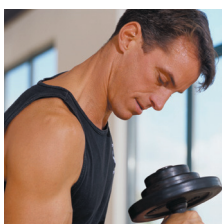
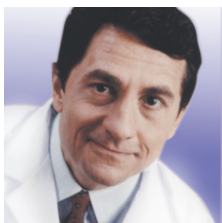
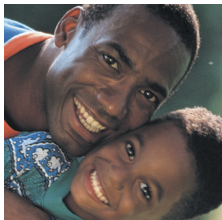
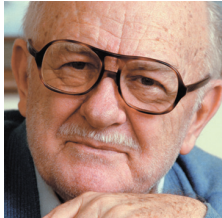


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A Closer LOOK

YOUR GUIDE TO THE FACTS

Cholesterol: Friend or Foe?



It would be difficult to find an adult American who does not agree that heart disease is America's number one killer. It would also be difficult to find a middle-aged American who does not believe that cholesterol is the number one cause of heart disease. Most adult Americans have been warned by their well-meaning and sincere primary physicians—and possibly by their cardiologists as well—that they should avoid food that is high in saturated fat (such as meat, eggs, and butter) because it can lead to heart disease. They have also been told that if their cholesterol numbers are high, that they should immediately go on prescription, cholesterol-lowering medications called statins. But is a low-fat diet combined with a statin medication really the best prescription to avoid or reduce the occurrence of heart disease?

In her recent report, "The Cholesterol Myth," CBN News' medical reporter, Lorie Johnson, reveals that many physicians today are questioning the high cholesterol equals heart disease cause and effect diagnosis, known in medical circles as the "lipid hypothesis", that has generally been believed as absolute fact for the past sixty years. Johnson talked with Dr. Stephen Sinatra about his once-conflicting findings as a practicing cardiologist, "I was doing angiograms on people with (cholesterol levels of) 150, who had far advanced heart disease, and the converse, I was doing angiograms on somebody with cholesterol (levels) of 280 and they had no heart disease." Sinatra has since come to believe that cholesterol is a minor player in the development of heart disease and that the real culprit is inflammation. In his newest book, ***The Great Cholesterol Myth: Why Lowering Your Cholesterol Won't Prevent Heart Disease—And the Statin-Free Plan That Will*** (Copyright © 2012 Fair Winds Press) co-written with Jonny Bowden, Ph.D., C.N.S., Sinatra compares cholesterol to firemen at a fire, "You know cholesterol is found at the scene of the crime for heart disease, but it's not the perpetrator." He even goes on to say, "Cholesterol many times can be a gift in disguise." But how can that be? How could cholesterol, which has to this point been seen as a deadly foe, now be seen as a friend?

WHAT ARE THE BENEFITS OF CHOLESTEROL?

Dr. Sinatra explains his conversion from being a pro-statin, anti-cholesterol, paid consultant of statin drug manufacturers to being a self-proclaimed "cholesterol skeptic" in great detail in his book, ***The Great Cholesterol Myth*** (Copyright © 2012 Fair Winds Press). While investigating the cholesterol research more closely, he came to realize that "life can't go on without cholesterol" and here are a few of the reasons why:

- Cholesterol is a basic raw material made predominantly by the liver, but also by the brain and almost every cell in the body
- Enzymes convert cholesterol into the beneficial vitamin D and bile salts for digesting and absorbing fats
- Enzymes also convert cholesterol into steroid hormones, including the sex hormones estrogen, progesterone, and testosterone; a reduction in these hormones—especially testosterone—can lead to sexual dysfunction in both men and women
- The membranes surrounding cells and the structures within those cells are mostly made up of cholesterol which helps maintain cell integrity and communication
- One-quarter of all the cholesterol in our bodies is in our brain
- One-fifth of the myelin sheath that coats every nerve cell and fiber is made of cholesterol
- Hormones, such as serotonin, which affects feelings of relaxation, well-being, and satisfaction, and oxytocin, the person-to-person bonding enhancer, are highly dependent on cholesterol-rich cell receptors in the brain in order to perform their life-enhancing roles
- Cholesterol contributes to your immune system; some types of human LDL are able to inactivate more than 90 percent of the worst and most toxic bacterial products

WHAT ABOUT BAD CHOLESTEROL?

Before you begin to think that all cholesterol is good, know that there is still “bad” cholesterol out there, it’s just not what you might think it is. Up to this point, HDL (high-density lipoprotein) has been considered to be the “good” form of cholesterol and LDL (low-density lipoprotein) has been the “bad” form of cholesterol. Dr. Sinatra reports that this is now a wholly outdated concept because research has found that there are numerous “subtypes” of both HDL and LDL, and they do very different things—some good and some not so good.

Sinatra explains that the most important subtypes of LDL are subtypes A and B. Subtype A is a big, fluffy molecule that does no harm. Subtype B is a small, hard, dense particle that becomes oxidized and sticks to the walls of arteries, beginning the process that leads to heart disease—inflammation. LDL subtype B is the bad “bad” cholesterol. This shows why knowing your total LDL number is useless or even counterproductive if you don’t also know how much of that LDL is subtype A and how much is subtype B.

Dr. Sinatra goes on to explain that even HDL has been shown to have varying degrees of quality and some can actually be categorized as “bad.” The HDL of people with chronic diseases is very different than the HDL of healthy folks; normal “good” HDL reduces inflammation while dysfunctional, or “bad” HDL does not. Sinatra urges readers to ask their physicians to find out what kind of HDL they have.

Because of their ability to reduce inflammation (not cholesterol), Dr. Sinatra does prescribe statin medications, on occasion. However, he limits his prescriptions almost exclusively to high risk, middle-aged men, less than 69 years of age, who have already experienced a first heart attack, coronary intervention (e.g., bypass, stent, angioplasty) or coronary artery disease. He does not prescribe statins for the elderly (70 and above) or generally for women, except in rare circumstances. In place of medications, Sinatra prefers to lower inflammation, and therefore the risk of heart disease, with natural supplements, an improved diet, and lifestyle changes which include managing stress. This prescription for reducing inflammation has only one side effect: better heart health.

Fact Resources:

Material contained in this edition of *A Closer Look* is a compilation of information from the following sources: “The Cholesterol Myth” by Lorie Johnson, CBN News Medical Reporter; first airing of the video report: October 23, 2012 on *The 700 Club* and ***The Great Cholesterol Myth: Why Lowering Your Cholesterol Won’t Prevent Heart Disease—And the Statin-Free Plan That Will*** by Jonny Bowden, Ph.D., C.N.S. and Stephen Sinatra, M.D., F.A.C.C. (Copyright © 2012 Fair Winds Press; Text © 2012 by Jonny Bowden and Stephen Sinatra) All rights reserved.

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