The REAL Facts About Cholesterol

Don't let the myths, misdirection and downright lies confuse you – cholesterol is VITAL and this is why you should not fear it

Good Life Letter
Natural health, vitality & wellness

About the author

Ray Collins writes a weekly newsletter which highlights natural remedies, ancient cures and a whole lot of common sense about health and well being.

Since 2005 he has been a researcher and writer in the health field and whilst not a doctor does use the best of the latest research published around the world to form reasoned and reasonable advice which allows those in need to consult their health professionals and ask the questions that need asking.
Ray is a writer who aims to make complex topics simpler for everyone to understand.
He is married with children and ageing parents so much of what he writes about are issues which affect him and those close to him.

You can read more of his work at **www.goodlifeletter.com** and sign up for his free weekly newsletters for a regular update.

Disclaimer

The information contained in this free report has taken several months to compile and has used published reports, trial results and real world patient experiences to draw together, however, whilst every effort has been taken to ensure it is relevant and correct, no healthcare decisions should be taken as a result.

Please seek advice from a qualified medical practitioner before taking any supplements or changing your medications.

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Introduction

Barely a day passes without some new scare story hitting the headlines about cholesterol and its potentially damaging effects on the body; however, the fact that this compound has real value to our health is often ignored.

Perhaps even more worrying is the fact that every day people who had been told that their cholesterol levels were normal are dying of heart attacks and strokes – and they never understood why. How is it that the medical profession ignores the fact that high cholesterol isn't a disease that is a cause of cardiovascular problems?

Would it surprise you to know that 75 per cent of heart attack victims do not have high cholesterol levels?

So why is this naturally occurring compound made out to be the arch villain that condemns 198,000 Britons to a heart attack or stroke each year?

The answer lies in the corporate greed of the multi-billion-pound cholesterol-lowering drugs industry, which has largely influenced the medical establishment's all-too-common mantra, that when it comes to cholesterol lower, lower, lower is the key to heart health.

But not only is this not true, following this advice can be extremely harmful as cholesterol is in fact a vital component needed to keep you healthy and, more importantly, alive!

This report highlights why following the strict diets and taking multiple medications may not be the safest thing you can do to try to prevent a catastrophic and life changing health event.

While there's no denying that reducing high cholesterol is an important step towards maintaining a healthy heart it's not quite as simple as that… and cholesterol isn't the all-out bad guy it's made out to be.

More accurate predictions of cardiovascular health would be obtained if other factors were taken into account like levels of inflammatory chemicals (called C-Reactive Proteins or CRP), fibrinogen scores and other peptides that show damage to the heart and major vessels (called B-type natriuretic peptide or BNP).

Maybe the mainstream hasn't focused on these other known markers of heart disease because the pharmaceutical companies haven't come up with a pill to treat them. The focus has been on lowering cholesterol because that's what they're selling – and they're selling plenty. Statin drugs, the class of cholesterol-lowering drugs that includes Simvastatin and Atorvastatin, are some of the top sellers. But more on this can of worms later. For now, let's take a closer look at cholesterol and its role in your body.

What is cholesterol?

First described in its solid form by a French doctor and chemist in 1769 when he was researching gallstones, cholesterol was named from the Ancient Greek as of bile (chole-), a solid (steros) and an alcohol (-ol).

Put simply it is a waxy substance that is unique to animal cells; in addition it is described by the organic chemists as a modified steroid.

Its role in the body is to provide structural and functional support to the cell meaning that unlike plants we don't need thickened walls to keep our shape and stability; it also forms the basis for key hormones involved in metabolism, growth and reproduction as well as bile for digestion.

There is no part of your life that is not dependent on cholesterol in one of its functions – from the very beginnings of embryonic life as a single cell to the end of our days, we need this lipid compound as much as we need to breathe air.

Another important factor to note is that we need more cholesterol as we age as it is this which helps keep our tissues healthy in later life – so actually having higher levels in later life is a good thing and not something we need to medicate for.

Why do we need cholesterol?

The first reason is a big one – it is vital to life itself. Every single cell and structure in our body depends upon it for structural integrity which includes our bones, muscles, nerves, brain and even blood – try surviving without any of those!

Knowing how key it is the body really isn't going to take any chances of not having enough of it as a result of poor diet or periods of scarcity and this leads to two more unequivocal but maybe surprising statements to note.

First, our bodies make the cholesterol found in our blood stream and second, there is no relationship between the amount of cholesterol or fat you eat and the amount in your circulation.
Just stop and let those two percolate through your conscious mind.

Everything that you will have seen and read in the popular and medical press seems to ignore these two fundamental truths. In doing so it seems that their reasoning is to misdirect and confuse us as well as making us feel responsible for any deviation of our blood reading from the norm.

The cholesterol we produce in our bodies is the biggest contributor to the levels in our blood. Despite what the mainstream would have you believe – with their advice to cut out cholesterol-rich foods (such as butter and egg yolks) in your diet to help lower high cholesterol levels – intake from food is much less important because the body has a clever feedback mechanism that reduces cholesterol absorption in the gut when levels in the blood are already adequate.

What about the bad forms of cholesterol?

Cholesterol is just one compound rather than something that exists in a variety of forms; however, because it is not soluble in water it means the body needs specific carrier molecules to transport it. These are the lipoproteins we hear so much about – the HDL and LDL types...
...except, once again, this isn't really the whole story.

High Density Lipoprotein (the so-called good form) and Low Density Lipoprotein (its evil twin!) are just two of these carriers, joined by three others whose names there is no need to bore you with. Effectively these five protein complexes act as lorries that carry around cholesterol, fats, triglycerides, some protein and phospholipids, depositing them along the way as they are needed.

The LDL carries mainly freshly made cholesterol from the liver, and the HDL carries recycled cholesterol from tissues – far from the concept of being good and bad, more just useful in differing ways, but perhaps HDL is slightly more beneficial.

HDL actually scavenges deposited cholesterol from your arteries and delivers it to your liver where it is broken down and eliminated safely from your body. In addition, HDL is known to possess antioxidant activity and to help balance your body's natural anti-inflammatory response – both of which are important for repairing damage to the lining of your arteries and for promoting cardiovascular health.

Cholesterol isn't the only threat to your cardiovascular system

When it sticks to the wall of an artery, LDL cholesterol may act as a focus for the accumulation of fats, protein and minerals, so leading to atherosclerosis (hardening of your arteries).

Yet, contrary to what most doctors and pharmaceutical companies would have you believe, high cholesterol is only one factor in this process. Pollutants, food additives and the products of metabolism can release harmful free radicals – highly reactive molecules that damage the structure of your cells, including those that line your artery walls.

Other markers that can signal an increased risk of heart attack or stroke include high blood pressure, high homocysteine levels, high triglyceride (blood fat) levels, depleted Coenzyme Q10 stores, elevated levels of platelet-activating-factor and thromboxane AZ, and high levels of C-reactive protein (a substance produced by your liver in response to inflammation).

Each of these markers can be a red flag for heart disease risk – and when all are taken into consideration, in conjunction with total cholesterol and HDL/LDL ratio (the amount of LDL that is present indicates the amount of cholesterol circulating in your bloodstream and the amount of HDL shows how well your body is able to neutralise cholesterol), they can provide much clearer warning signs before it's too late. A healthy person should have low levels of LDL and high levels of HDL. If both are low or both are high, your heart health remains at risk.

Don't risk the deadly side effects of statin drugs

Mainstream medicine's response to the problem has involved the widespread prescription of statin drugs – which block the production of cholesterol in your liver – to all those at risk of developing heart disease. One in three people over the age of 45 in the UK currently take statins – that's a staggering 7 million people.

What's more, many people with NORMAL cholesterol levels are being pressurised by their doctors to take statins as a preventative measure… despite the fact that the majority of heart attack victims have normal levels of cholesterol! So this number is likely to grow rapidly over the next 10 years.

This is extremely worrying as statins can cause a number of side effects including headaches, nausea, vomiting, constipation, diarrhoea and muscle pain. In addition, recent studies have revealed that their use is associated with sleep disturbances, decreased insulin sensitivity, depression, memory loss and erectile dysfunction.

Worse still, statins prevent the production of co-enzyme Q10 – an essential nutrient for heart health. Statins also deplete levels of a molecule called dolichol in the body… low levels of which can cause insulin resistance and type 2 diabetes *(Arch Intern Med. 2012; 172(2):144-152)*. A recent review of several clinical trials has shown that taking statins can increase the risk of diabetes by 13 per cent on average *(Curr Opin Cardiol. 2011 Apr 15. [Epub ahead of print])*.

A meta-analysis, which looked at data from 154,000 postmenopausal women, revealed that women taking statins had a 48 per cent greater risk of diabetes, compared with similar women not taking statins *(Arch Intern Med. 2102; 172(2):144-152)*.

In addition, statins have been found to cause rhabdomyolysis, a rare but potentially deadly condition in which large numbers of muscle cells die and release proteins that cause kidney failure *(FDA Talk Papers T01-34, August 8, 2001)*. This leads to the common side effect of statins which is severe muscle and joint pain.

Statins have also been found to cause cancer in laboratory animals, in some cases at doses equivalent to those prescribed to humans *(JAMA 1996; 275(1): 55-60)*. According to new research, statins could even increase the risk of prostate cancer *(Chang CC, Ho SC, Chiu HF, Yang CY. Statins increase the risk of prostate cancer: A population-based case-control study. Prostate. 2011 Apr 7 [Epub ahead of print])*.

You can also have too little of a good thing

In addition to their harmful side effects, statin drugs can push your cholesterol levels too low. When your cholesterol levels go too low, a host of negative things happen in your body:

- **Low levels implicated in memory loss and dementia:** Researchers, from the University College London and the INSERM institute in France, studied 3,673 civil servants, using data from the Whitehall II trial, to see what influence low cholesterol might have on memory-function within a five-year period.

  The researchers took blood samples at the start of the study, and gauged word recall with a simple test. That was repeated at the end of the study. They found that people with low levels of HDL 'good' cholesterol were 53 per cent more likely to suffer from memory loss compared with those with the highest levels of HDL.

  Dr Archarna Singh-Manoux, who led the study, said: "Memory problems are key in the diagnosis of dementia. This suggests that low HDL cholesterol might also be a risk factor for dementia."

- **Increases your risk of depression:** A study conducted by Dutch researchers measured serum cholesterol levels in 30,000 men, as part of a large screening programme. They compared the presence of depressive symptoms, anger, hostility, and impulsivity in men with low cholesterol levels, to men with cholesterol levels in the normal range.

  They found that men with chronically low cholesterol levels showed a consistently higher risk of having depressive symptoms. Cholesterol may affect the metabolism of serotonin, a substance known to be involved in the regulation of mood – as research has previously shown that serotonin levels are also reduced in men with low levels of cholesterol.

- **May increase the risk of suicidal thoughts:** Canadian researchers examined the relation between low serum total cholesterol and deaths from suicide. Adjusting for age and sex, they found that those in the lowest quarter of total cholesterol concentration had more than six times the risk of committing suicide as did those in the highest quarter. This effect persisted after the exclusion from the analysis of the first 5 years of follow-up and after the removal of those who were unemployed or who had been treated for depression. This data indicates that low serum total cholesterol level is associated with an increased risk of suicide.

- **May lead to violent behaviour and aggression:** Many studies seem to support the existence of a cholesterol-violence relationship. One 1992 analysis, published in the journal Circulation, looked at 18 different study groups and found 50 per cent more violent deaths in men with cholesterol levels less than 160mgs per decilitre (mg/dL) than in the group with the highest cholesterol levels. A 1996 French study of nearly 6,400 men, published in the *British Medical Journa*l, also found that low average cholesterol was linked to subsequent death by suicide. Three separate neurological studies (in 1989, 1990, and 1994) agreed that in humans, low brain serotonin is linked to an increased risk of impulsive violence, including homicide, arson and suicide.

- **Increases your risk of cancer and Parkinson's disease:** Studies have found an increased risk of Parkinson's disease and cancer among people with extra-low cholesterol.

- **Upsets hormone levels:** Another disadvantage of low cholesterol is that cholesterol is one of the major building blocks for all your steroid hormones. The body converts cholesterol to pregnenolone which is considered to be the 'mother' hormone.

  Pregnenolone is then converted to other hormones such as progesterone, DHEA, testosterone, oestrogen, cortisol, and dozens of other critical hormones. If your cholesterol is too low, these hormones will also be low or virtually non-existent.

Cholesterol by numbers

If you have ever been to the doctor for a blood test, chances are they will have examined your blood cholesterol levels, and your results would have been used to determine whether you were classed as safe or at risk.

The medics tell us that we need to have optimum levels of 'good' HDL cholesterol for our biochemistry. According to many health experts the optimum level of HDL is about 200.

As already mentioned, you also need to examine the relationship between HDL and LDL to determine cardiac risk status. Ideally, you should have more than 30 per cent 'good' cholesterol (HDL/total cholesterol). If the percentage is less than 20, the risk is clearly elevated and if it is less than 10 per cent, without serious intervention a heart attack is inevitable. Percentages between 30 and 40 are excellent and over 40 per cent virtually assures immunity from heart attacks.

If you have concerns about any medication prescribed to you for lowering your cholesterol or you are not sure what your HDL and LDL levels are, discuss this with your doctor. You may discover that there is no need to tamper with your cholesterol levels.

On the other hand, if you do need to address an imbalance between your HDL and LDL levels, then there are natural ways to do this. If you prefer to take a natural approach to lowering cholesterol and your doctor doesn't support you, you may be better off finding a doctor or health care provider that supports your point of view.

Ten ways to improve your cholesterol ratio without using statins

A fail-safe way of keeping LDL low and HDL high is to take plenty of exercise such as aerobics, swimming, brisk walking and weight-lifting. Steps should also be taken to reduce stress, stop smoking, follow a healthy diet (that includes plenty of fruit and vegetables and healthy fats like oily fish, which possess anti-inflammatory properties that counteract inflammation in your arteries, which causes damage) and lose any excess weight, and only drink alcohol in moderation.

The following measures can also help lower your risk of cardiovascular disease:

1 **Avoid refined sugar – the real culprit behind 'bad' cholesterol:** A high carbohydrate diet – refined carbs, like white bread and pasta in particular – leads to high blood fats, high cholesterol and increases the risk of heart disease or stroke, because your body converts carbohydrates into both blood fat and cholesterol.

A low carbohydrate diet is 'lipolytic' – it makes your body break down fats and use the products (ketones) as fuel, so that your blood fat level falls. And because less raw materials such as sugar and starch are present for cholesterol production, that falls too. There is also less LDL ('bad' cholesterol) and more HDL ('good' cholesterol) in your blood, because blood fat levels stay low and LDL is only produced when your blood fat levels are high.

Many studies have shown that blood fat and cholesterol levels drop, often dramatically, when carbohydrate intake is restricted. Researchers at Harvard University and Massachusetts General Hospital found that restricting patients to 26 grams of carbohydrate a day led to average falls of 85 per cent in blood fats and 40 per cent in cholesterol *(Am. J. Clin. Nutrition 19:84-98, 1966)*. These were patients with very high readings to start with and it seems that the higher the initial blood level, the greater the fall.

In two clinical trials in Germany, patients with near normal levels showed only a slight average drop, while those with very high levels saw their readings reduce by half, after six months on 40 grams of carbohydrate a day *(Medizinische Klinik 71(24):1051-6, 1976; Medizinische Klinik 73(2):55-59, 1978)*. A low carbohydrate diet has also been shown to reverse the progression of heart disease in most cardiac patients. During 3 to 18 months of follow-up tests on patients with heart disease, one study showed their average cholesterol levels dropped by 28 per cent on a high fat, low carbohydrate diet *(Southern Medical Journal 81, 1988)*.

2 **CoQ10 has potent heart-protective properties:** We consider Co-enzyme Q10 (CoQ10) to be the number one heart nutrient; it is made naturally by your body and is essential to practically every one of your important functions. CoQ10 is vital for producing muscular energy, therefore a deficiency of this nutrient can cause your heart (which is a muscle) to function improperly, resulting in heart failure. This vital heart nutrient has been proven in numerous studies to prevent heart attacks and strokes by stopping cholesterol blocking arteries, lowering high blood pressure, improving blood circulation and rejuvenating heart cells.

However, as you age your body only produces a fraction of the CoQ10 it did when you were in your 20s. As mentioned earlier, your stores can soon become depleted if you're taking cholesterol-lowering statin drugs, which block the production of CoQ10 in your body.

To boost your levels, take CoQ10 in supplement form. However, be sure to take it in a form called ubiquinol – most CoQ10 supplements contain a cheaper form of the enzyme called ubiquinone instead, which is extremely difficult for your body to absorb and therefore get the full benefits from. Take 100 to 200mg a day with meals.

3 **Curcumin helps maintain the right balance between 'good' and 'bad' cholesterol levels:** A member of the ginger family, curcumin (turmeric root) has been used for thousands of years as a general health booster and for treating heart problems. Curcumin has well-documented anti-inflammatory properties and helps your liver eliminate any excess cholesterol and researchers have found that it specifically increases HDL levels and reduces LDL.

Another therapeutic action linked to curcumin is that it helps keep your blood thin, which prevents blood clots from forming in your arteries and lowers your risk of having a heart attack. The recommended dosage for curcumin is 900mg taken once or twice a day.

4 **Gugulipid (commiphora mukul) helps regulate cholesterol:** Commiphora is a tree that grows in India and produces a resin called gugulipid. This active ingredient of the tree has been traditionally used to treat everything from acne to viral infections. Modern research findings have now discovered that it is also able to improve cholesterol levels.

In a study performed by Indian scientists, 125 patients suffering from high cholesterol were treated with gugulipid for several weeks. The results showed that there was an 11 per cent drop in the levels of cholesterol in the patients' blood, and a 60 per cent increase in HDL levels. The recommended dosage for gugulipid is 140mg taken once or twice a day.

5 **Garlic – How to make sure you're taking full advantage of its heart-friendly properties:** Garlic has been used by traditional herbal practitioners for hundreds of years for its heart protecting properties. But it wasn't until recently that Israeli scientists discovered that its active ingredient, allicin, could block certain groups of enzymes involved in the production of cholesterol.

When leading European heart specialist, Professor Gustav Belz, conducted a two-year study of more than 200 participants he found that the group taking garlic had healthier heart arteries – making them 15 years younger in both appearance and function – than the control group (Circulation 1997;96:2649-55).

According to Dr. Yeh, a professor of Nutritional Biochemistry at Penn State's Department of Nutritional Sciences: "Aged garlic extract can be useful for the general public to help achieve the desired cholesterol level of 200 or less."

In another US study currently under review for publication, UCLA researchers conducted a double blind randomised trial on 19 participants who consumed aged garlic extract or a placebo for one year. All the participants underwent a test called electron beam tomography (EBT) to determine their atherosclerotic plaque levels at the study's onset and again after 12 months. While the placebo group experienced an average progression in plaque build-up of 22.2 per cent, progression in the group taking garlic was just 7.5 per cent. Blood tests also revealed improvements in high-density lipoprotein (HDL) cholesterol and homocysteine status in the group taking garlic. These results are extremely encouraging in the on-going fight against atherosclerosis and heart disease.

Garlic is also a good alternative to aspirin, as it helps thin your blood without the drug's harmful side-effects. It is also able to lower high cholesterol, prevent blood clots from forming and generally improve the health of your arteries.

The recommended dosage is 1,000mg a day. The minerals selenium (15mg a day) and zinc (15mg a day) help boost garlic's blood-thinning properties and also act as powerful antioxidants preventing free radical damage inside your arteries.

6 **Fibre helps maintain healthy cholesterol levels and aids weight loss:** A high fibre diet is often recommended, especially for promoting weight loss as it helps you feel fuller for longer, as a result of slowing down the time it takes for your stomach to empty.

Fibre helps lower cholesterol in a similar way to curcumin, by preventing it from passing from your bowel to the rest of your body. Raw salad leaves, broccoli and 'GG-Bran' crisp breads are suitable low-carbohydrate sources of fibre.

However, the problem with consuming a lot of fibre is that it can cause nausea, abdominal bloating and indigestion. Fortunately, certain supplements, such as chitosan, have been found to provide the same cholesterol-lowering benefits as fibre but without its harsh side-effects. The recommended dosage for chitosan is three 500mg capsules taken twice a day.

7 **Niacin offers vital protection for your heart:** Also known as vitamin B3, niacin works by reducing levels of LDL. It also reduces other substances that are detrimental to heart health such as triglycerides – these are blood fats that, like cholesterol, contribute to your arteries becoming blocked.

You should be aware that niacin must be taken at a high dose in order to be effective. However, high amounts can cause facial flushing (a sudden redness and hot sensation in the face).

The recommended dosage is 1,000mg up to three times a day. If you do experience facial flushing then lowering the dose to approximately half or a third of the recommended amount should help clear the problem while still remaining effective.

8 **Soya helps keep your blood from clotting when it's not supposed to:** A soya-rich diet has been found to help reduce cholesterol and has now been approved by the American Food and Drug Administration (FDA) as an effective way to lower heart disease. It works in a variety of ways. Apart from lowering cholesterol and increasing HDL levels, it also prevents blood clots from forming within the arteries.

In addition, it acts as an antioxidant, which means that it helps prevent toxic damage from occurring inside your arteries.

To benefit from soya, include only fermented soya products in your diet, including natto, miso, tempeh, soya sauces, fermented tofu and soya milk (the rule of thumb here is to check the label to make sure the product contains fermented soya). Unfermented soya products, found in many processed foods and unfermented soya milk and tofu, contain high levels of phytic acid (phytate), which have been shown in a number of studies to block the absorption of vital nutrients such as calcium. Phytic acid also binds with certain other nutrients, including iron, to inhibit their absorption.

In contrast, fermented soya has been shown to enhance the bioavailability of beneficial nutrients such as iron and copper. Fermented soya also inhibits phytic acid and increases the availability of isoflavones, which research suggests have an anti-cancer action. Many studies have shown that traditionally fermented soya also helps prevent heart disease. The fermentation process also creates probiotics – 'good' bacteria the body is absolutely dependent on, such as lactobacilli – that increase the quantity, availability, digestibility and assimilation of nutrients in the body.

9 **Oily fish could lower your risk of a heart attack by up to 50%:** The heart-protective benefits of oily fish, like tuna, salmon and mackerel, have been well-documented. The omega-3 fatty acids in oily fish help reduce cholesterol levels – and they do it much more safely than statins *(Arch Intern Med 2005; 165(7): 725-30)*.

They have also been found to lower blood pressure, prevent blood platelets from clumping and dramatically lower blood fat levels *(Am. J. Clin. Nutr. 65:1645(S)-54(S), 1997; Am. J. Clin. Nutr. 72: 389-94, 2000)*. They can also help lower C-reactive protein – a marker of cardiovascular inflammation – to normal.

Not only that but one major study has calculated that just eating more salmon and cold-water fish can cut the risk of a fatal heart attack by up to 50 per cent (J. Amer. Med. Assoc. 274: 1363-7, 1995). Omega-3 fats have been found to lower the risk of strokes as well as heart attacks. One way they do this is by reducing elevated fibrinogen levels in the arteries. Fibrinogen is a protein

involved in the clotting system – and too much can obstruct your blood flow and lead to a heart attack or stroke.

There is though an ethical question about fish oils which each person needs to consider for themselves. In many cases the species being used to extract the oil may be farmed or specially bred, but in others they are being taken from a rapidly depleting natural stock.

In some cases you may prefer to use a Krill Oil product instead which is harvested from more abundant sources.

10 **Pantethine: Dual action reduces 'bad' cholesterol and raises levels of 'good' cholesterol:** Pantethine, a derivative of pantothenic acid, plays a pivotal role in cholesterol metabolism. In one study, 900 mg a day caused a 32 per cent drop in blood fats and a 21 per cent drop in LDL, while HDL levels rose by 23 per cent (Clinical Therapeutics 8(5):537-45, 1986). Take 500 to 1,000 mg a day.

Lower your homocysteine levels to protect your blood vessels from damage

As already mentioned, another serious threat to your cardiovascular health is high levels of homocysteine – an amino acid that promotes the build-up of plaque on your blood vessel walls, increasing your risk of a heart attack or stroke.

Studies have revealed that folic acid, vitamin B12 and vitamin B6 are able to prevent homocysteine from causing arterial damage by transforming it into a harmless substance called methionine in your body *(JAMA 2002; 288:973-979; Clin Nutr. 2005: 24(2):244-9)*. The recommended dosage for folic acid is 400mcg taken twice a day, together with 1,000mcg of vitamin B12 and 50mg of Vitamin B6 a day. Studies have shown that TMG (Tri-Methyl-Glycine) also called betaine, which is found in sugar beets, fish and legumes is able to bind to homocysteine and inactivate it *(Olthof MR, Verhoef P. Curr Drug Metab. 2005 Feb;6(1):15-22)*. The recommended dosage for TMG is 500mg a day.

Take steps to reduce inflammation – a more reliable predictor of heart problems than cholesterol

C-reactive protein (CRP) a substance produced by your liver in response to inflammation, is considered by many medical experts to be a far more reliable marker for cardiovascular complications than cholesterol levels. This is because atherosclerosis (narrowing of the arteries) requires inflammation to take place, so if CRP is elevated the stage is set for potential heart problems.

Omega 3 fatty acids, alpha-linolenic acid (ALA) in particular, have been found to help lower CRP in addition to improving blood flow in the arteries and preventing blood clots (Journal of Nutrition, July 2004; Circulation. 2004 Apr 6;109(13):1609-14). Better still, omega 3 fatty acids have also been found to lower high triglyceride (blood fat) levels, which are another well-known cardiovascular disease risk factor.

As well as eating plenty of oily fish like salmon, mackerel and herring, you can increase your intake of omega 3 fatty acids by consuming more walnuts, flaxseed oil and spinach. Alternatively, you can take omega 3 fatty acids in supplement form in a product called Eskimo 3 – the recommended dosage is three 600mg capsules with meals one to three times a day.

The remedies mentioned above are available from health food stores or online sources.

The Good Life Letter way to balanced cholesterol levels

In addition to the various products mentioned above there are some other options for looking after yourself with a daily supplement and here are a few suggestions that you might like to try from the Good life Letter Shop;

BERGAMET

This is an all-natural remedy derived from a bitter orange known as Bergamot. It can help control three of the deadliest common health threats facing Britons today: diabetes, high blood pressure and high cholesterol.

It acts like a natural statin, disrupting cholesterol production but without the side-effects. It also increases the uptake of glucose by cells, removing it from the blood where it causes the symptoms associated with diabetes.

Bergamet has undergone rigorous trials in Australia where cardiologist Dr Ross Walker has introduced it to his 600 patients with staggering results:

- An average 30% reduction in total cholesterol
- Between 20-30% reduction in blood glucose levels
- Improved blood pressure control
- Reductions in abdominal obesity
- Weight loss.

This is one of our most popular and widely used natural remedies and has many thousands of satisfied users.

RED RICE YEAST

A natural source of monacolins, essential fatty acids, plant sterolsand antioxidants. A useful dietar supplement for people with high cholesterol diets with a supportive amount of CoQ10 and antioxidant, grape seed extract.

Clinical trails show that red rice yeast reduce moderately elevated cholesterol levels. This supplement should be taken as part of a healthy low fat diet alongside exercise for maximum benefit.

PLEASE NOTE:

Seek advice from a healthcare practitioner before making any changes if you are on medication, have a serious health condition or recently had surgery. Seek advice if you are under practitioner supervision for cholesterol control. (such as raised blood cholesterol or triglyceride levels) before using any supplements.

If you have any queries, please contact Customer Services at: info@oxonpress.co.uk Tel: 01926 298221.

This advice is purely informative and was not written by a medical professional. If you are at all concerned about your health, seek professional medical advice.