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Lowering LDL Cholesterol Without Drugs: Beyond Statins, Try Exercise, Diet, and a Supplement or Two

By Adam Voiland

Joseph Keenan, a cardiology researcher and professor emeritus at the University of Minnesota, has a love-hate relationship with statins. On the one hand, he prescribes them to many patients. On the other, he can't use them to control his own dangerously high cholesterol. Like many of the 25 percent or so of patients prescribed statins who abandon them within six months, Keenan has had unpleasant side effects, such as muscle spasms, and blood tests indicate muscle damage. "It came as a shock," he says of finding out he'd have to do without his Lipitor.

What recourse do people like Keenan have? Some doctors, such as Steven Nissen of the Cleveland Clinic, are so convinced of statins' lifesaving power that they first require patients to try all six before considering them intolerant. Next, patients might try a nonstatin drug such as Zetia, which lowers cholesterol by inhibiting its absorption in the intestine. But there are other weapons besides drugs in the cholesterol wars. For those intolerant of statins—and for people taking them as well—the following strategies can help defeat unhealthy cholesterol.

Diet. The foundation of *any* cholesterol-lowering regimen is a balanced diet. That doesn't mean you have to buy only products whose labels scream "low cholesterol." In fact, says Christopher Gardner, a researcher at Stanford University who specializes in nutrition, a varied diet that emphasizes plants, fish, legumes, whole grains, and fruits is significantly better at lowering problematic cholesterol than a more conventional diet of prepared foods equally low in saturated fats and cholesterol. Why? Components of plant-based diets actively interact to improve cholesterol profiles, he suggests. That said, you'll still want to limit your intake of red meat, eggs, and cheese.

The so-called Mediterranean diet, the dash (Dietary Approaches to Stop Hypertension) diet, and the Ornish Diet (which is particularly low in meat and dairy) are variations on this approach. One study found that a balanced diet did just as well as a statin at reducing bad cholesterol. Dean Ornish, the founder of the Preventive Medicine Research Institute in Sausalito, Calif., has shown that his multipronged approach (diet, exercise, stress reduction, and social support), while not easy to maintain, can lower LDL by nearly 40 percent and even cause plaques in arteries to shrink—which not even statins have been proven to do.

Exercise. Regular exercise is also critical. Some studies show that regular aerobic exercise for a period of about 12 weeks can modestly increase beneficial HDL cholesterol—between 5 and 10 percent, and more for some people. Your triglyceride level and blood pressure should respond, too. Shoot for at least 30 minutes of moderate aerobic exercise five to seven days a week.

Supplements. Natural food stores and the Internet are awash with products claiming to improve cholesterol profiles. For most, there is little or no evidence of an effect on cholesterol levels (though some—Omega-3 fatty acids, for example—have not been studied rigorously enough to say definitely that they *don't* work).

Notable exceptions worth exploring include niacin, plant sterols, and soluble fiber supplements. Though niacin can raise blood sugar and cause flushing, a daily dose can raise HDL levels by 15 to 35 percent and lower LDL levels by about 20 percent. Niacin has a risk of side effects, however, especially when combined with a statin. A daily serving of plant sterols (about 2 grams), in fortified foods such as margarine, orange juice, and rice milk, can also lower LDL by about 15 percent. Eating plenty of soluble fiber, which occurs naturally in products such as oats, nuts, flax, and psyllium husk and in dietary supplements such as Metamucil, can also drop LDL. Red rice yeast, a popular dietary supplement, also works. But be warned that it contains lovastatin, the active ingredient in Mevacor, a prescription statin, and is "essentially an unregulated statin," says Robert Vogel, a cardiologist at the University of Maryland.

Lifestyle interventions often don't work nearly as well as a statin can. Exercise, a better diet, and supplements can generally reduce bad cholesterol by 20 to 40 percent, compared with 60 to 70 percent for statins. But Keenan estimates that 70 percent of people with problematic cholesterol levels could gain control with lifestyle changes alone. He has. His LDL levels are down by about 60 percent thanks to diet, exercise, niacin and other supplements. That's as good a job, he says, as Lipitor did.