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THE STAND **CHOLESTEROL**

This waxy, fatty stuff gets a whole lot of press, does it not?

The American public, at least that part which cares about things cardiovascular and that irreplaceable organ, the heart, has been warned time and again about the dangers of high cholesterol. Some experts say cholesterol in total should be under 200, while others say that the danger point is anything over 240 total reading. Virtually all are agreed that high cholesterol which can contribute significantly to heart attack or stroke starts at anything over 240.

Medical experts have, to this point, been concerned with the readings for total cholesterol. Too high can be too bad. Next has been that cholesterol component called LDL (Low Density Lipoproteins), or VLDL (Very Low Density Lipoproteins) which are the bad guys. LDL components of cholesterol are responsible for plaque build-up in the arteries, which hastens heart attack and stroke.

But now, experts are totally concentrated, even fixated on the good cholesterol, namely HDL (High Density Lipoproteins). The more the better, and the better the chance of not having heart attack or stroke. HDL has become so important that science has produced a laboratory version of an unusually effective form of HDL which protects the heart against disease, and even removes plaque and fatty build-ups from the arteries themselves, in addition to cleansing the bloodstream. This synthetic, good cholesterol, works by intravenous injections, and has the affect of a LIQUID DRANO on narrowed arteries. In time, this synthetic good cholesterol works away at narrow and restricted arteries, cleansing the plaque and other calcium build-ups which widens the artery and allows for far better blood flow, greatly reducing the possibility of heart attack or stroke. What an absolutely amazing experiment. That is especially so when one considers that plaque formation can begin in the teens and early twenties. Narrowed arteries are not for old folks only.

So the objective is to raise the HDL levels of cholesterol and improve the ability of HDL to fight plaque. Technically, what happens is that a key protein component of HDL has been identified, and when at work, energizes the HDL to produce larger than normal particles. THOSE LARGER THAN NORMAL HDL PARTICLES are what is believed to make HDL cholesterol especially efficient at removing plaque! The highly cleansing, newly protein-energized HDL cholesterol really works. In one study, patients had an almost 5% reduction in plaque build-up in the coronary arteries in just five weeks! The build-up of plaque and calcium stopped and the stuff cemented to the artery walls began to dissolve and erode. That is a phenomenal achievement.

Doctors are excited, even thrilled about the possibilities. Many believe that this newly energized HDL cholesterol when combined with medicines which attack LDL (statins, i.e., Lipotor, Mevicor) can have an even more dramatic effect upon plaque build-up, calcium and the role of a healthy, normal cholesterol at work.

Exciting times, are they not? Those who have high cholesterol, or the actuality or potentiality of heart attack or stroke have hope that the main substance which causes all such now the problem can become the solution. Over 40, every person should have their cholesterol checked at least once yearly, if not more often. Most doctors recommend that cholesterol be thoroughly evaluated once annually over 30. There are many who now suggest that cholesterol be checked annually in the twenties. That will be hard to accomplish because everyone in their twenties thinks they will live forever. But there is nothing like preventive medicine, and if cholesterol can be evaluated, the measurements tracked and preventive medicine including lifestyle changes employed, there can be far greater longevity and a better and healthier life in the present.

Medical science and research done right is unbelievable. Thank God for the possibility of a new and better HDL cholesterol.