014; Hopstock et al., 2013)

Purpose

- Evaluate seasonal variations in MPD while accounting for:
 - 1) Confounding variables (age, sex, BMI, blood lipids, dietary intakes)
 - 2) Possible effects of sunlight on MPD
- Are increased dietary intakes of L/ Z needed during certain times of the year?
- Should seasonal timing be accounted for when designing L/Z studies?
- Most effective method of measuring L/Z intake?

Research Questions

- 1-3) How do concentrations of (1) dietary L/Z intake, (2) serum L/Z, (3) MPD change with seasonal variations?
- 4) Does the correlation between measures of L/Z status change with season?
- 5) Does the variability of data differ among measures of L/Z status?

Hypotheses

- H1) Dietary L/Z will be lowest in winter and highest in the summer.
- H2) Serum L/Z concentrations will be highest in the winter (high blood lipids) and lowest in the summer (low blood lipids).
- H3) MPD concentrations will be highest in the winter (high blood lipids) and lowest in the summer (low blood lipids).
- H4) The correlation between measures of L/Z status will differ among seasons due to seasonal differences in intakes and the times required for dietary L/Z to be taken up into the serum and macula.
- H5) Dietary L/Z data, followed by serum L/Z data, and MPD data.

