



POLICOSANOL

The natural way to maintain healthy cholesterol levels

There is a natural substance that may lower “bad” LDL cholesterol, raise good “HDL” cholesterol and balance total cholesterol as effectively as some leading pharmaceuticals. Although many factors can determine one’s risk for heart attack and stroke – homocysteine levels, smoking, sedentary lifestyle, diet, etc. – high cholesterol levels still top the list.

Primarily, health care practitioners recommend diet and lifestyle modifications and frequently prescribe cholesterol-lowering drugs, that may have many unwelcome side-effects. Now we do not suggest that you throw away your medication. But we do encourage those who are at high risk to find out more about Policosanol, a very safe substance derived from the outer wax of the sugarcane plant. Excellent research, including many clinical trials, show that the fatty alcohols in Policosanol are safe and have a beneficial effect on cholesterol levels.

HOW DOES POLICOSANOL WORK?

Some people are predisposed to high cholesterol no matter how stringent their diet and exercise routine. The liver is primarily responsible for cholesterol production in the body. However, in some people (due to genetic factors), the liver does not know when to stop making cholesterol. Here is where Policosanol shines. Not only does it exert an important antioxidant effect, it works to control the liver’s production and breakdown of cholesterol.

POLICOSANOL – SOME OTHER BENEFITS

- Exciting research shows that it may lower serum cholesterol levels, raise good HDL cholesterol levels, and reduce platelet aggregation (stickiness).
- As well as reducing serum cholesterol levels, Policosanol reduces the amount of cholesterol in the liver, heart and fatty tissue.
- Policosanol’s cholesterol-lowering effects continue and do not lose their effect over time.
- Policosanol may prevent and reverse atherosclerotic lesions and thrombosis.
- As an antioxidant, Policosanol works to prevent LDL oxidation.

WHAT DOES THE RESEARCH SHOW?

Policosanol has been extensively studied in nearly 30,000 people through short-term, long-term, and randomized, placebo-controlled trials.

A trial to determine the safety and effectiveness of Policosanol showed that patients who took it once a day with the evening meal for 24 weeks lowered their LDL serum cholesterol between 18.5 and 25.6%. Of the 437 patients who participated in this randomized, double-blind study, the Policosanol group also lowered their total cholesterol between 13 and 17.4% and raised their HDL cholesterol between 15.5 and 28.4%. “Subjects in the group treated with Policosanol did not have serious adverse events during the 24-week study. This study shows that Policosanol is effective, safe, and well tolerated in patients with hypercholesterolemia and concomitant coronary risk factors.” (Mas, *et al.*)

Often, people with diabetes have elevated cholesterol levels, predisposing them to coronary artery disease. A 12-week double-blind study on 29 patients who had non-insulin-dependent diabetes mellitus (NIDDM) and high cholesterol levels showed very positive results. The patients given 5 milligrams of policosanol twice daily reduced their total cholesterol by 17.5% and their LDL cholesterol by 21.8%. (Torres)

WHO SHOULD TAKE POLICOSANOL?

Persons with elevated “bad” LDL cholesterol levels as well as persons with low levels of good HDL cholesterol may benefit from taking Policosanol. Research shows that Policosanol has potential to help a number of cardiovascular disorders; therefore, anyone facing these health issues may want to discuss the use of Policosanol with their health care practitioner. According to the research, Policosanol should produce cholesterol-lowering effects within the first six to eight weeks of use. A daily dose of 10 mg of Policosanol in the evening lowered LDL cholesterol levels by 20 to 25% within six months. At 20 mg daily, LDL levels dropped by 25-30%. HDL levels increased by 15 to 25% after only two months. These are quite dramatic cholesterol-balancing effects in total cholesterol levels as well as HDL to LDL ratios and compare favourably with statin drugs, such as lovastatin, simvastatin and pravastatin, but without the side effects of these drugs.

IS IT SAFE?

Policosanol is exceptionally safe. A study of 27,879 patients (17,225 patients for two years and 10,654 patients for four years) showed that only 86 persons reported adverse effects (0.31%), of which the most frequent complaint was weight loss. (Fernandez, *et al.*)

Clinical trials show that elderly persons, diabetics and those with liver damage can safely take Policosanol. Currently, studies show that there is no interaction between Policosanol and blood-thinning medications such as warfarin.

Although Policosanol produced no teratogenic effects in animals, it is not recommended for pregnant and lactating women.

HOW MUCH SHOULD I TAKE?

Since cholesterol synthesis increases at night, the recommended starting dose is two 6,000 micrograms (6 mg) of Policosanol after/or with the evening meal. If the response is not adequate after two months, the dose can be doubled. However, we suggest that anyone wishing to take Policosanol for cholesterol support should work closely with a qualified health care practitioner.

KEEP UP WITH THOSE LIFESTYLE MODIFICATIONS

As effective as Policosanol has proven to be in clinical trials, it is not a reason to forget about important diet and lifestyle changes. Everyone with a high risk for cardiovascular disease should consider substituting more fruits, vegetables, grains and legumes, in place of red meat and saturated fat. Regular aerobic exercise, not smoking, and keeping alcohol intake to a minimum will also reduce your risk of heart disease and other degenerative diseases. Consider incorporating a daily multi-vitamin that includes the important homocysteine-lowering B vitamins, as well as extra vitamins C, E, and omega-3 rich fish oils or flaxseed oil.

KEY REFERENCES

Fernandez L., *et al.*, "Policosanol: Results of a postmarketing surveillance study of 27,879 patients," *Cur Ther Res*, 59: 7717-22; 1998

Mas R., Castano G., *et al.*, "Effects of policosanol in patients with type II hypercholesterolemia and additional coronary risk factors," *Clin Pharmacol Ther*, 65 (4): 439-47; April, 1999

Torres O., "Treatment of hypercholesterolemia in NIDDM with policosanol," *Diabetes Care*, 18 (3): 393-7; March 1995