Controlling Cholesterol

Cholesterol has become the focus of a great deal of attention in the modern medical world. Many people have thought that cholesterol is something that signifies a tendency towards coronary artery disease and heart disease, and it is generally assumed that is very difficult to bring cholesterol levels down if elevated and that a statin drug would need to be employed to accomplish the reduction. There are a number of factors that should be considered when it comes to considering cholesterol balance.

The original study of cholesterol done in the 1960s on approximately 240,000 subjects found that cholesterol levels above 300 directly associated itself with an increased risk of heart disease. What was also reported in the same study also was that cholesterol less than 130 directly associated itself with an increased risk of cancer. At first it was thought that cholesterol came from animal foods and fats that were consumed in the diet, although it was later discovered that two-thirds of the body's cholesterol is actually fabricated in the liver. Today with our new understanding around healthy fats and the impact of carbohydrates and high glycemic diets it is revealed that elevated triglyceride levels result in a downstream elevation of cholesterol. Chemically when triglycerides are high they automatically cascade downstream into high cholesterol. While the triglycerides lab values for the common American are said to be normal under 200 or 150 (depending on the lab), the truth is that any triglyceride level above 80 will result in unnecessary elevation of cholesterol. Oftentimes simply by limiting the glycemic intake in the diet the triglycerides fall to under 90 and the cholesterol naturally follows into range, optimally to be between 160 and 180.

If the triglycerides are under 90 and the cholesterol continues to be elevated it oftentimes suggests the possibility of some food allergy congesting and slowing the digestive process thus resulting in elevated cholesterol resorption from the gut. The most common allergy in this situation is eggs, and an estimated 30 percent of the population is allergic to eggs (lactalbumin). By eliminating eggs, if one is allergic to them and limiting the glycemic intake, the cholesterol naturally comes to an optimal level. It used to be expected that these changes in cholesterol take months or even years and that therefore legitimizes the employment of certain statin drugs to lower cholesterol. These triglyceride and cholesterol imbalances can actually be corrected profoundly within 7-10 days demonstrated by lab work. It is so simple to limit the glycemic index in the diet and see the triglycerides fall and subsequently the cholesterol normalize. It also is rewarding to discover that we can control our own chemical imbalances without having to use drugs to achieve this.

HDL cholesterol (high-density lipoprotein) is another consideration. HDL's are able to help transport cholesterol through the blood and keep it from plaquing onto the arterial wall. HDL's can be increased through exercise and through certain nutrients including red wine. Recently another factor has become a consideration as the level of Homocysteine protein in the blood acts as Velcro to attach the plaque to the arterial wall. Although normal levels allow up to 12-15, it is optimally recommended that Homocysteine be kept under 7. Interestingly enough Homocysteine is a purely nutritional event and if elevated simply adding vitamins B6, B12, folate and folic acid usually will return it to an optimal level. This is very good predictor of heart risk. Another influence to arterial wall plaquing is High Sensitivity C-reactive protein (HS-CRP). HS-CRP represents the state of inflammation in the body and therefore the subsequent stickiness of the arterial wall. By keeping our body free of chronic infection and immune burdens, especially allergies, the C-reactive protein will fall to less than .04 where there is very little likelihood that plaquing will occur.

There are multiple factors that influence the lipid profile of our blood. A few of them have been outlined above so that a person can begin to explore their own capability of controlling their own cholesterol levels. It is a most exciting thing to find that you are in control of your chemistry rather than the genes you inherited determining your destiny. Many people have been skeptical to believe how quickly the lipid profile could be optimized, and many have chosen not to try. When it is possible to see profound change within seven days there is every reason to be encouraged to try experimenting with your own lipid levels.