

How Cholesterol Management Can Help Prevent Stroke and Heart Disease Transcript

ANNOUNCER: Each year more than a million Americans have heart attacks. Too much cholesterol in the blood is a major risk factor.

ANTONIO GOTTO, MD: We were not able to show until fairly recently that lowering the cholesterol would actually reduce the risk of a heart attack.

ANNOUNCER: It is important to know that there are two primary types of cholesterol.

ANTONIO GOTTO, MD: There's a bad cholesterol and a good cholesterol. The bad cholesterol is called the low-density lipoprotein, or LDL. The good cholesterol is called the high-density lipoprotein, or HDL. We tend in simplified forms to think that the bad cholesterol, which increases the risk for a heart attack, takes the cholesterol into the artery, whereas the good cholesterol, the HDL, acts as a scavenger to promote reverse cholesterol transport, getting the cholesterol out of the artery and back to the liver so that the body can dispose of it.

MARY ANN McLAUGHLIN, MD: If a patient has a high level of bad cholesterol, or LDL, that LDL cholesterol is more likely to line the arteries and form a blockage or a plaque, leading to heart disease.

ANNOUNCER: Triglyceride levels in the blood are another important factor when managing cholesterol.

ANTONIO GOTTO, MD: I often refer to triglycerides as the forgotten fat. They have a relationship; they increase the risk for cardiovascular disease. They are more significant as a risk factor in women than in men, and probably also in diabetics.

ANNOUNCER: Experts agree that most people should aim for an LDL, or bad cholesterol, level below 130 mg/dL. If a person already has other risk factors for heart disease, the recommendation may be 100 mg/dL or less. For HDL, or good cholesterol, levels should be 40 mg/dL or greater, and the higher the number the better. Triglyceride levels should be less than 150 mg/dL. Experts also agree that the closer a person is to their recommended levels, the lower their risk for heart attack and stroke.

MARY ANN McLAUGHLIN, MD: It's recommended that everyone at age 20 has their cholesterol checked and is checked at least once every five years after that. If a patient has a family history of heart attacks at an early age or high cholesterol, they may have their cholesterol measured even more regularly.

ANNOUNCER: Lifestyle changes can help improve a person's cholesterol level.

MARY ANN McLAUGHLIN, MD: Cholesterol comes from animal products in general. So red meat, dairy products such as eggs, cheese, and whole milk are all high in cholesterol. Certain foods are much more high in cholesterol and should be avoided.

ADOLPH M. HUTTER, Jr., MD: Regular exercise is also very important. Even people who are overweight have a better prognosis if they exercise. Control of your blood pressure is important. If you control your blood pressure, you keep those arteries from getting stiffer, and it also helps prevent the progression of those atherosclerotic plaques. And obviously, no smoking.

ANNOUNCER: If lifestyle changes have not lowered your cholesterol enough or if your levels remain high, your doctor may recommend cholesterol lowering drugs, the most common being a class called statins.

ADOLPH M. HUTTER, Jr., MD: These are drugs that work on the metabolism of the liver and lower the bad cholesterol. They lower it tremendously, and there are a lot of randomized trials that have shown that if you use a statin and a diet and lower that LDL to less than 70, you significantly decrease the risk of heart attacks, of strokes, of sudden death, and of death in general. Now, sometimes you're on a statin, you're on a good diet, and you still can't get that LDL low enough. There's another drug called ezetimibe, which works by a different mechanism, and it blocks the absorption of the bad cholesterol in the gut. And that will lower the LDL by an additional 18 percent when given to a person already on a statin.

ANNOUNCER: Doctors may also prescribe bile acid sequestrants, another class of drugs that lower LDL levels by preventing the absorption of cholesterol in the gut. In some instances, though, a patient may require different medications.

ADOLPH M. HUTTER, Jr., MD: If you have a low HDL and high triglycerides, there are other drugs that can help raise the HDL and lower the triglycerides. Niacin, particularly in the long-acting form, like niacin-ER, or Niaspan, have been shown to be very effective in raising the HDL and lowering the triglycerides. There's another category of drugs that raise the HDL, lower the triglycerides, and that's called the fibrates. And they're very effective, and they could also be used in conjunction with the statins.

ANNOUNCER: Once you are on a treatment plan to manage your cholesterol it is important to stick to the plan to help prevent heart attacks and stroke.