From:
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Dear Doctor,

In last month’s Letter, when adding Statin Drugs to our list of RED FLAG medications, we got into a brief discussion of ...

THE CHOLESTEROL FARCE.

We described briefly how the cholesterol myth was originally fabricated by the seed oil industry, and then developed into a monstrosity by the pharmaceutical establishment.

We made the point that the all-out war against the mythological cholesterol monster has been waged for over 25 years, despite the fact that it was a deliberately perpetrated hoax from day one, and that it has been known for at least 5 years now that ...

CHOLESTEROL IS NOT A PRIMARY RISK FACTOR FOR CARDIOVASCULAR DISEASE.

Virtually all your patients have been victimized by the anti-cholesterol propaganda campaign. The idea that ...

CHOLESTEROL IS AN ESSENTIAL SUBSTANCE ...

and not at all the deadly demon of popular mythology, will come as a shock to them, but it is your obligation to help them know the truth.
Your patients must understand that the liver produces 2000 milligrams of cholesterol every day. Is your liver trying to destroy you with cardiovascular disease? Of course not; not only is cholesterol not a primary risk factor for cardiovascular disease, it is an absolute necessity, with many critical functions in the body.

Of course, all NUTRI-SPEC practitioners understand this truth about cholesterol, right? That is what I mistakenly tend to assume, since shattering the cholesterol myth is something we do on an almost daily basis here at NUTRI-SPEC in our one-on-one dialogues with NUTRI-SPEC doctors from around the country. So, since it is a topic of almost daily conversation, it is easy to lose sight of the fact that the subject of cholesterol has not been addressed in these Letters in over 5 years.

Let us take this opportunity to review what NUTRI-SPEC practitioners should already know about cholesterol, and then expand our case in support of eating eggs and other high nutrient density foods that are rich in cholesterol and saturated fat --- the foods that are essential to a long, healthy life, and, (believe it or not,) essential to actually keeping the blood levels of cholesterol down.

For your patients who are convinced that high serum cholesterol is bad and low serum cholesterol is somehow healthy, enlighten them with the fact that ...

**PEOPLE WITH LOW SERUM CHOLESTEROL (LESS THAN 180) HAVE THREE TIMES THE INCidence OF STROKES AS THE GENERAL POPULATION.**

Even William Castelli, M.D., a former director of the Framingham Heart Study (the one that originally supposedly implicated cholesterol as a problem in cardiovascular disease (CVD)) notes that ...

**PEOPLE WITH LOW CHOLESTEROL (LOWER THAN 200) SUFFER NEARLY 40% OF ALL HEART ATTACKS.**

Think of those two facts --- low serum cholesterol means that you have three times the chance of having a stroke, and, high cholesterol has been shown not to be significantly correlated with heart attacks since 40% of the people who have heart attacks have cholesterol that is lower than average.

The facts stated in the last two paragraphs regarding low cholesterol and the incidence of heart attacks and strokes, should alone be enough to expose the nonsensical myth that attempts to correlate high serum cholesterol with CVD.
The evidence against any relation of cholesterol to CVD has been pouring out from everywhere over the last 7 or 8 years. A study done by Gilman, et al and published in the December 24, 1997 Journal of the American Medical Association found that ...

**THE MORE SATURATED FAT YOU EAT, THE LESS LIKELY YOU ARE TO SUFFER A STROKE.**

This study found that polyunsaturated fats (the ones that the propagandists will have us believe are good for us) have no protective effect. Best of all, this study actually was able to quantify the protective effect of saturated fats:

**YOUR RISK OF STROKE DECREASES BY 15% FOR EVERY 3% INCREASE IN YOUR SATURATED FAT INTAKE.**

Here is another interesting study done by Leddy, et al and published in 1997 in Medicine and Science in Sports and Exercise, Volume 29. The subjects of this study were elite male and female endurance athletes, who were placed alternately on a high fat diet and then a low fat diet. On a high saturated fat diet the patients maintained low body fat, normal weight, normal blood pressure, normal resting heart rate, normal triglycerides and normal serum cholesterol levels. All their fitness and training parameters were maintained at the elite level.

When put on the low fat (high complex carbohydrate) diet, however, it was found that the low fat diet negated many of the beneficial effects that exercise is expected to produce. The athletes experienced a measurable decline in athletic performance. Most interesting, however, was the fact that the subjects on the low fat diet actually suffered a significant drop in HDL cholesterol (the “good” cholesterol), along with higher triglycerides (both of which are significant CVD risk factors. --- In fact, the ratio of triglycerides to HDL cholesterol is probably the number one risk factor for CVD. In other words, you and your patients want high cholesterol of the HDL type, and low triglycerides.)

How many times, and in how many ways, do you have to explain to your patients that eating foods high in saturated fat and cholesterol is actually a way to prevent heart attacks and strokes? Remember, your typical patient has been exposed to millions of dollars worth of anti-fat, anti-cholesterol propaganda over a period of decades. So --- you must keep piling on the evidence in favor of the truth. Here is another study: Research published in no less than the Journal of the American Medical Association, 1999; 281(15):1387-94) showed that there was absolutely
no connection between eating eggs and the risk of heart disease or stroke in either men or women.

While we NUTRI-SPEC practitioners make the case for the healthful dietary fats (saturated medium chain triglycerides and cholesterol) we must spend an equal amount of time and energy exposing for our patients the lies of the seed oil industry. Margarine, mayonnaise, cooking oil, salad dressings, and anything made with corn oil, soy oil, safflower oil, canola oil, peanut oil, or any of the rest of the vegetable oils (except olive, coconut oil, or palm oil) will accelerate the aging process in general, create catabolic damage throughout the body, and will specifically cause the oxidative damage in the blood vessel walls and in the heart that precipitates a cardiovascular crisis.

A study in The Journal of Lipid Research, 2000;41(5):834-39, showed that eating vegetable oils in the form of either soy bean oil or margarine raised LDL (bad cholesterol) and lowered HDL (good cholesterol). Meanwhile, eating butter (one of those “forbidden foods” saturated with cholesterol) actually lowered LDL cholesterol and raised HDL cholesterol.

All your patients with fat phobia and cholesterol paranoia need you to turn their thinking around. Here is the “cholesterol monologue” I have presented to at least a zillion patients. You would do well to memorize it, and begin offering this essential knowledge to your own patients.

“Mrs. Jones, you’ve been victimized by the same propaganda campaign that has mislead thousands of other people. You have been convinced that cholesterol is a vicious killer that must be conquered at all costs. It may surprise you to learn, Mrs. Jones, that cholesterol is not a terrible demon at all. In fact, cholesterol is an absolutely vital substance; you would become very weak and die without cholesterol, it is that important.

“Do you know what your brain is made out of? Cholesterol; 5% of the dry weight of your brain is made out of cholesterol. Do you know what your nerves are made out of? Cholesterol. Do you know what your body uses to make all your important sex hormones and adrenal hormones? Cholesterol. Do you know that without cholesterol to help your digestion you couldn’t absorb any of your fat soluble vitamins like vitamin A and vitamin E? Did you know that every single cell in your body is surrounded by a membrane containing cholesterol, and that without that cholesterol membrane no cell in your body could function?

“Cholesterol is so important that your liver produces 2000 milligrams of cholesterol every day. And, do you know what happens if you follow
the idiotic low cholesterol diet that the propaganda recommends? Your liver makes up the difference by producing more cholesterol just to be sure you have enough. High cholesterol in the blood doesn’t come from eating foods high in cholesterol; it comes from a metabolism that is not efficient at handling the cholesterol you need.

“It will also interest you to know that high cholesterol in your blood is not even a primary risk factor for heart attacks and strokes. For decades it was assumed that because high cholesterol tends to occur in people with cardiovascular disease it was the cause of heart attacks and strokes. But research now shows that cholesterol is not a primary risk factor for cardiovascular disease. In fact, people with low cholesterol are three times as likely to have a stroke than the average person. And, as far as heart attacks go, nearly 40% of all people who have heart attacks actually have low cholesterol.

“It is triglycerides (the other blood fat), that is the primary risk factor increasing your chance of having a heart attack or stroke. Many people are surprised to learn that even though triglycerides are a fat, the unhealthy diet that raises triglycerides has nothing to do with fat intake; triglycerides (and cholesterol as well) are elevated by eating sugar. The other dietary factor that in some cases will raise cholesterol is polyunsaturated oils (the ones that the propaganda says will help prevent cardiovascular disease). Neither triglycerides nor cholesterol are elevated by eating saturated fat in general or high cholesterol foods in particular.

“How, that brings us to a discussion of the cholesterol-lowering drugs. As you can now understand there is virtually no benefit from these drugs in terms of protecting from heart attacks and strokes since high blood cholesterol isn’t a causative factor of cardiovascular disease anyway. But more important to understand is how these drugs work.

“They work by destroying liver function so that your own liver cannot produce the 2000 milligrams of cholesterol a day it knows it should. Liver damage from these drugs is such a major concern that once you are on them it is suggested that you have your blood tested for liver function enzymes every 6 months to make sure your liver isn’t being destroyed too quickly. I can assure you, Mrs. Jones, that the danger to your health from these cholesterol lowering drugs far exceeds the danger to your health from having elevated cholesterol in your blood.”

If you memorize this monologue and deliver it to all your patients as appropriate, you will be delivering a tremendous service to those whose lives could easily have been destroyed by the seed oil/pharmaceutical propaganda machine. Now you can go one step better --- after delivering
this monologue, present your patient with a copy of this Letter that contains all the scientific references to back up your words with irrefutable objective evidence.

Remember, as we have been saying for years, while cholesterol is not a primary risk factor for CVD, triglycerides are, and are probably the most significant. Recall all our discussions about triglycerides and their relation to elevated insulin levels, abdominal obesity, adult onset diabetes, and apropos of this discussion, CVD. A study published in Circulation (October 21, 1997, shows the result of Harvard research indicating that...

**THE 25% OF THE POPULATION WITH THE HIGHEST TRIGLYCERIDE TO HDL RATIO HAS 16 TIMES MORE HEART RELATED EVENTS THAN THE 25% WHOSE RATIOS WERE THE LOWEST.**

And, as you have seen from countless other studies we have given you, high triglycerides come from excess starch and sugars in the diet.

So --- if it is triglycerides, not cholesterol, that is the true boogey man, what weapons do you have in your NUTRI-SPEC arsenal to defeat this villainous foe?

With your NUTRI-SPEC Fundamental Diet, your patients are half way there. By totally eliminating sweetened beverages, (including juice), along with minimizing bread, cereal, and pasta, not to mention, of course, cakes, cookies, pie, and ice cream --- any patient with high triglycerides will see a significant improvement. But your NUTRI-SPEC supplements are the most powerful approach to controlling the triglyceride-induced cardiovascular disease threat.

Your big guns here are your Diphasic A.M. and Diphasic P.M., along with Taurine. As you know, your Diphasic A.M. and Diphasic P.M. are loaded with nutrients to protect you from both pathological hyperplasia and pathological disintegration -- in other words, everything needed to slow the aging process. But all CVD is, is accelerated aging specifically manifest in the cardiovascular system. Diphasic A.M. And Diphasic P.M. are the most powerful agents to enlist in your patients’ behalf to prevent and even reverse cardiovascular disease.

To celebrate the knowledge you have regarding the cholesterol myth, and the power you have over the true causes of CVD, let us offer a special this month on Diphasic A.M. and Diphasic P.M. --- 2 FREE for every 10 you purchase.