

Seed Oil Studies: A Closer Look at Funding



A common argument issued by proponents of avoiding or limiting the intake of seed oils is that the scientific evidence being referenced is “funded by industry,” and therefore, the results cannot be trusted. These individuals discount position papers by the American Heart Association (AHA) because of perceived conflicts of interest. However, the various position papers, scientific updates, and advisories issued by the AHA over the past two decades represent the work of teams of respected and independent academics who are internationally recognized for their expertise and research (see references 1-7).

While some suggest that the evidence supporting the benefits of seed oils is largely driven by industry-sponsored research, a closer look at the broader body of science offers a different perspective. The validity of these claims can be thoughtfully evaluated by reviewing the funding sources and design of the research itself. In fact, much of the relevant evidence comes from well-established, independently conducted studies — including prospective cohort studies, randomized controlled trials (RCTs) on cardiovascular outcomes, and RCTs examining markers of disease risk. Together, these types of research provide a comprehensive view that extends beyond any single funding source, reflecting a robust and diverse scientific inquiry into the role of seed oils in health.

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Who funds research on seed oil referenced by health authorities?

- Nine prospective cohort studies, which often involve tens of thousands of individuals who are followed for many years and even decades, were funded by research and/or government organizations – not industry. (Table 1)
- The 4 RCTs that examined cardiovascular events upon which the AHA based their recommendation for the replacement of SFA with PUFA were not funded by industry.⁸⁻¹¹
- None of the RCTs which formed the evidence base cited by the U.S. Food and Drug Administration in support of the coronary heart disease health claim, were funded by industry¹²⁻¹⁶ except for one study, which was supported by the Palm Oil Research Institute¹⁷.



Table 1: Funding sources of selected examples of large prospective cohort studies illustrating the benefits of seed oils and/or linoleic intake/exposure

Author/Y/Reference	Study	Location	Metric	Results	Funding
Zhang et al., 2025 (18)	NHS I, NHS II, HPFS	USA	Oil intake	Higher intake of canola oil and soybean oil associated with lower total mortality and cancer mortality. Trend toward lower intake of CVD mortality	Supported by research grants from the National Institutes of Health
Bork et al., 2025 (19)	Danish Diet, Cancer and Health cohort,	Denmark	Adipose tissue	Linoleic acid adipose tissue content Inversely related to mortality	The Danish Cancer Society
Igra et al., 2025 (20)	BAMSE (Barn, Allergi, Miljö, Stockholm, Epidemiologi) cohort	Sweden	Adipose tissue	Linoleic acid adipose tissue content at years 8 and 16 inversely related to BMI, waist circumference and % body fat at age 24 years	Swedish Research Council, the Swedish Research Council for Health, Working Life and Welfare, Formas, the Swedish Heart-Lung Foundation, the European Research Council (TRIBAL, grant agreement 757919), and the Swedish Asthma and Allergy Research Foundation and Region Stockholm (ALF project, and for cohort and database maintenance). The funding sources were not involved in or restricted publication
Harris et al., 2024 (21)	UK Biobank	UK	Plasma	Lower total and cause specific mortality (CVD, cancer other)	Analysis funded by the William H. Donner Foundation. The UK Biobank is a non-profit charity that collects health data to support research into major disease. Funders include charities (Wellcome Trust, Medical Research Council, British Heart Foundation, Cancer Research UK, Diabetes UK) government (Department of Health, National Institute for Health and Care Research) and industry to be allowed to have access to data (Amgen, AstraZeneca, GSK, and Johnson & Johnson)
Zhuang et al., 2019 (22)	National Institutes of Health-American Association of Retired Persons Diet and Health Study	USA	Intake	Lower intake of linoleic acid associated with lower total, CVD, and certain cause-specific mortality.	National Key Research and Development Program (grant no. 2017YFC1600500), the National Natural Science Foundation of China (grant no. 81773419), the China National Program for Support of Top-notch Young Professionals, and the Intramural Research Program of the National Institutes of Health-National Cancer Institute
Wang et al., 2016 (23)	NHS, HPFS	USA	Intake	Lower mortality	This study was supported by research grants from the National Institutes of Health.
Li et al. 2015 (24)	Prospective, NHS, HPFS	USA	Intake	Replacing saturated fat with complex CHO, PUFA and MUFA lower CHD risk	This study was funded by grants from the National Institutes of Health.
Daniel et al., 2009 (25)	Cancer Prevention Study-II Nutrition Cohort	USA	Intake	Linoleic acid intake inversely related to colorectal cancer risk in men (p for trend 0.07), but not in women	American Cancer Society
Pietinen et al. 1997 (26)	ATBC	Finland	Intake	No association with coronary deaths	N01-CN-45165 from the National Cancer Institute and a fellowship from the Academy of Finland