

Is it always important to reduce your cholesterol?



by **Fiona Kane**
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Total cholesterol - a number often treated as the most important when measuring your health. How important is your cholesterol

number? Well, it depends on many factors.

Cholesterol is not the enemy. Most of your cholesterol is made by your liver because it is essential for good health. It insulates neurons, is part of the structure of every cell in the body, produces bile to digest fats, helps metabolise important fat soluble vitamins A, D, E and K and makes hormones such as testosterone, oestrogen and adrenal hormones.

There are two main types of cholesterol that can cause health problems - oxidised cholesterol and certain types of LDLs (particularly small dense LDLs). HDLs and LDLs can both be good or bad, depending on if they are oxidised. It also depends on whether important inflammatory markers are high in the blood (eg *C-reactive protein* (hsCRP) and ESR). Your blood glucose, insulin and triglycerides along with weight, waist size, diet and stress levels all play a big factor in whether or not you have these types of damaging cholesterol and whether or not your cholesterol number is a problem.

Most blood tests for cholesterol measure total cholesterol, HDL and LDL. They often do not measure oxidised cholesterol, they do not measure what kind of LDL cholesterol you have and they do not assess all of your cardiovascular risk factors. Since cholesterol lowering medications (particularly statins) can have such severe "side-effects", starting on medication without looking at total risk is not a good idea. Side-effects include severe muscle wastage and pain, fatigue, memory issues and nutrient deficiencies.

A study published in the Archives of Internal Medicine in 2012 concluded that statin medication used in post-menopausal women is associated with a 48% increased risk of diabetes! Another more recent study in men carried out at a university in Finland followed men aged between 45 and 73 for six years and found a 46% increased risk of diabetes. The findings have been published in *Diabetologia*, the Journal of the European Association for the Study of Diabetes.

Cardiologist, Dr Ross Waker, says "If you just have high cholesterol and nothing else, I can't see there's any point in you taking a statin because in my view the long term side effects of statins outweigh the benefits."

Neurologist, Dr David Perlmutter, explains that "new research also reveals that statins (cholesterol meds) may lessen brain function and increase risk for heart disease."

"Now two thirds of people admitted

to hospital with a diagnosis of acute myocardial infarction really have metabolic syndrome - but 75% of these patients have completely normal total cholesterol concentrations. Maybe this is because total cholesterol isn't really the problem," Dr Aseem Malhotra explains.

"This research shows you are more likely to develop irreversible Type 2 diabetes than prevent a non-fatal heart attack if you are at low risk."

We are beginning to understand that cardiovascular disease has little to do with cholesterol and relates more to metabolic syndrome and inflammation (including blood pressure, blood sugar regulation, triglycerides etc).

Dr Walker always recommends that people have a non-invasive test called a CT Coronary Calcium Score before they are prescribed statins. This helps to identify if you have any "muck" in your arteries and therefore whether or not your cholesterol is causing you a problem.

So, should we remove fat from our diet? Dr Perlmutter says that "the belief that the cholesterol we eat converts directly into blood cholesterol is unequivocally false". So don't be afraid to eat fat!

"Because of flawed science over 30 years we have wrongly demonised fats when the focus should have been on sugar," says Dr Malhotra in agreement.

Yes, sugar, highly refined carbohydrates and poor quality fats (largely packaged food/takeaway/fast food) are driving an epidemic of metabolic syndrome which is causing heart disease. This type of diet leads to inflammation, oxidised cholesterol and increased small dense LDLs (the damaging kind of LDL).

For good health it is important to eat a diet with adequate protein, fat and lots of colourful vegetables. For good health, don't avoid fat and don't avoid eggs! Just eat real foods including quality free range meats such as grass fed beef, free range eggs and chicken and fish. Add avocado, garlic, onion, celery, cold pressed extra virgin olive oil, coconut oil, unsalted block butter and ghee. Snack on small servings of raw nuts and seeds such as almonds,

walnuts, hazelnuts, pecans, sunflower seeds and pepitas. Colourful fresh whole fruit like berries and vegetables such as beetroot contain antioxidants,

which help prevent cholesterol from being damaged/oxidised.

As you can see, it is important to treat your total risk, not just a number.

"I don't treat cholesterol, I treat risk, the most important thing is to have an assessment of risk," Dr Ross Waker says.

Please note: it is important not to change your medication without first consulting your doctor, this article only provides some information you can use to start a conversation.

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