

Cholesterol

Cholesterol is a waxy substance that insulates nerves, makes cell membranes and produces certain hormones. There are two sources of cholesterol. Cholesterol is produced in the body (in the liver). The liver produces all the cholesterol the body needs to function. However, we take in more cholesterol through our diet. Dietary cholesterol is found in animal products like meats, eggs, and dairy. Foods from plants (fruits, vegetables, grains) do not contain any dietary cholesterol and are great substitutes for the above foods.

Cholesterol plays a large role in determining a person's risk for heart disease. The higher your cholesterol, the higher your risk. Even if your cholesterol is not high, you can always benefit from watching what you eat, maintaining a healthy diet, and getting your cholesterol checked every few years.

The "Low-Down" on Cholesterol:

The **GOOD** cholesterol (**HDL**) - this protects against plaque buildup in your arteries by carrying cholesterol away from the cells and back to the liver for removal from the body. Higher HDL is associated with lower risk for heart disease.

The **BAD** cholesterol (**LDL**) - too much of this in the blood can cause a buildup of plaque, cholesterol, and fat on the inside walls of the arteries. This condition is called atherosclerosis and can block blood flow to the heart muscle, causing chest pain and increasing your risk for heart attack and stroke.

Triglycerides (TG) - the fat in the blood that comes from the body's fat stores or from the food we eat. Elevated levels can result from consuming too much sugar, alcohol, or fat as well as from being overweight or a diabetic. Often people with high triglyceride levels also have high LDL and low HDL, increasing their risk for heart disease.

Total Cholesterol (TC) - this is HDL + LDL + a fraction of TG. This is probably the number that you are most familiar with and the number that is often given when visiting a physician.

This resource provides brief, general information about this health care topic. It does not take the place of the instructions you receive from your health care providers. Discuss the risks and benefits of therapies with your doctor and always take medication as prescribed. For answers to other questions talk to your health care provider.

For more information or a referral, please call the NewYork-Presbyterian Hospital Preventive Cardiology Program at (212) 305-4866 or visit our website at:

<http://www.hearthealthtimes.com>.



Goals:

- Total Cholesterol < 200 mg/dL
- HDL > 50 mg/dL (women) or > 40 mg/dL (men)
- LDL < 100 mg/dL* (national guidelines suggest that for high-risk patients, including those with a history of CHD or diabetes, an LDL < 70 mg/dL is an optional goal based on results of recent studies)
- TG < 150 mg/dL

Cholesterol “To Do” List:

DO: Be more physically active by participating in medically approved aerobic activities (walking, running, swimming), strength-building exercises (lifting weights) or household activities (gardening, vacuuming).

DO: Maintain a healthy weight and lose weight if you are overweight. You are considered overweight if your BMI is greater than 24.9 and obese if your BMI is greater than 30.

DO: Choose foods higher in fiber such as fruits, vegetables, and whole grains.

DO: Choose foods low in cholesterol.

DO: Eat foods low in saturated fat.

DO: Avoid foods that contain trans fats.

Medications That Treat High Cholesterol:

For certain people, medications are recommended to help lower cholesterol levels. These are called lipid-lowering drugs. Statins, widely used type lipid-lowering drugs, are generally prescribed for people with cardiovascular risk factors and an LDL level above the recommended goal. Keep in mind that these medications do not work alone to lower your cholesterol. Take medications, as directed by your physician, while also making positive lifestyle changes to lower your cholesterol, such as adopting a heart-healthy diet and getting regular exercise.

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