

Controlling your cholesterol.



LDL:HDL
100:55



LDL:HDL
95:45

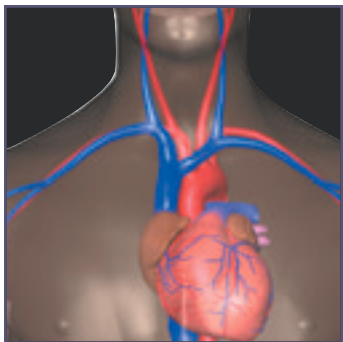
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LDL Cholesterol: It's at the heart of the matter.

With your health care provider's help, you can reduce two major health issues—heart disease and stroke—by paying close attention to your cholesterol. The good news is research shows that lowering your cholesterol reduces the chance of having a heart attack, needing bypass surgery or angioplasty, and dying of coronary heart disease-related causes. You can survive high cholesterol by taking action now to lower it. Your weapons are diet, exercise, and if necessary, medication.

It's especially important to be mindful of your LDL ("bad" cholesterol) and HDL ("good" cholesterol) levels. High LDL is a strong indication of high risk; a low LDL (less than 100 mg/dL) is desirable. With HDL, a level below 35 mg/dL indicates high risk; above 45 mg/dL is desirable.

These goals may be achieved by eating a low-cholesterol, low-saturated-fat diet and following your doctor's prescription for medication to lower cholesterol, if needed. Of course, it's equally important to get regular exercise to improve circulation and cardiovascular fitness.



Q: What is cholesterol?

A: Cholesterol is a fatty substance that occurs naturally in your body. Your body uses cholesterol for building cells, producing hormones, and promoting a healthy nervous system. Normally, cholesterol is produced by your body in amounts sufficient to meet its needs. But, in many people, the body produces an excess amount of this fatty substance.

Q: Why is some cholesterol "bad"?

A: Low-density lipoprotein (LDL), or bad cholesterol, is the cholesterol that builds up on your artery walls. As this buildup eventually becomes thick, blood can't flow through your arteries as easily, and a blockage may occur. **LDL is the kind of cholesterol that we urge you to keep low.**

Q: What is "good" cholesterol?

A: High-density lipoprotein (HDL) is called good cholesterol because it actually removes LDL (bad) cholesterol buildup in your artery walls. **A high HDL level in relation to your LDL level is desirable.** Your health care provider can help you achieve this balance.

Q: Why is the cholesterol in food harmful?

A: You can also get too much cholesterol from the foods you eat: organ meats such as liver and kidney, egg yolks, and other animal protein. Consuming too many cholesterol-rich foods can be harmful. A lot of foods are high in saturated fat, such as dairy products, fatty meats, and eggs, and they can lead to high levels of cholesterol in the blood. This can clog your arteries with fatty deposits and cause the arteries to narrow. This condition is known as atherosclerosis, and it puts your heart at risk.

Q: How does atherosclerosis put me at risk for heart attacks?

A: When your arteries are clogged and their passageways narrowed, the flow of oxygen-rich blood that the heart muscle needs is reduced. This may cause some heart muscle tissue to die—which is a heart attack.



Q: Is there a way I can decrease my risk for heart attack and stroke?

A: Certainly. By lowering what is known as your bad cholesterol and raising what is known as your good cholesterol, you can greatly decrease your chances of a heart attack or stroke. Keep a watchful eye on your cholesterol—including LDL, HDL, and triglycerides (fats in your blood that also may increase the risk of heart disease). This is not only a very smart choice, it's a must.

Q: If my LDL cholesterol and triglyceride levels are too high, what can happen?

A: Increased risk of heart attack and stroke may be of strong concern if your LDL cholesterol and triglyceride levels are too high.

Q: If my LDL cholesterol is too high, what can I do?

A: If your blood cholesterol is elevated, your health care provider may first suggest you go on a low-fat, low-cholesterol diet and get regular exercise.



Q: What foods should I include in a low-fat, low-cholesterol diet? What foods must I avoid?

A: To help bring your LDL cholesterol to a desirable level, you should:

- Eat more foods that are lower in saturated fat and cholesterol, like lean meats, poultry with the skin removed, and fish.
- Eat more whole-grain foods, like cereals, breads, rice, and pasta.
- Increase your consumption of fresh fruits and vegetables to at least 3 to 5 servings per day—it can make all the difference.
- Avoid foods that are high in saturated fat, such as butter, whole milk, cheese, fried foods, and fatty meats—especially organ meats such as liver and kidney.

Ask your health care provider to recommend a book on cholesterol and diet. You may also wish to obtain copies of the booklets *Recipes for Low-Fat, Low-Cholesterol Meals* or *Step by Step: Eating to Lower Your High Blood Cholesterol*, both available from the American Heart Association. Or, do a little research on your own. Your local bookstore or public library probably has books on delicious low-fat, low-cholesterol recipes. Healthy doesn't have to be boring.

Q: What if diet and exercise aren't enough?

A: Some people, because of body chemistry or heredity, have too much LDL cholesterol. Even the strictest diet and exercise program won't lower their cholesterol into the desirable range.

If diet and exercise alone aren't effective, your doctor may prescribe a medication that impacts your cholesterol levels as part of your overall treatment plan. Be sure to tell your doctor about any medicines you are currently taking, and if you change medications. There are several medications available that can help control your cholesterol. Your doctor can decide what is the best medication for you.

Once you're on the medication, take it only as your doctor recommends. And don't stop taking your medication without talking with your doctor.

Q: How do I know my cholesterol is under control?

A: **The only way to manage your cholesterol is to know your goals and track your progress.** Talk with your doctor about your target cholesterol level and how you can achieve your goals over time. Make sure to have your cholesterol tested regularly, based on your doctor's recommendation. If you are diagnosed with diabetes or acute cardiovascular illness, you should be tested at least once a year.

Do not assume that just because you have started taking a medication your cholesterol is under control. A recent study showed only 38 percent of patients taking cholesterol-lowering medications are reaching LDL ("bad" cholesterol) goals as defined by National Cholesterol Education Program (NCEP) guidelines. Your physician may need to make adjustments to your medication.

For the sake of heart health, lower your cholesterol.

A medical "heart-to-heart" with your health care provider about lowering your LDL cholesterol could save your life. Listen to his or her advice and follow it to the letter. Stay with the low-fat, low-cholesterol program your health care provider outlines for you. If your health care provider has prescribed them, take your cholesterol-lowering medications as directed. And, most of all, have your total cholesterol and LDL levels checked. It's at the heart of good health.

LDL CHOLESTEROL

Risk Level	LOW	BORDERLINE	HIGH
mg/dL	← 100	110 120	130 →

HDL CHOLESTEROL*

Risk Level	HIGH	BORDERLINE	LOW
mg/dL	← 35	45	→

