

Cholesterol – Special Report # 7

Controlling Cholesterol and Triglycerides

***...What Your Doctor Doesn't
Tell You!***

The Institute Of Nutritional Science

www.HealthyInformation.com

1-888-454-8464

1-858-217-2427

AskTheDoc@HealthyInformation.com

This Special Report does not intend to diagnose disease, nor to provide specific medical advice. Its intention is solely to inform and to educate. The author intends that readers will use the information presented in this report in cooperation with the advice of a qualified health professional trained in such field.

© Copyright 2004 - K. Steven Whiting, Ph.D.

Dr. K. Steven Whiting - Biography



Dr. Whiting is an Orthomolecular Nutritionist. His degrees include a Masters in Psychology as well as a Doctorate in Biochemistry earned at International Universities.

Three decades of personal, practical experience in the field of human nutrition have earned him an international reputation, not only in the understanding of the human body and the profound effect that nutrition plays in protecting and preserving the body, but also in the outstanding results that he has consistently achieved while working with clients and patients on a global scale.

Dr. K. Steven Whiting

His commitment and dedication within the nutrition field has led him to extensive research into such chronic conditions as Heart Disease, Arthritis, Diabetes, Osteoporosis and Prostrate problems to name but a few. The result of this research has been pivotal in the development of nutritional protocols for the prevention, management and reversal of these conditions.

Studies he has conducted have led to a totally new system of weight management, based on '*Body Typing*', wherein HOW a persons body handles food is evaluated BEFORE they are put on a weight management program that's customized for them.

More recently, he has focused his attention on the human immune system. His subsequent research into deep viral infections has led to the use of oxygen therapy as well as other potent, all-natural immune boosters for the management of immune-compromised conditions.

Further, his work with AIDS and cancer patients, using meditation, biofeedback and visualization has received worldwide attention.

Dr. Whiting has served both as Consultant and Staff member to many of the leading alternative and complimentary hospitals in Europe and Latin America, where he has had the opportunity of applying his concepts to those individuals who were in most need. This has resulted in the development of nutritional support protocols for a variety of chronic health challenges.

Through his international affiliations, he remains current on the very latest progressive applications of nutrition for a wide variety of chronic degenerative disorders, for which orthodox medicine has offered little hope.

In 1991, Dr. Whiting founded *The Institute Of Nutritional Science*, an international organization, with offices in London, England, Den Haag, The Netherlands and San Diego, California. The purpose of The Institute is to gather information and conduct research on how natural supplements can prevent, manage or reverse disease conditions.

The Institute publishes *The Journal*, available by subscription, to disperse nutritional information, relevant to disease, in an easy to understand, user-friendly fashion.

As an author, Dr. Whiting has published a series of Self Help booklets and reports on nutrition and its role in preventing, managing and reversing disease. A text- book, entitled *Gaining and Maintaining Total Health*, and *Self Health –Your Complete Guide To Optimal Wellness*, which rapidly became a best seller after its first publication in 1996. His most recent book *You Can Be ...Well At Any Age : Your Definitive Guide To Vibrant Health and Longevity*, is the most comprehensive work of it's kind, containing over 250 protocols for a wide spectrum of human health challenges

Author, Lecturer, Teacher, Product Formulator and Consultant, Dr. Whiting is dedicated to helping others in helping themselves toward a more healthful existence, through a better understanding of the nutritional needs of the body. He is the exclusive formulator of all the nutritional products for Curves Fitness Centers, the largest business of its kind in the world.

He is committed to empowering individuals with the very latest nutritional information, safe in the knowledge that this will serve to enhance both the quality and the quantity of life for everyone in the years ahead.

Controlling Cholesterol And Triglycerides

....What Your Doctor Doesn't Tell You

Introduction

According to the American Heart Association, more than 100 million people in the United States alone, have high levels of Cholesterol.

In spite of this fact or perhaps because of it, Cholesterol, one of the most misunderstood of all substances in the human body, has been the center of both attention and controversy for several decades. Regardless of the amount of discussion concerning this essential substance, there remains, many myths concerning Cholesterol and its role in both health and disease.

Firstly, much of what you will read in this booklet will be in direct contradiction to almost everything else you have read or heard about Cholesterol. This is because I have looked at this problem as a biochemist rather than as a medical doctor.

Doctors look at Cholesterol and see it as the sticky fatty substance that clogs arteries and leads to occlusions and heart attacks. I see Cholesterol as an essential substance, manufactured by the body, to meet daily needs. I agree with medicine wholeheartedly, that excess Cholesterol in the bloodstream can greatly complicate an existing cardiovascular problem, but Cholesterol has never CAUSED the problem. I also agree that excess Serum Cholesterol is not a healthy situation, but I totally disagree as to how to manage and eliminate this problem.

Cholesterol is a normal and essential substance. Why then, does it build up in the blood stream to dangerously high concentrations in some people but not others? The answer to this question will be found, I believe, in the pages that follow.

We will not only outline the cause of this problem, but a safe, and simple way to lower Cholesterol, increase HDL and lower LDL as well as manage another type of blood fat far more dangerous to your health and even your life than excess Cholesterol and they're called the Triglycerides.

In the last 25 years, people have been taught to fear Cholesterol as some kind of evil foreign substance that gets into your blood vessels and plugs up arteries leading to Heart Disease. This, in spite of the fact that there has never been one single clinical study to prove that Cholesterol is the cause of ANY form of cardiovascular disease.

Because of this hysterical paranoid attitude towards Cholesterol, we have all gone on the low Cholesterol, low fat diets, in a desperate attempt to lower Serum Cholesterol. For the majority of people, these rigid dietary restrictions have only lowered Cholesterol by a few meager percentage points. The end result is that they are placed on one or more of a group of drugs called Statin drugs. While these are often quite effective in lowering Serum Cholesterol levels, their side effects are just beginning to be realized, the worst of which is Liver failure. There just has to be a better and safer way!

In the pages that follow you will learn that Cholesterol doesn't cause Heart Disease. You will come to understand that excess Cholesterol in the blood stream is a Liver problem and not solely a diet problem. You will learn why Triglycerides are far more dangerous than Cholesterol and how to lower them. And lastly, we will outline our tried and proven program for managing Cholesterol both safely and effectively through key dietary supplements, a little exercise and small changes to your present diet.

There will be no boring and bland low fat, low Cholesterol diets; there will be no drugs, many of which are so dangerous that regular monitoring is required with blood tests. Instead, there will be a program that everyone can follow, with very little impact on their present lifestyle.

Once you understand the WHY of something, managing the problem automatically becomes easier. We have freed thousands of people from the stress of desperately trying to 'diet' their Cholesterol levels back to normal. We have freed thousands of people from the risks and dangers of the leading anti-cholesterol drugs, replacing them instead, with safe and healthy nutrients. This can happen for you also.

How Did We Get In This Mess?

For decades medical science has both believed and taught that blood fats, namely Cholesterol were at the cause of what had become the number one cause of death – the Myocardial Infarction or 'Heart Attack'. Coronary Thrombosis or blood clots seemed to most often occur at sites in the coronary arteries where lesions and fatty deposits had reduced or cut off blood flow.

In 1974, the actual cause of Heart Disease, the leading cause of death, was finally determined. In the years afterward, numerous clinical studies would confirm the validity and accuracy of this cause.

Many of you will be surprised and shocked to hear that Dietary Cholesterol was NOT found to be the cause at all. It is now established that the studies conducted by *Dr. Earl P. Benditt of the University of Washington, School of Medicine in Seattle*, which illustrated that Cholesterol deposits on the artery walls were the END result of the mutated cellular deterioration of the artery wall, not the cause of it. In other words, Cholesterol doesn't stick to healthy arteries!

How did this myth start? Well, autopsies on thousands of bodies, mostly male at the time, revealed thick deposits of a yellowish sticky substance adhering to the walls of the arteries in key junctions along the cardiovascular tree. Upon analysis, this substance was found to be Cholesterol. Unfortunately no one bothered to ask the question.. **why** was this substance there?

There are many, well established risk factors for the development of Heart Disease such as cigarette smoking, lack of exercise, obesity, excess stress and a lack of proper nutrients. Cholesterol should NOT be part of this list. Excess Cholesterol only becomes an increased risk factor after 90 percent of the arterial damage has already been done!

Coronary Thrombosis, the leading cause of Heart Disease is a relatively new medical condition. While today, it accounts for more premature deaths than any other cause, there were no cases of this problem before 1890. Between 1900 and the present time, Coronary Disease has struck down higher numbers of people, and at younger and younger ages in each succeeding decade.

These statistics are important because we are told that it is the excess fat and cholesterol-rich foods in the 'modern' diet that has lead to this sorry situation.

Not so, because our ancestors, certainly before 1890, consumed a diet much richer in fat and cholesterol-contributing foods than in our era of low fat fanaticism, yet Heart Disease was virtually unknown at that time!

In 1914 the four most common forms of Heart Disease were Rheumatic, Hypertensive, Enlargement, and Syphilitic. By 1930 the four most prevalent forms of this disease were Hypertensive, Coronary, Rheumatic and Syphilitic. By 1950 Coronary Heart Disease had taken the number one position over all other forms of heart disease and has steadily risen to epidemic proportions ever since. In fact, in the last 25 or 30 years – the period of the low fat/low cholesterol craze, Coronary Heart Disease has doubled several times!

Since we can establish that Heart Attacks have been the leading cause of death for only the last 50 years, presently they are killing more than 800,000 people every year and Cholesterol and the High Cholesterol Diet has been around for eons of time, Cholesterol is not the likely villain.

*(For more information on Heart Disease refer to Special Report #4 entitled **Heart Disease – The REAL Cause, the REAL Answer**)*

The Cholesterol Myth

While avoiding Cholesterol is one of the worst forms of food-faddism to ever be conceived, it continues to receive the blessing of the American Heart Association and the American Dietetic Association.

As a result of massive and expensive campaigns on virtually every media available, most of us now believe that Cholesterol is at the heart (pun intended) of all Heart Disease. Following this terrible advice has not lowered the incidence of Heart Disease even a single percentage point, yet we continue to beat the same concept to death, in spite of the fact that it has been totally ineffective in reducing or eliminating the incidence of Coronary Heart Disease.

In the 1970's a plethora of clinical studies clearly showed that Cholesterol was not the bad guy we had been led to believe. *Dr H. Newland, published in the Annals of Internal Medicine in 1976* stated, *"The lipid hypothesis – which lipids cause arterial disease and that lowering lipids will decrease arterial disease – is no longer viable and should be recognized as such"*.

Since the 1950's hundreds millions of dollars have been spent on study after study, attempting to prove that Dietary Cholesterol can induce Heart Disease in humans. Much of the funding for these studies has come from companies, which manufacture cereals and polyunsaturated fat products.

The fact of the matter is that you don't have to eat Cholesterol for Cholesterol to be present in excess quantities in the body. The body produces Cholesterol from a variety of substances including protein, fats or carbohydrates. Further, the majority of total Cholesterol in the human body at any given time is manufactured by the body, in the Liver.

Cholesterol is absolutely essential to the health and well being of the human body. In fact, excessively low levels of Cholesterol are far more dangerous than elevated levels, leading to a rapid increase in the risk of Stroke and Gallbladder Disease.

In 1980 French researchers, studying over 7,000 male workers found that the risk of several types of Cancers rose exponentially as total Serum Cholesterol levels fell below 200 mg/dl, the level the Heart Institute calls 'normal'!

Not accepting the findings of the French study, the National Cancer Institute conducted a much bigger study on 12,488 men and women. The results again indicated that the participants with the lowest Cholesterol levels were more than twice as likely to be diagnosed with Cancer as those with the highest Cholesterol levels.

Cholesterol is essential to physical health. Some of the functions of this important substance include:

- Keep the membranes of our cells functioning properly. Too little Cholesterol can cause the membrane to become too fluid and fall apart.

- Compensates for changes in membrane fluidity, maintaining it within the narrow limits that assure optimal membrane function.
- Manufactures sex hormones, which maintain the differences between the genders.
- Manufactures Adrenal Corticosteroid hormones, which regulate many metabolic functions within the body, and maintains water and electrolyte balance.
- It is necessary for normal growth and development of the brain and nervous system.
- Vitamin D is manufactured in the body from Cholesterol.
- Bile acids, which emulsify fats, are derived from Cholesterol. Through bile acids, Cholesterol performs vital functions in the entire digestion and absorption of fats, oils, and fat-soluble vitamins.
- It is secreted by glands in the skin, which cover and protect the skin from dehydration, cracking and wear and tear.

The point we need to remember is that Cholesterol levels in the blood are regulated naturally in healthy individuals. In a radical study way back in 1953, it was proven that even if you force-fed exceedingly high amounts of Dietary Cholesterol to people, you could only raise the Serum Cholesterol for a very short period of time, after which the body would make the necessary adjustments, and bring the levels back to normal.

Another study, published in the *Journal of Mt. Sinai Hospital*, in that same year, showed that blood Cholesterol will rise after a person eats a large quantity of Cholesterol, but within a few hours will return to the level maintained before eating.

Remember the egg scare? Every so often the news media bombards us regarding the dangerous practice of eating too many eggs. After all eggs contain Cholesterol and '*we don't want to get Heart Disease now do we?*'.

If we examine total egg consumption from 1950 to 1990, something curious is revealed. From 1950 forward egg consumption steadily declined, due to the Cholesterol scare, with a rapid cessation of egg consumption between 1960 and 1970, and again between 1982 and 1994. If we lay a graph of the incidence of Heart Disease over one of egg consumption, we find that as egg consumption declined, Heart Disease rose in equal proportions. Why?

Well, the egg does contain Cholesterol, but it also contains other factors that help the body regulate Cholesterol from all sources. With this nutrient now missing from the diet, the body could less effectively regulate Cholesterol from all sources. This, combined with other heart protective factors naturally found in eggs, we saw an increase in Heart Disease. There are numerous studies that show that the consumption of eggs does not raise Cholesterol levels in healthy people.

If eggs and other Cholesterol-rich foods do not cause an elevation in Cholesterol, what about other fats? The evidence that polyunsaturated oils such as corn oil, safflower oil and other vegetable oils actually *cause* more Heart Disease than they prevent is well established.

(For further information on the causes of Heart Disease refer to Special Report # 4 entitled ***Heart Disease: The Real Cause, The Real Answer***).

Another dangerous side effect of consuming excess amounts of these oils is their effect on the Liver. As we will soon see, the Liver is the organ responsible for regulating Cholesterol in the blood stream. When the Liver becomes congested, most often because of toxins or Free Radicals from rancid vegetable oils, it cannot carry out many of its vital functions, one of which is the regulation of blood fats.

Since excess consumption of polyunsaturated vegetable oils can have a very negative effect, in many ways, on the living system of the human body, their consumption should be kept to minimum. Free Radicals, formed from the oxidation of these oils, have been established as the leading cause of arterial damage, NOT Cholesterol.

Therefore, if any dietary changes were to be made to help prevent Heart Disease, it would be a drastic reduction in polyunsaturated oil consumption. Choose instead, to use olive oil, which is a mono-unsaturated oil and as such, is not subject to excessive Free Radical formation, which subsequently damages arterial walls.

Cholesterol Lowering Drugs Are Dangerous

The majority of medications currently in use to lower Cholesterol are of a family called Statin drugs. These include popular drugs such as Zocor™, Mevacor™, Lipitor™, and Pravachol™. One of the primary concerns with these drugs is their ability to interfere with, or to deplete key essential nutrients.

While there may be many other concerns, we already know that the Statin drugs interfere with the absorption of fat-soluble Vitamins A, D, E and K. This is due to the loss of bile acids, which are needed for proper absorption of these vitamins. Statin drugs may also impair Calcium absorption and increase its excretion. This would not be a good thing for older people, especially women, who need to be aware of Calcium loss and adequate Calcium intake.

Iron deficiency, caused by this family of drugs can lead to decreased energy, anemia and impaired immune function. Folate deficiency may also occur with Statin drugs, resulting in fatigue, anemia, elevated homocysteine levels, (a high risk factor in Heart Disease) anorexia, insomnia, diarrhea, and increased risk of infection.

Another nutrient, which cannot be synthesized in the body when taking Statin drugs is CoQ10. Statin drugs block Cholesterol production in the body by inhibiting the enzyme called HMG-CoA Reductase in the early stages of its synthesis in the Mevalonate pathway. This same pathway is also shared in the manufacture of CoQ10. In the long run a CoQ10 deficiency can predispose individuals to many Free Radical induced conditions as well as a significant increase in the risk of Heart Disease, the very condition that these drugs are intended to prevent.

There are further health risks for women using Statin drugs. According to a study published in the *Journal of the American College of Cardiology*, in 1998, 500 postmenopausal women with Heart Disease were given either Pravachol™, a leading Statin drug, or a placebo. The results of the study indicated that those receiving the Statin drug had a much greater incidence of breast cancer, compared with the placebo group.

Of course the biggest concern over the use of Statin drugs is their potential toxicity to the liver. This is why most patients taking these drugs must have routine blood tests to monitor their liver function.

All of this risk with often little benefit. The December 12, 2001 issue of *The Journal of the American Medical Association* reviews a study, which found that 66 percent of the patients using Statin drugs had far less LDL Cholesterol reduction than expected, and 18 percent experienced no reduction, or even had an increase in their LDL Cholesterol levels. (This is the 'bad' cholesterol)

There may be certain specific circumstances in which the use of these potentially dangerous drugs might be warranted, however, for the most part, there are much safer and often, more effective natural alternatives.

If you are currently taking a Statin drug, you may want to discuss these issues with your doctor. Certainly, at the very least, you will want to supplement your diet with a good Full Spectrum dietary supplement and perhaps extra CoQ10.

Shortly, we will discuss the many alternatives to Statin drug therapy for controlling Cholesterol levels, but first let's look at what those Cholesterol test numbers mean.

How To Read A Cholesterol Blood Test

Total Cholesterol is usually a measure of HDL and LDL. HDL or High Density Lipoproteins are the 'good' Cholesterol and tend to protect the heart and blood vessels, while LDL, or Low Density Lipoproteins are considered the 'bad' Cholesterol as they are easily subject to oxidation and Free Radical formation.

Normal levels of Cholesterol should be between 150 and 220 total. 220 to 240 would be considered borderline high and above 240 is considered high and a risk factor for arterial problems.

Another lipid group often measured in routine blood tests is the Triglycerides. Elevated Triglycerides are often a result of poor insulin utilization, excess carbohydrate consumption and lack of exercise. The normal range is 35-130. It is not impossible to have levels as high as 3,000 or above as seen in many Diabetics. More about regulating Triglycerides later on.

Other Factors Involved in Elevated Cholesterol

Since we know that it is the job of the Liver to regulate Cholesterol production in relationship to dietary intake, when these lipid levels rise, it is an obvious indication that the Liver is having some problems with this regulation mechanism. This can have many possible causes.

Toxicity of the Liver is a common problem. Our environment is filled with tens of thousands of chemicals not known to the human biochemistry just a few decades ago.

When ingested, it is the Livers' responsibility to denature these chemicals and eventually remove them from the living system of the body. For reasons not fully understood, some people are able to do this with greater efficiency than others. For those not so lucky, toxins can build up in the Liver, eventually causing complications that can negatively affect the Livers' ability to carry out its many thousands of functions, one of which is regulating Cholesterol.

Some time ago, medical doctors and research scientists began noticing a strange connection between those suffering from insulin resistant disorders such as Carbohydrate Intolerance, which leads to Obesity, Hypoglycemia and of course Type II Diabetes, and an increase incidence of elevated Cholesterol. It seems that the percentage of those people with Insulin related conditions had a much higher risk for very elevated Cholesterol levels, frequently above 300 total Serum Cholesterol level.

We now understand the role of insulin on Liver function and when Insulin levels are kept under control with diet, exercise and key nutrients to enhance insulin receptor site function, we see Cholesterol levels in these individuals coming down all by themselves.

Lastly, a major factor negatively affecting Cholesterol regulation by the liver is the excess consumption of vegetable oils. As we mentioned earlier the abuse of polyunsaturated oils, which oxidize rapidly when exposed to the air or heat, produce exceedingly high levels of Free Radicals, among them the very ones that have been identified in the degradation of the artery walls, leading to Atherosclerosis.

By keeping the use and consumption of these oils to a minimum, we can go far in not only preventing the formation of these Free Radicals, but also in keeping the liver healthy and better able to do its job of lipid regulation.

What About Triglycerides?

If we consider the physiology of the body, as the arteries, damaged from Atherosclerosis, continue to narrow, the larger the particles in the blood, the greater risk of a potential blockage. Consider then, that the Triglycerides are the largest physical objects free floating in the bloodstream. Therefore, their regulation is just as important as that of excess Cholesterol.

Triglycerides are formed from the excess presence of Glucose in the body. When carbohydrates are ingested they are all, eventually, converted to the sugar of the body, which is Glucose. As Glucose levels rise, insulin is secreted from the Pancreas in order to lower blood sugar levels. Insulin converts the excess Glucose into Glycogen, which is the stored form of glucose and places it in the Liver or the muscle cell.

The body's storage capacity for Glycogen is extremely limited. Once these storehouses are full and the diet continues to provide excess carbohydrate, insulin converts the Glucose one step further into Triglycerides and stores them as body fat in the fat cells.

Individuals with excess insulin disorders such as Carbohydrate Intolerance, Syndrome X, Hypoglycemia and Type II Diabetes, often have enormously high levels of Triglycerides in their blood. The excess insulin, being produced in response to the excess carbohydrate intake or the failure of the insulin receptor sites, is converting all the available glucose into Triglycerides and increasing the storehouse of fat.

This is why those suffering from these disorders are frequently very overweight, while at the same time always tired and run down. Their blood sugar is often low and the Insulin levels high.

In order to best regulate Triglycerides levels, a reduction of carbohydrates, especially refined carbohydrates, is necessary. Further, increasing exercise causes the conversion of stored Triglycerides back to Glucose for energy.

If you suffer from one of the complications of an excess Insulin condition, controlling Insulin levels through diet, exercise and key targeted nutrition is essential.

Normalizing Blood Fats - Safely

If low Cholesterol diets fail to lower total Cholesterol in most people and Statin drugs are riddled with potentially serious side effects, what is the answer to the Cholesterol problem?

Well, while Cholesterol doesn't actually cause Heart Disease, excess Serum Cholesterol can complicate an already existing condition of narrowed arteries. So, since we all agree that normalizing Cholesterol would be a good idea, how can we do so safely and effectively?

There are many nutrients that may be used in a multi-faceted approach to Cholesterol Management.

Firstly, factors that will aid the Liver in cleansing and detoxifying would be helpful, for as the Liver is cleansed, it can better do its job. Secondly, there are key nutrients such as Fatty Acids, Phospho-lipids, Phytosterols, Fiber and specific nutrients, which have shown to both support Liver function and aid in directly lowering or removing excess Cholesterol from the body.

By combining these nutrients together with specific dietary modifications such as reducing the amount of saturated fat slightly, eliminating virtually all polyunsaturated oils and increasing dietary fiber, thousands and thousands of people have been able to lower their total Cholesterol levels to within the accepted normal range without the need for potentially dangerous drugs. Let's take a detailed look at the program.

Detoxification

Since Cholesterol regulation is largely a responsibility of the Liver, ensuring that the organ is cleansed and free from excess toxic buildup would be pivotal in the process of Cholesterol management.

The following short Fast, together with key herbal extracts, designed to help the organ of elimination dump toxins into the waste matter of the body for eventual elimination, has been used, with great success, by our Institute for many, many years. We find it often is essential in helping individuals on the road to natural Cholesterol Management.

Cleansing the Body of Unwanted Toxins

Because of the direct role that toxic waste plays in this particular disease process, it is essential that the body be cleansed of these unwanted poisons, if we are to expect to see any real improvement in the condition.

The best way to rapidly, yet safely, remove these toxins from the soft tissues of the body is through a modified Fast which causes the Liver, Kidney, Colon and Bowel to dump their stored toxins into the blood stream for eventual elimination via the urine and feces. The following Fast should be undertaken as soon as possible.

Requirement

1. Between 12 and 15 fresh lemons daily for 3 days.
2. About 3 quarts of distilled water per day for 3 days.
3. A multi-herbal formula consisting of Fiber, Celery, Cascara Sagrada, Irish Moss, Peppermint, Senna, Bromelain, Anise, Ginger, Turkey Rhubarb and Chlorophyll.
4. Honey to taste.

Day One

Make up one and one half cups of freshly squeezed lemon juice. Add this to two, or three quarts of distilled water and mix in a little honey for taste. This will be your total intake of fluid and food of any kind for the entire day. Sip this mixture slowly throughout the day. If you become excessively thirsty or develop a headache this first day, make up another quart of the lemon and honey water and continue sipping it as needed. In addition, take 1 teaspoon of the fiber/herbal mixture in at least 6 to 8 ounces of the lemon water twice per day.

Day Two

Continue as on day one, making up another fresh batch of the lemon-honey distilled water mixture. Take one teaspoon of the fiber/herbal mixture twice per day as in day one.

Day Three

Repeat the lemon and honey water. Take the fiber/herbal powder as in days one and two.

Days Four and Five

*Day four marks the end of the concentrated cleansing program, but continue to follow the outline given for days four and five in order to reap the full benefits of the program and to avoid shocking your body.

Stop using the lemon water mix. Today, through day 10, use just **one** teaspoon of the fiber/herbal powder in 6 to 8 ounces of juice per day.

Drink any amount of tomato juice or carrot juice you wish. You may also use white grape juice if diluted with 50% water. DO NOT CONSUME ANY CITRUS JUICES OF ANY KIND. Fresh non-distilled spring water may be taken in any quantity.

Days Six and Seven

Continue as with days four and five but you may now add fruits and vegetables. Use the fiber/herbal powder once per day as above.

Days Eight and Nine

Add yogurt and/or cottage cheese to your diet. Use the fiber/ herbal powder once a day as above.

Days Ten and Forward

Add whole protein foods such as chicken or fish slowly, for instance, at one meal per day. Gradually return to your normal protein intake over the next few days. Stop taking the fiber/herbal powder today.

This Fast is not only safe and easy but very effective in removing the buildup of toxins that can contribute to all Chronic Degenerative Diseases, especially Arthritis. It is important to remember that you MUST consume the stated amount of the lemon and honey water during the first three days of the program.

Note: I have used this Fast in many different types of disease conditions over the years. Recently people have been contacting The Institute saying that they cannot find the particular combination of herbs and fiber, which we recommend. You can obtain this exact formulation, sold as **ToxiCleanse™**, from Phoenix Nutritionals, Inc. details are at the end of this Report.

A Special Note for Diabetics: If you are currently taking oral medications for your Diabetes, or Insulin by injection, consult with your physician before undertaking this or any other Fast as it may rapidly alter your blood sugar.

Nutrients That Help Regulate Cholesterol

Once again, nutritional science has come to the rescue for those suffering from elevated Cholesterol. Since this is primarily a liver problem, our program revolves around using natural substances that help the liver do its job. We also use key nutrients, which are responsible for carbohydrate metabolism, which is indirectly related to our problem. Lastly, we use fiber from a variety of sources to help remove excess Cholesterol from the body. Let's take a closer look at these beneficial factors.

Chromium

When excess carbohydrates are consumed, such as provided by the Standard American Diet, they are quickly converted to Triglycerides and stored as body fat. This not only provides the primary causative factor for obesity, but creates an elevation of Triglycerides in the blood stream.

Further, poor carbohydrate metabolism can lead to a condition called Insulin Resistance. As the body builds Insulin Resistance, Triglycerides and even Cholesterol tend to rise, indicating a connection between Insulin Resistance and lipid problems.

It might be interesting to note that over 85 percent of all obese patients with Insulin Resistance also suffer from elevated Cholesterol and Triglycerides. We include Chromium to assist in the metabolism of carbohydrates, hence providing an adjunct benefit to lipid regulation.

Guggulipids

As we have stated repeatedly in this text, the liver is responsible for producing and regulating Cholesterol in the body, but can do so only if it is functioning properly. Nutrients that can contribute to assisting the liver in this task are going to ultimately, go a long way in regulating blood fats. Such is the case with the Guggulipids.

Guggulipid is extracted from the gum of the Commiphora Mukul tree that is native to India. There are two primary active Guggulipids. Z-Guggulsterone and E-Guggulsterone. These compounds work by increasing the livers' ability to metabolize Cholesterol, especially the LDL or 'lousy' cholesterol.

This ingredient is very important for those individuals whose HDL to LDL Cholesterol ratios are going in the wrong direction.

These compounds are not new. They have been recognized and used for centuries in the ancient Indian medical tradition of Ayurvedic. In clinical studies, Guggulipids have been proved to lower Serum Cholesterol and Triglycerides as well as lower the LDL and raise the HDL.

One of the many studies performed on humans using Guggulipids alone showed that they could drop Cholesterol levels anywhere from 14 to 35 percent in as little as 90 days. Levels of good Cholesterol (HDL), increased in these participants by 16 to 20 percent. Overall, Guggulipids were seen to work as effectively as prescription drugs, but without any side effects. In fact the use of Guggulipids at doses 10 times higher than necessary for a positive effect, showed no toxic response whatsoever.

Pantothine

Pantothine is a molecularly altered form of the B Vitamin Pantothenic Acid. This structure change makes Pantothine much more active within the chemistry of the human body and as such, is used in a variety of clinical and therapeutic applications.

One of these is in the regulation of Cholesterol. A pivotal study, published in *Minerva Med.* in 1990, involved targeting women of perimenopausal age. Since Cardiovascular Disease is the leading cause of death in women, this study is of particular importance.

After 16 weeks of treatment with Pantethine, significant reductions of total Cholesterol, LDL Cholesterol and LDL and HDL ratio were observed. Overall efficacy percentage of the treatment was close to 80 percent. Other studies confirm the benefits of Pantothine in blood lipid regulation and have shown its ability to inhibit Cholesterol synthesis.

Since Pantothine prevents the peroxidation of fats, it provides yet another key benefit in the prevention of cardiovascular disease pathology. The current consensus among researchers is that Atherosclerosis, the condition that leads to closing down the blood flow in the arteries, is caused by Free Radical damage to the inner wall of the artery. These Free Radicals are believed to be generated, primarily from the oxidation of vegetable oils either before or after ingestion. Pantothine provides protection from this oxidation process and as such, inhibits the production of Free Radicals at the arterial sites.

Inositol

Another member of the B Vitamin family, Inositol or more specifically, a particular type of Inositol called Inositol Hexanicotinate, has shown itself to be another super star in the arena of Liver support and hence Cholesterol regulation.

For many years the medical profession has recognized and utilized the Cholesterol lowering effects of the B Vitamin Niacin (Nicotinic Acid). The one major drawback to this method of treatment is that very high doses of Niacin are often needed to provide a positive response and at that dose, the flushing properties of Niacin can often become annoying and uncomfortable. Inositol Hexanicotinate combines the blood fat lowering effects of Niacin with the fat burning effect of Inositol.

By using this nutrient, we get a double benefit without the flushing side effect of pure Niacin alone.

Phytosterols: Beta Sitosterol

Scientists have been searching for reasons why vegetarians, while often being deficient in protein, seem to have a much lower risk for Cardiovascular Disease than others. One of the main reasons seems to be the ingestion of a group of plant alcohols, found in all vegetables, called the Phytosterols.

The average individual consumes only about 200 to 400 mg of these compounds from the diet due to a lack of consumption of fresh fruits and vegetables. Vegetarians, on the other hand, due to larger consumption of these food groups, get almost twice that amount daily. Of all the many Phytosterols, Beta Sitosterol is the most active. There are over 50 published studies using Beta Sitosterol.

These studies have shown that Beta Sitosterol substantially lowers blood lipid levels even if there are no major changes in the diet!

Beta Sitosterol works by decreasing the absorption of Cholesterol in the digestive system *and* by decreasing the amount of Cholesterol in the Liver.

Beta Sitosterol works by locking to the fat molecules consumed and by blocking the fat molecule absorption gates in the intestines. The fats and Cholesterol are then excreted rather than absorbed.

Since the Liver manufactures more Cholesterol than anyone could possibly get from diet, Beta Sitosterol is an ingredient of choice since it also exercises a positive effect in helping the Liver to regulate the total Cholesterol it produces.

By combining Beta Sitosterol with Guggulipids (see above), the benefit is much greater than through the use of either one alone. When used in combined effort, we can expect to see such responses as the binding and excretion of excess free Cholesterol, the blocking of absorption sites in the intestinal walls, an enzymatic change in the Liver, causing it to better regulate Cholesterol production and an increase in Liver enzymes, which act on the complete breakdown of fats.

Fiber: Oat bran, Apple Pectin and Psyllium Husk

Fiber serves as a carrying agent in the intestines, helping the body to remove waste more efficiently. Such is the case with Cholesterol. Fiber, the bulking agent in the diet, can help remove unwanted Cholesterol from the digestive system before it gets the chance to be fully absorbed into the bloodstream. Recent studies now show that specific types of fiber, namely Oat Bran, Apple Pectin and Psyllium Husk, have an even greater benefit on Cholesterol Management due to a key ingredient found inside them.

Clinical studies have established that not only is the fiber itself beneficial in helping the body mobilize Cholesterol but a powerful ingredient found in some forms of fiber called Beta Glucan, actually exercises a direct Cholesterol lowering effect on free Cholesterol! So once again, we see that not all nutrients are the same. Certain types of fiber are preferred over others for key compounds they contain, which the body can, and does, readily make use of.

Lecithin

I have been in the nutrition field for over 30 years, and during that time, the standard 'holistic' treatment for elevated Cholesterol has always been Lecithin.

Available in any health food store, Lecithin often works alone, in lowering Cholesterol significantly. This is because it contains Inositol (see above) as well as Choline, a fat metabolizer, and the Amino Acid Methionine. Together, their action upon the liver is profound.

For many however, Lecithin alone was not enough to exercise a long-term effect on Liver function and hence Cholesterol Management. Today we use a combination of all the active compounds and nutrients listed above. For most people, this provides their bodies with the support they need to safely regulate Cholesterol levels without the dangerous side effects of the popular prescription drugs.

In cases of severely elevated Cholesterol, we often use the above formulation in a double therapeutic dose *together* with Lecithin granules for the first 90 days.

Once Cholesterol numbers begin to come down and the ratio of HDL to LDL is close, we can begin to lower the dose of the formula and eventually stop the use of the Lecithin altogether.

Protocol For Managing Cholesterol and Triglycerides

By now you should understand that much of the information you have read or heard about Cholesterol and Triglycerides has likely been inaccurate. Cholesterol is not the evil enemy as portrayed by dieticians, many medical doctors and the media. In fact, just the opposite is true, Cholesterol is vital to your life and Cholesterol levels, which are too low, are far more dangerous to your health and life than those, which are too high.

You should also understand that Cholesterol does NOT cause Heart Disease! However, once you have blockage in the arteries, excess blood fats of any kind can compound this problem, leading to full occlusion and a potential Heart Attack.

For this reason, we fully agree that excess Cholesterol levels are not something that should be ignored, especially if you have other risk factors for Heart Disease such as obesity, insulin resistance, high blood pressure or inactivity.

We feel that prescription drugs, namely the Statin drugs, have too many side effects to be considered as the first line of treatment and should only be considered when all other methods of management have failed.

Dietary change can make a difference for many with elevated Cholesterol, but these changes often need to be drastic and hence are difficult to follow for long periods of time. For many, dietary changes provide little or no benefit in lowering blood fats.

The following protocol is the *exact* program we have tested and used on thousands of people, just like you, with very satisfying results. We will outline exactly how we recommend you to undertake this program for the fastest response.

Phase I: The Therapeutic Program

If your total Cholesterol levels are above 220 and certainly if they are above 250, you will want to be very aggressive in managing this problem up front. Unlike most pharmaceuticals, which are started at low doses and slowly increased, the nutritional approach is the opposite. We start with a therapeutic dose, which is quite aggressive, and as the body chemistry slowly changes, we then can lower the dose to a maintenance level that's right for each person's body.

If you fall into this category with Cholesterol levels in the range above, begin with the following program for at least 90 full days. After 90 days have your Cholesterol levels checked again and monitor your progress.

- 1. Cleanse the Liver with the liver, kidney, bowel cleansing fast, together with key herbs and fiber as indicated earlier in this Report. The formula we use at our research centers is called **ToxiCleanse™** and is available from Phoenix Nutritionals.*
- 2. Begin at once, to take a combination of the key ingredients we outlined. This exact formulation sold under the name **Cholest-Eze™**. is available from Phoenix Nutritionals.*

The therapeutic dose for the initial 90 days would be as follows:

<i>Chromium</i>	<i>400 mg</i>
<i>Guggulipids</i>	<i>400 mg</i>
<i>Inositol Hexanicotinate</i>	<i>600 mg</i>
<i>Pantethine</i>	<i>200 mg</i>
<i>Phytosterols (Beta Sitosterol)</i>	<i>700 mg</i>
<i>Oat, Apple Psyllium Fiber</i>	<i>1800 mg</i>

- 3. Add Lecithin Granules, from your health food store to give the liver an extra boost. Use the granules rather than the capsules as they have shown to work both better and faster than the liquid. Use one heaping tablespoon of Lecithin granules twice per day. You may mix these in either, juice, a protein shake, or sprinkle on foods such as salads. They will not dissolve as they are a fatty substance so in a drink you must stir and then drink down quickly.*

4. *Take a Full Spectrum Nutrition formula every day. One of the biggest causes of disease and disorder of any kind, within the human body, is chemical imbalance. The body requires at least 120 nutrients every day, including Vitamins, Minerals, Amino Acids, Fatty Acids, Phytonutrients from plants and key powerful Antioxidants to protect us from Free Radical damage to the DNA of our cells.*
5. *Sadly, most multi vitamin/mineral products currently available fall far short of meeting this Full Spectrum requirement. If you have trouble finding a multi-nutrient product that meets these requirements, feel free to contact Phoenix Nutritionals, contact details at the end of this Report. By taking a Full Spectrum product every day, you help the body in thousands of ways, to self regulate and do the job of taking care of you.*
6. *Exercise. This is often called one of the longest four letter words in the language. It seems that people would rather do almost anything than get a little exercise. Remember that the body was meant to be active, not just with one finger on the television remote control either, but really active. Exercise will help cleanse the*
7. *Liver, which is responsible for Cholesterol regulation and millions of other chemical functions within the body. Further, exercise and a reduction of refined carbohydrates, are key in normalizing Triglyceride levels (see below).*

Maintenance Program

Once your Cholesterol numbers start to come down to about 200 or lower, or if you are starting this program with levels in this range and want to prevent problems in the future, the maintenance program will be for you.

We suggest that you begin to lower the amount of nutrients in the therapeutic program above, slowly. The body doesn't like radical changes and we must understand that while we are often anxious to reverse our health problems, we didn't get them overnight and they do take time to reverse.

The maintenance dose of our key nutrients are as follows:

<i>Chromium</i>	<i>200 mg</i>
<i>Guggulipids</i>	<i>200 mg</i>
<i>Inositol Hexanicotinate</i>	<i>300 mg</i>
<i>Pantethine</i>	<i>100 mg</i>
<i>Phytosterols (Beta Sitosterol)</i>	<i>350 mg</i>
<i>Oat, Apple Psyllium Fiber</i>	<i>900 mg</i>

You should be able to get along very nicely on this maintenance dose providing you do not have a genetic predisposition to Cholesterol problems. If so, a higher dose may be needed to maintain proper control.

A SPECIAL NOTE for Triglyceride Control

If you also are dealing with elevated Triglycerides, it is essential that you also make two lifestyle changes in addition to the program above.

Firstly, you must increase your level of exercise. Be sure you are doing some form of exercise for a minimum of 30 minutes, three or four times per week. Also, you can bring Triglyceride levels down rapidly by greatly reducing total carbohydrate consumption and eliminating all refined carbohydrates and sugars from your daily diet. Remember, it is excess sugar, in the form of glucose, which is converted into Triglycerides by the action of Insulin.

Conclusion

The Cholesterol Myth is one of the longest lasting misconceptions to survive the dark ages of medicine. While we are making some progress in education, still much mis-information still exists.

We have been led to believe that Cholesterol is some evil substance. It is not. It is essential to human life itself. We have been taught that the only effective way to lower Cholesterol in the blood is by strict diet and dangerous drugs. This is not the case. There are clinically proven all natural substances, which have freed hundreds of thousands of people from the risks of imbalanced blood fats with virtually no side effects common to the Statin family of drugs.

Through new-found knowledge and the uncovering of information locked away in dusty, boring medical journals, we now have a program for the management of blood fats that targets the *cause* rather than the innocent effects. Once the Liver is properly cleansed, detoxified and nourished, it can do a far better job of regulating Cholesterol than any man made drug will ever be able to accomplish.

If you have total Cholesterol levels of under 200, you are doing just fine. If your Cholesterol levels are between 200 and 220, you need to take a look at your lifestyle and perhaps introduce the maintenance level program outlined above. And for the millions of people who are living in fear of their Cholesterol levels above 220 and well beyond, you can do yourself and your body a big favor by beginning the aggressive therapeutic program, which we have outlined for you.

I have been teaching and utilizing the principles of holistic nutrition for over 30 years, first in the area of competitive sports, then in the arena of prevention and finally in the treatment and reversal of Chronic Degenerative Diseases. In that time I have come to embrace the concept that *'only the body can heal'*. It can do this however, **ONLY** when it receives the right amount and number of key nutrients that it needs to carry on optimal life function.

If you are battling elevated blood fats and have tried dieting and are now considering taking or have been taking prescription medications, the stress from the fear of either the elevated Cholesterol or the side effects of the drugs, is likely causing you more health problems than the level of Cholesterol.

The program outlined in this Special Report can free you from both the fear that can come along with elevated Cholesterol readings as well as the anxiety over the potentially dangerous treatment with prescription drugs. It has done this for tens of thousands of others just like you.

Each of the formulas and protocols detailed in this Special Report are available exclusively from Phoenix Nutritionals.

Contact www.PhoenixNutritionals.com or by telephone at 1-800- 440-2390 or 858-217-2412 or email Questions@PhoenixNutritionals.com

References

1. Maritz FJ. Efficacy and danger of statin therapy. *Cardiovasc J S Afr.* 2002 13 (4) 200-203,
2. Singh, RB, et al. Hypolipidemic and antioxidant effects of *Commiphora mukul* as an adjunct to dietary therapy in patients with hypercholesterolemia. *Cardiovasc Drugs Ther* 1994 8 (4) 659-664.
3. Ghorai M., et al. A comparative study on hypocholesterolaemic effect of allicin, whole germinated seeds of Bengal gram and guggulipid of gum guggul. *Phytother Res* 2000 14 (3) 200-202.
4. Binaghi, P. et al. Evaluation of the cholesterol-lowering effectiveness of pantethine in women in perimenopausal age. *Minerva Med.* 1990 81(6): 475-479.
5. Prisco, D., et al. Effect of oral treatment with pantethine on platelet and plasma phospholipids in IIa hyperlipoproteinemia. *Angiology* 1987 38 (3) 241-247.
6. Arsenio, L., et al. Clinical use of pantethine by parenteral route in the treatment of hyperlipidemia. *Acta Biomed Ateneo Parmense.* 1987 58 (5-6) 143-152.
7. Moghadasian, MH, and Frohlich, JJ. Effects of dietary phyosterols on cholesterol metabolism and atherosclerosis: clinical and experimental evidence. *Am J Med.* 1999 107 (6): 588-594.
8. Plat, J. and Mensink, RP. Effects of plant sterols on lipid metabolism and cardiovascular risk. *Nutr. Metab Cardiovasc Dis.* 2001 11(1): 31-40.
9. Whittaker, MH. Effects of dietary phytosterols on cholesterol metabolism and atherosclerosis: clinical and experimental evidence. *Am J Med* 2000 109(7) 600-601.
- 10 De Graaf, J. et al. Consumption of tall oil-derived phytosterols in a chocolate matrix significantly decreases plasma total and low-density lipoprotein-cholesterol levels. *Br J Nutr.* 2002 88(5): 479-488.

11 Szapary, PO et al. Guggulipid for the treatment of hypercholesterolemia: a randomized controlled trial. JAMA 2003 13, 290(6): 765-772.

12 Leontowicz, M. et al. Apple and Pear Peel and Pulp and their influence on plasma lipids and antioxidant potentials in rats fed cholesterol-containing diets. J Agric Food Chem. 2003 10;51(19):5780-5785.

13 Kerckhoffs, DA. et al. Cholesterol-lowering effect of beta-glucan from oat bran in mildly hypercholesterolemic subjects may decrease when beta-glucan is incorporated into bread and cookies. Am J Clin Nutr. 2003 78(2):221-227.

14 Comparison of the effects of inositol hexanicotinate and nicotinic acid on lipid levels. Functional Medicine Vol 21, Dec 2001.