

Safety and Efficacy of Natural Agents in the Treatment of Hyperlipidemia

By Dr. Konrad Kail, ND

Hyperlipidemia is one of the oldest and most common markers of cardiovascular disease. There are many drugs that lower serum lipids, most of which have significant side effects. The statin drugs are the most prescribed lipid lowering substances. Many people, however, get elevated liver enzymes and joint/muscle pains from taking statin drugs.

This case series recorded serum lipids in patients needing treatment or being treated for hyperlipidemia. We measured serum lipids in people that were already on a medication for at least 30 days. People on no medication were measured baseline and 30 days after treatment. We examined a Lipid lowering formula (L) and a Liver focused formula (P), which was formulated to focus on the liver metabolism of cholesterol. We compared them to people on statin drugs (S) and on other natural lipid formulas (O).

Testing and Protocol:

Serum tests of cholesterol, LDL, HDL, Triglycerides and Chol/HDL ratio were performed on people who had been on lipid lowering medication for at least 30 days. Untreated people were measured at baseline and after 30 days of treatment. Patients were given a choice of taking the liver focused (P) or the lipid focused (L) formula. Serum ALT and AST was added to the protocol so one cohort (liver focused) did not get these measurements. Serum tests were performed at Sonora-Quest laboratories.

Lipid lowering formula (L) 4/day consisted of:

Inositol hexaniacinate 250 mg
Red Yeast Rice 600 mg
Phosphatidyl choline (soy) 500 mg
Garlic Powder 300 mg
EPA 300 mg
L-carnitine 250 mg
DHA 200 mg
Artichoke Powder 100 mg
Lactobacillus sporogenes 100 mg
Policosanol (sugar cane) 20 mg

Liver focused formula (P) 2/day consisted of:

Red Yeast Rice 1200 mg
Milk Thistle 210 mg
Alpha Lipoic Acid 100 mg
Co Q 10 60 mg

Other Natural Agents (O):

Niacin 2 grams
Timed Release Niacin 2 grams/day
Timed Release Niacin 2 grams and L-Carnitine 400 mg/day
Policosanol 10 mg
Policosanol 20 mg
Policosanol 40 mg
Red Yeast Rice 2400 mg/day

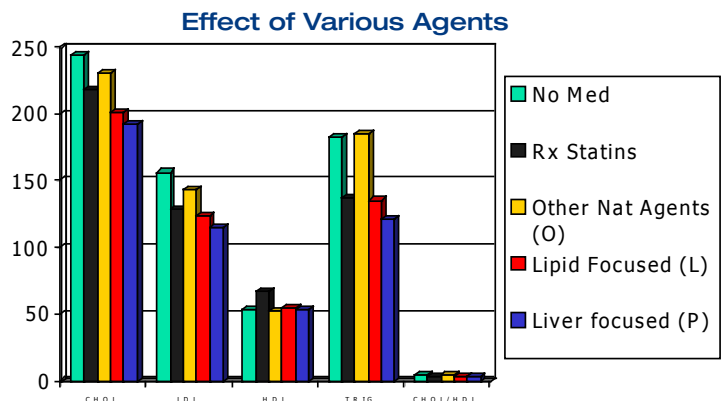
Prescribed statins (S):

Lipitor
Crestor
Zocor

Results:

Objective data:

All formulas lowered serum lipids. The liver focused formula (P) performed the best. Prescription statins raised HDL and lowered Chol/HDL ratios the most (Figures 1 and 2). People on prescription statins had the highest levels of ALT and AST (Figure 3).



N=
No Med 101
Rx Statins 10
Other Natural (O) 15
Lipid Focused (L) 44
Liver Focused (P) 74

Figure 1: Percent Change

	Cholest	LDL	Trigly	HDL	Chol/HDL
Lipid Focused (L)	17.33	21.11	25.71	2	18.5
Liver Focused (P)	21.14	26.58	33.76	1	19.24
Other Natural (O)	15.54	8.06	-2	-2.5	1.69
Statins (S)	10.47	17.77	24.53	2.5	29.39

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Figure 2: Liver Enzymes on Medication

Toxicity: AST and Alt were added to look at safety. AST and ALT remained in the normal range in all cohorts measured but the statin cohort had the highest ALT and AST. The liver focused cohort did not get enzymes measured, but based on all other measurements (and that this formula contained milk thistle) it is doubtful that the medication would have caused liver enzyme elevation.

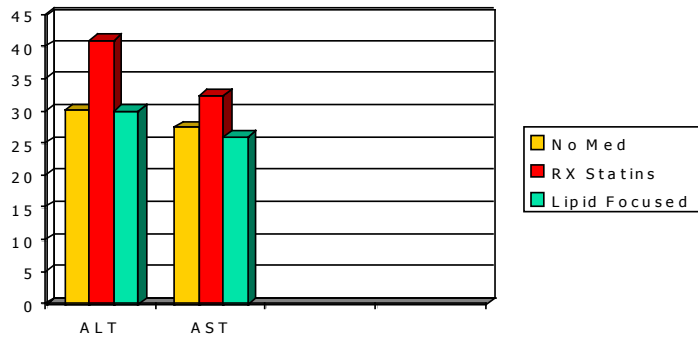


Figure 3:

Statistics: Student's unpaired T-Test was performed on the data. At the 95% confidence level p values were as presented in (Figure4).

	Cholesterol	Triglycerides	LDL	HDL	Chol/HDL
Lipid Focused	<0.0001	0.0033	<0.0001	0.51	<0.0001
Liver Focused	<0.0001	0.0028	<0.0001	0.98	0.0011
Other Natural	0.17	0.91	0.16	0.7	0.8
Rx Statins	0.037	0.14	0.014	0.001	0.0002

Figure 4:

Conclusions: All agents studied lowered cholesterol, LDL, and Triglycerides. Natural agents are effective for lowering blood fats and cardiac risk. The formula that was liver focused performed better than other agents. Prescription statin drugs raised HDL the most and reduced Chol/HDL ratio the most. People on prescription statins had higher ALT and AST values than people on natural agents.

Mixed natural statins and other natural agents to modify blood fats are effective at reducing serum lipids and cardiac risk. They are a viable alternative to prescription medications for treating hyperlipidemia, especially in those who may get side effects or liver enzyme elevation on prescription medications.

Acknowledgements:

I want to thank Western Research Laboratories for providing the lipid focused agent (L). Dr. Kail is a consultant to both of Western Research Labs and to Protocol for Life Balance™.

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D-Mannose Urinary Caps

D-Mannose is a simple sugar that occurs naturally in some plants, including cranberries. Although small amounts of D-Mannose are metabolized by the human body, much of it is rapidly excreted in the urine. In the bladder, D-Mannose can adhere to bacterial lectins, preventing them from sticking to the lining of the bladder. Bacteria can then be flushed away during urination, thereby precluding the formation of colonies within the urinary tract. Because insubstantial amounts of D-Mannose are used by the body, it does not interfere with blood sugar regulation.* D-Mannose does not kill bacteria. Please see a health care practitioner if you have an infection. D-Mannose is a simple sugar that occurs naturally in some plants, including cranberries. Although small amounts of D-Mannose are made by the human body, much of it is rapidly excreted in the urine.

D-Mannose supplementation encourages bacteria to bind to it rather than the lining of the urinary tract. It works in this way: In the bladder, D-Mannose “sticks” to bacterial lectins, preventing them from attaching to the lining of the bladder. Bacteria can thereby be flushed away during urination, making it more difficult for them to form new colonies inside the urinary tract. D-Mannose is not antibacterial. It does not eliminate infections.

D-Mannose is safe and natural, and since it isn't metabolized in the body, it doesn't interfere with blood sugar regulation or create an imbalance in the normal body gut flora (microorganisms that normally live in the digestive tract).*



Supplement Facts	
Serving Size 3 Capsules	
Servings Per Container 30	
Amount Per Serving	
Calories	6
Total Carbohydrate	1.5 g
Sugars	1.5 g
D-Mannose	1.5 g (1,500 mg)

Other ingredients: Gelatin (capsule), Stearic Acid (vegetable source), Magnesium Stearate (vegetable source), Silica and Rice Flour.

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