

□ **The Truth About Statins**

Patrick Holford explains why diet is more effective than statins in lowering cholesterol

A recent study (1) offered evidence that statins can halt and even reverse the progression of heart disease. The results were widely reported across the press and Professor Roger Boyle, the government heart tsar, declared that statins are so safe and effective that ideally every man over 50 and every woman over 65 should be taking them.

Statin prescriptions have **risen by 150%** in England in the past 5 years and the National Institute of Clinical and Health Excellence (NICE) recommend that statin therapy is offered to all adults with a 20% risk of developing cardiovascular disease in the next 10 years (2).

But what is the truth about statins? A growing number of experts are raising doubts about the safety and effectiveness of statins.

One study found that men over 69 **didn't benefit from taking the statins at all**, they didn't live longer and didn't have fewer heart attacks and women of any age didn't benefit either (3).

In addition there are side effects, including muscle pain and weakness, which are unsurprising when you look at what statins do. Statins work by blocking the production of 'bad' LDL cholesterol in the liver and in doing so block a vital substance called co-enzyme Q10 (CoQ10).

Among other things **CoQ10** is vital for energy production in the muscles. Controlled trials have shown that it has a remarkable ability to improve heart function (4,5) and is now the treatment of choice in Japan for congestive heart failure, angina and high blood pressure.

To prevent or treat cardiovascular disease take CoQ10 every day and make changes to your lifestyle and diet, focusing on a low glycemic-load diet and making sure you eat the right sort of fat such as Omega 3 found in oily fish.

Whilst statins work by reducing the 'bad' cholesterol, there is a vitamin which will raise the levels of HDL 'good' cholesterol. This is the **B vitamin niacin (B3)**. A number of studies show that it is effective not only in raising HDL by as much as 35%, but also in reducing LDL by up to 25%. In comparison, statins only raise HDL by between 2% and 15%.

Check your **homocysteine levels** as high levels in the blood increase risk of stroke mortality. Fortification of flour with **folic acid** (an important homocysteine-lowering B vitamin) in Canada and the US has coincided with

a considerable drop in heart attack and stroke rates of between 10% and 15%. Translated into UK terms, that means that increasing folic acid intake could actually save more than 5000 lives a year. And if folic acid is taken for three years, it can lower stroke risk by 31%, according to a recent analysis of all trials, published in The Lancet (6).

As well as folic acid, other B vitamins - **B2, B6 and B12** - also help to lower homocysteine, along with zinc and a nutrient called TMG (trimethylglycine). These nutrients are found in greens, beans, lentils, nuts, seeds and root vegetables. Cutting back on alcohol and coffee, reducing stress and stopping smoking will also help to reduce homocysteine.

Eat plenty of food **rich in magnesium** and supplement 300g, as it improves heart muscle function and lowers blood pressure (7). The richest source of this mineral is dark green vegetables, nuts and seeds, especially pumpkin seeds. Plant sterol and soluble fibre both have a cholesterol-lowering effect so **eat more seeds, nuts and beans, especially soya, oats, barley and aubergines.**

This is a summary of my special report on [What to do if you have high cholesterol](#) which you can access in full if you subscribe to 100% Health.

Wishing you the best of health

Patrick

Recommended further reading: [Food is Better Medicine Than Drugs](#); [Say No To Heart Disease](#); [The H Factor](#)

Recommended test: [Homocysteine Test](#)

References 1. I Ford et al (2007) Long-Term Follow-up of the West of Scotland Coronary Prevention Study 2. Statins for the prevention of cardiovascular events (2006) National Institute for Health and Clinical Excellence 3. J Abramson & J Wright, 'Are lipid-lowering guidelines evidence-based?', Lancet (2007), vol 369, pp 168-169. 4. K Jones et al, 'Coenzyme Q-10 and cardiovascular health', Alternative Therapies in Health & Medicine (2004), vol 10, issue 1, pp 22-30; also M Dhanasekaran & J Ren, 'The emerging role of coenzyme Q-10 in aging, neurodegeneration, cardiovascular disease, cancer and diabetes mellitus', Current Neurovascular Research (2005), vol 2, issue 5, pp 447-59. 5. P Langsjoen & A Langsjoen, 'Overview of the use of CoQ10 in cardiovascular disease,' Biofactors (1999), vol 9 issue 21-4, pp273 -84. 6. X Wang et al, Lancet (2007), vol 369, pp 1876-1881. 7. B T Altura & B M Altura, 'Magnesium in cardiovascular biology', Scientific American (1995). pp 28-36.