

High Cholesterol Causes Heart Disease? Truth Revealed!

Original Article By Karl Loren

[Executive Summary Of This Page -- Click Here](#)



Dr. James Cleeman



Dr. Claude Lefant



Dr. Scott M. Grundy

Three Terrible Trolls Each Personally Responsible For Literally Millions Of Deaths In The United States

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As they said about Tricky Dick Nixon, "[Would you buy a used car from this man?](#)" So could you ask, "Would you allow any of those three doctors to stick a swab down your throat?" After reading below I suspect not!

What is a Troll?

A Troll is a mythical creature -- originally very evil, and very strong -- who preyed on humans. [Click here](#) for a short story about trolls, along with more than 20 images of different trolls. This article is filled with troll images, not least are the three at the top of the page! The three terrible trolls above are in my [Hall of Infamy](#).

If you were looking for three people who have had more to do with unnecessary death in the world than the three above, you would have a hard time finding them. [Evil DOES exist](#) on this planet -- these are three of the most evil! Gaze on their work!

Here is the claim from the National Heart, Blood and Lung Institute, part of the National Institutes of Health -- the "premier" heart health source in the United States:



[How Does Cholesterol Cause](#)

[Heart Disease?](#)

When there is too much cholesterol (a fat-like substance) in your blood, it builds up in the walls of your arteries. Over time, this buildup causes "hardening of the arteries" so that arteries become narrowed and blood flow to the heart is slowed down or blocked. The blood carries oxygen to the heart, and if enough blood and oxygen cannot reach your heart, you may suffer chest pain. If the blood supply to a portion of the heart is completely cut off by a blockage, the result is a heart attack.

People with high cholesterol live the longest. This statement seems so incredible that it takes a long time to clear one's brainwashed mind to fully understand its importance. Yet the fact that people with high cholesterol live the longest emerges clearly from many scientific papers. [Source](#)

For instance, Dr. Elmer Cranton has written:

It is not widely known that cholesterol-lowering drugs also have antioxidant and antiplatelet activity. (147) Those drugs also produce significant toxicity and cost much more than antioxidant nutritional supplements. ([source](#))

The government is starting to take seriously the allegations that these cholesterol lowering drugs cause serious health problems. [Click here](#) for articles on that subject.

The authors note that their study showed that long-term exposure to statins may substantially increase the risk of polyneuropathy. These findings suggest that statins may have a toxic effect on peripheral nerves. One possible mechanism may be that by interfering with cholesterol synthesis, statins may alter nerve membrane function. ([source](#))

And,

The most common problems we hear reported pertain to muscle pain or weakness, fatigue, memory and cognitive problems, sleep problems, and neuropathy. Erectile dysfunction, problems with temperature regulation (feeling hot or cold, or having sweats), are among the other problems reported. ([source](#))

And from the Wall Street Journal,

Muscle pain is an undisputed side effect of statins, although estimates on the incidence range from 5% to 30%. One statin, Baycol, was pulled from the market last year after being linked to 100 deaths from a rare muscle-wasting condition called rhabdomyolysis.

However, the type of aching muscle pain most patients report isn't believed to be life-threatening. Paul S. Phillips, director of interventional cardiology at Scripps Mercy Hospital in San Diego, says his research shows that some of the muscle problems associated with statin therapy aren't detected by the typical enzyme screening method doctors use, and therefore are dismissed as signs of aging.

In his study, neither the doctors nor the patients involved knew whether a statin or a placebo was given, but the majority began feeling pain when they started back on the real drug. "They could tell every time within three weeks of being on the statin therapy," says Dr. Phillips, who presented the findings at an international cholesterol drug meeting in New York last September and is seeking NIH funding for further study. "These drugs unquestionably save lives, [Karl: This is a lie!] but these muscle toxicities are poorly studied." ([source](#))

Here is a man for our times -- Dr. Uffe Ravnskov!



Let me say, as I continue this story, that I am a prominent author and public speaker. Each of these three doctors are well-known public figures. My story here is my OPINION, except where I relate some datum along with evidence of the truth of that datum. I believe that all the data in this story are true and correct. In this context the First Amendment protects my right to write as I do. I urge you to accept this entire story as true -- and to let your friends and neighbors know about these three doctors of death and deceit!

I do not say as a matter of FACT that these three doctors have committed murder. I DO say, as a matter of my strong personal belief, that they are guilty of murder.

Despite the tremendous value of Dr. Uffe's work, he has failed completely on one important issue. I have said many times that when you believe some datum thoroughly -- and that datum is false -- that it is very difficult to get you to accept the truth of the matter until you can see the exposé of the lie and its source.



The lie is that cholesterol in your food causes cholesterol in your blood and that high cholesterol in your blood causes death from heart disease. That is false data. Even many of my fans still believe this to be true. You'll find that false story told, with literally billions of dollars of promotional support in zillions of places -- [here is one](#). It amazes me how many people say they have read my stuff and want to buy my oral chelation formula -- and ask if it will lower cholesterol!

My expose of the cholesterol myth, and that by many others, has had its toll on the big drug companies. They have spent billions on advertising to drive home the lies that sell their products. Cholesterol lowering drugs are now a market worth \$22 billion per year in the US alone, and going higher. It is cheap to make this stuff, covered still by patents, and society is full of gullible people.

It's too early to declare an end to the long-running debate about what the ideal level of cholesterol is and how people should get there. Bristol-Myers noted that the patients in the study were in a group that is especially susceptible to heart attacks and they may not reflect the experience of healthier people with high cholesterol. "Generalizing from this result without additional clinical trial evidence is not good for patients," said Andrew Bodnar, Bristol-Myers's senior vice president for strategy, medical and external affairs. (Source: [Wall Street Journal, March 9, 2004](#))

The deaths from these drugs are only partly being made public. You probably did not hear this recent news on CNN:

LONDON (CNN) -- Germany's Bayer said on Monday 52 people are thought to have died after taking the anti-cholesterol product Baycol, its fastest-growing drug. (Source: [CNN News](#))

There are other risks besides immediate death -- long term death from the drugs:

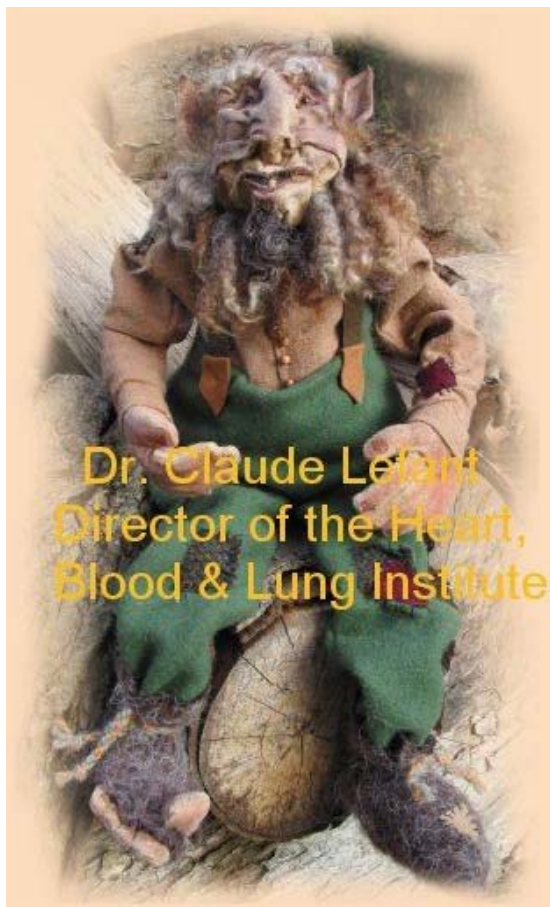
In 1987, Merck made headlines when it came out with Mevacor (lovastatin), the first cholesterol-lowering statin drug. Statins block enzyme pathways involved in the production of cholesterol, thereby lowering cholesterol levels. But that's not all these drugs do. The same enzymes that are involved in the production of cholesterol are also required for the production of an essential compound called coenzyme Q10; not surprisingly, lower cholesterol levels in statin users are accompanied by reduced levels of CoQ10.

Coenzyme Q10 -- also called ubiquinone, which means "occurring everywhere" -- plays an important role in the manufacture of ATP, the fuel that runs cellular processes. Though it is present in every cell in your body, it is especially concentrated in the very active cells of your heart. Depriving the heart of CoQ10 is like removing a spark plug from your engine -- it just won't work. Low levels of CoQ10 are implicated in virtually all cardiovascular diseases, including angina, hypertension, cardiomyopathy and congestive heart failure. (Source)

[Here are](#) some simple basics about cholesterol. [Click here](#) for the derivation of the word, itself -- cholesterol

Dr. Uffe has exposed the false nature of this lie -- very scientifically. But, that is not enough. He has done only half the job.

The other half I offer you in this newsletter! You must also understand the SOURCE of the lie -- and that is the story here -- the story that should finish the job of slaying the trolls. It is not only the false data that is exposed here, but the role these three doctors (and others) have played, creating this false data for their personal profit only, and with the intention of harming people rather than helping them.



FAT Used To Be Simple -- It Was NOT Around Our Bellies!

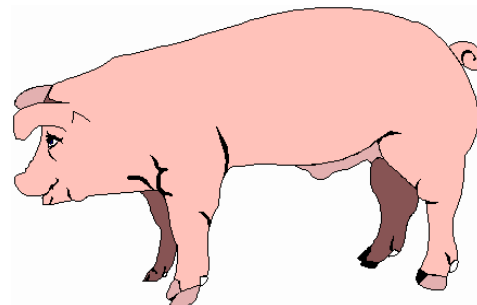
Many decades ago, when your great-grandfather lived, there were two common forms of fat in the diet. The rich ate butter, the poor ate lard. Both are natural products from animals.

Lard comes from dead pigs.

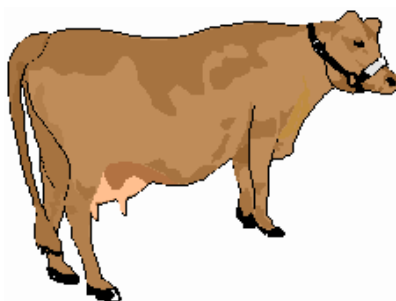
Butter comes from live cows.

You can choose your animal. (For a very modern look at "fats" [click here](#).)

Let's look a bit at butter.



You are a farmer, in the 1800's and you have a couple of cows. You milk them early in the morning, and again at night. You turn them out to eat grass during the day, and put them in the barn at night.



The milk you get from the cow could be squirted from the teat of the cow directly into a metal pail. You might want to keep the flies out of the milk. You put it into a cool place for a while and when you then take a look at it you'd find that the "milk" has separated into two different parts.

There is a thick part of the milk, floating on the top. We call that cream.

Then, there is a thin part of the milk, below the cream. We call that the skimmed milk.

Let's simply pour off (or "skim off") the cream from the top, trying hard to not get any of the thinner milk below. We pour this into another pail. Now, we have a pail with a quart or two of cream.

In the olden days milk came in glass bottles, often with a different shape for the bottle at the top -- the top part would hold the cream and below would be the milk. In those days milk was NOT homogenized. Now-a-days the cream is permanently dispersed within the milk. The particles of cream are too small to be able to rise to the top of the milk -- they stay dispersed.

Whether the milk is "rich" or not so rich depends on the type of cow and the type of food being eaten by the cow. But, in any event that cream in the pail can be used to make butter.

How?

Well, you take a stick, place it in the pail, and stir it around, rapidly. In fact, you might say that you beat the stick through the cream, fast. This fast beating has a special



name -- called *churn* or *churning*.

You do that for a while and guess what?

The stuff in the pail separates into two different substances. There are gobs of butter now forming, probably adhering to the stick. And, there is a thin liquid -- the left-over stuff. The picture on the right is an actual small butter churn -- put the cream in the jar, screw on the top and turn the handle -- very fancy compared to a stick in a pail. Both work!



Butter Churn



The butter in that pail is ready to eat. You don't have to process it any further at all. You might use a large spoon to scoop up the stuff and place it on some wax paper in little butter patties. You could then put that butter, on the wax paper, into the ice box so that the butter would get hard. You could then take those patties of butter and wrap them in pretty foil paper and sell them to restaurants as butter patties.

You still can find butter patties in most restaurants.

You can make butter this way. Or, you can buy an expensive automatic milking machine, and run the milk through pipes to a gadget that removes any dirt that got into the milk, more pipes to the homogenization machine, more pipes to the pasteurization machine, and then this system pipes the cream to a fancy churn where the cream is turned into butter. Then, if you invest enough in machines, the butter will be automatically molded into patties, wrapped, and packed into cartons, placed in the cooler awaiting shipment to the restaurants.



Butter in Modern Times!

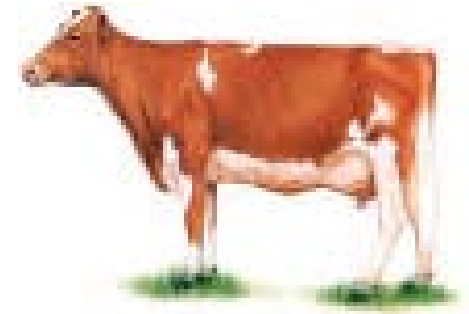
Now, let's take a further look at this stuff. Back in the 1800's, you'd mostly get butter by going to a farmer and maybe taking your own butter tub. He'd fill the tub with butter and you'd pay him. I want to compare butter with margarine.

The butter industry was a big one, but it was certainly not controlled by a small number of producers whereas the margarine industry has always been controlled by only a few very large companies.

As prosperity and living standards both improved, we started getting butter being produced in many mechanized dairy farms, and shipped in refrigerated trucks to markets where we could buy it in one pound cartons.

That was about the scene in the 1930's. Then, during World War II, butter, for some reason, seemed to be in short supply and you had to have a ration coupon to buy the stuff.

The story starts near the end of World War II. Not too many of my readers will recall those years, in the 1940's much. I was born in 1931, so I can still recall the horse-drawn truck that brought milk to my home regularly -- including, of course, that Golden Guernsey



Milk with the special, 4% milk fat, filling the top of the bottle. I recall that the ration coupons my family had included some for getting butter. Butter was rationed. I wonder why, but it was.

In those days "margarine" was known, but "good people" wouldn't eat it. It was artificial and it was a cheap substitute for the real thing. Perhaps your grandmother will tell you about the days when butter was selling at \$1.00 per pound and margarine started to be sold -- the margarine was about \$0.20 per pound. The dairy farmers in those days had lots of political clout and they made "margarine" an [illegal substance](#) for many years. Gradually, as the dairy interests lost those fights, state by state, they managed to get the laws passed that said, in effect, "margarine cannot be colored yellow -- that would be a fraudulent attempt to fool people into thinking it was butter." [Click here](#) for the history of oleo margarine. [Click here](#) for a typical expose of margarine -- there are many who say the same thing.

So, margarine was sold as a solid white lump, rather ugly as I recall. But, packaged along with that lump of white stuff was a little yellow pill -- food color. You would get the margarine into a bowl, let it soften a bit (you know that margarine will never "melt" as honest butter does), and mix in the yellow powder food color. The kids in many families had the job of making the white ugly margarine look yellow, like butter. (In modern times far much more money is spent promoting margarine than butter -- [click for an example.](#))

The fight between the margarine makers and the butter makers got downright vicious. But something new was arriving on the scene. I wrote extensively [about butter](#) in my Book, Life Flow One.



You had then, in the South, lots of cotton being grown. The cotton, of course, grows with seeds in the midst of the cotton, and it was quite a job to pick out the seeds and still have the cotton left to sell. The cotton plantations realized that the cotton seed was full of oils, and probably that the oil was very nutritious.

So, they would carefully store the cotton seeds, looking for some use. They quickly found that cotton seeds made excellent feed for cattle. But, there was one terrible problem. If you stored the cotton seeds in a silo, for instance, for any period of time, the seeds would start to heat up and ferment -- the oil would go rancid and when the cattle ate **THOSE** seeds, they died! [Click Here](#) for more.

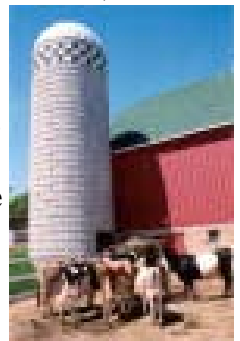
End of story. Store the cotton seeds for any period of time? Feed the cattle? They died! End of the business.

So, the plantation owners were left with tons of seeds, every year, and no useful market.

But, you could ship those seeds off to an "oil processing plant" and squeeze out all that wonderful oil inside the seed.

You could ship off the seeds without letting them spoil in storage -- and the oil in that seed seemed like it ought to be useful.

Well, by golly! That oil could be used to make margarine -- the ugly white stuff, but it could be used that way.





Since the cotton seeds were almost a "waste product" of the cotton plantation, they could sell those seeds at almost any price, just to get a penny or two from them. As it turned out one of the largest companies to handle cotton seeds into oil was Norton Simon, mentioned just below as one of the truly bad guys!

All these details are well described in my Book, *Life Flow One, The Solution For Heart Disease*, so I'll suggest you [Click Here](#) to read that for more of the details. [Click here](#) for several new pages I've just published on how margarine is made, including the solvent (Hexane) used to extract the oil from the seeds, etc.

We come quickly, now, to the political shenanigans in Washington!



The Institute of Shortenings and Edible Oils

Yes, you've been bombarded with ads, for decades, saying that some brand of margarine is low on those dangerous saturated fats -- you'll even see ads for margarine that let you know how healthy margarine is, compared with saturated fats. They hardly ever go so far as to say that the margarine is better for your heart than butter -- but that message is out there -- very plain! The ad campaign to sell margarine has drawn some very critical attention -- because of the lies promoted to be true. [Click here](#) for a story of how that has been done. (It finally got so bad that even the government clamped down on misleading advertising -- [click here](#).)

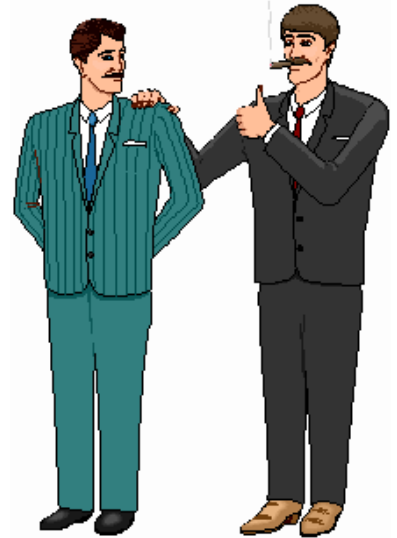
How did this all come to pass?

The FDA has had a hand in this. For instance, "In 1971 the [general counsel for the FDA \(William Goodrich\)](#) -- the man in charge of prosecuting any violations of FDA

regulations (including those of mislabeled polyunsaturated products) -- left the FDA to become president of the *Institute of Shortenings and Edible Oils* (the primary public relations group for polyunsaturates).

[Click here](#) to read more about that Institute.

At the same time [the man \(Mr. Peter Hutt\) who had been the legal representative of the edible oils companies](#) suddenly became the general counsel of the FDA --- the government lawyer now in charge of regulating and disciplining the activities of his former clients." Just as the Judas Goat led the lambs to the slaughter, so did Mr. Hutt sell America down the river for a fine job with one of America's leading law firms when he left the FDA.



[Other groups](#) joined this nasty crusade to sell drugs and kill Americans.



William Goodrich and Peter Hutt must join the Trolls at the top of this page -- at least as minor trolls.

But, there is more! This goes on all the time, with researchers leaving universities, going to government agencies, and then leaving there for executive positions in business where they cash in on all the contacts they've made during the earlier years. It isn't even considered unethical.

Here is a story backed up with more evidence than you have ever seen in any other publication.

Back in 1946 Americans consumed about 60% of their fat from animal sources and only 40% from vegetable oils.

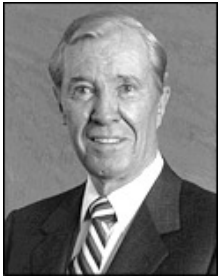
By 1963, when the dirty work had been pretty much accomplished, animal fat (saturated fat) accounted for only 40% of American fat intake, while vegetable oil had risen to about 60%. This very dramatic change was engineered and you are about to read the truth about that manipulation.



Somewhere, behind the scenes, about 1946, some small group of faceless businessmen decided to change the American attitude about butter, get the people fearful of butter and preferring margarine.



These businessmen mostly worked for large drug companies, vegetable oil firms and for certain chemical companies. Some of them were doctors high up in the AMA even though the AMA, itself, did not officially become part of this particular master plan at this early date. It was busy on other conspiracies.



These men formed a front group, called the *American Health Foundation* about 1970.

. . . the Chairman of the Board of Trustees of the American Health Foundation, David J. Mahoney, was also the President of Norton Simon, Inc., the leading producer of cottonseed oil (Wesson Oil), which is pointedly advertised as polyunsaturated.

[Click Here](#) to read the fabulous credentials of this supposed philanthropist -- who made his money through corruption! [Click here](#) to read even more about his astounding "luck" in business -- all based on his giving the giant drug companies exactly what they wanted and needed -- a perpetual monopoly on cholesterol-lowering drugs that do not help, but create billions of dollars of profits for the drug companies. [Click here](#) to discover, finally, that David Mahoney was an apologist for psychiatry. He died in May 2000.

This front group then obtained \$6 million from the Federal Government for the purpose of educating the American public about the dangers of eating saturated fats [butter]!

From now on I'm going to refer to these unethical businessmen as trolls or *master planners*! Their real purpose was not just selling their vegetable oil, but removing a natural and healthy product (butter) from the market and substituting a chemically created product (margarine). This helped set the stage to make people more and more dependent on all sorts of drugs -- from crops raised with artificial fertilizers, to medical drugs and finally, through the help of psychiatrists, street drugs.

In July, 1972, the *National Cancer Institute* (a totally tax-supported organization) awarded this commercial foundation \$2 million of tax money to further a program to prevent cancer and to assist in the construction of a new *Health Research Institute*.

In August of the same year, the *National Heart, Lung, and Blood Institute* [NHLBI] (another thoroughly tax-supported organization) awarded the foundation \$3.3 million of our tax money to research lowering elevated blood cholesterol. The thesis being tested was that increased polyunsaturated [margarine] intake would lower serum cholesterol and by so doing reduce the risk of heart attack.

In 1975, the NHLBI granted \$1.1 million to the [MrFit Program](#). It is interesting to note that the advisory steering committee for the *MrFit Program* includes two representatives from the American Health Foundation, Drs. Peter Peacock and Lloyd Shewchuk

The *MrFit Program* dealt with men with high risk of heart disease. They finally selected 12,866 for the final tests. Half continued to get whatever care they were getting from their regular doctors.

The other half was called the "Special Intervention Group" because their lives were intruded upon greatly! The

program was mostly psychiatric manipulation aimed at getting these high risk heart people to stop smoking, improve their diet and otherwise change their life styles.



The first objective was a lowering of blood cholesterol by massive changes in diet. As far as behavior modification is concerned, the tests were very successful. Those being tested reduced their dietary cholesterol by a massive 42%! Saturated fat consumption dropped by 28%. Total calories dropped by 21%.

What didn't change was the amount of cholesterol in their blood!

Of course. This had been the earlier findings of dozens of other studies. This *MrFit Program* was supposed to come up with different results.

Originally the goal of the Program was to reduce blood cholesterol by a very modest 10%. Depending on how you measured it, they achieved either a 5% or 6.7% reduction.

The researchers worked hard, with their psychiatric tricks, to stop these guys from smoking. About 50% actually quit smoking. But the ones who quit were the light smokers. The heaviest smokers were least likely to stop. So, the psychiatric tricks didn't actually work much.

The researchers also wanted to achieve a lowering of blood pressure with these diet and life style changes. They did reach a good success on that -- which suggests that diet and life style DO affect blood pressure even if they don't affect blood cholesterol. I, personally, believe that excess weight is the number one factor in predicting disease of all kinds, and that proper diet is the number one solution for excess weight.

The bottom line for all this research was to be the reduction in death rates among the people whose lives were intruded upon! They expected to reduce heart disease deaths by 25% in the group being tested.

The tests failed completely!

There was no significant difference in heart disease deaths when comparing the two groups! Actually, there were more heart deaths in the intervention group, although the difference was not statistically significant.

More surprises? The group that got no special treatment? Their cholesterol levels dropped just as much as the group getting the \$115 million intervention. Could it be that factors not even being examined were causing both groups to have a lower blood cholesterol?

Twenty nine percent of the group that got no psychiatric treatments stopped smoking.



Even the blood pressure of the untreated group came down, without the special intervention.

All in all, the *MrFit Program* was a complete failure.

Yet, when you read references to it, today, you'll hear how it "proves" that cholesterol in your food is bad for you, and causes heart disease. Yet, here is the official conclusion.

In other words, they found that changing the "risk factors" does not apparently change the risks. This necessarily means that the "risk factors" are not as important as was thought. Indeed, it should be concluded that the "risk factors" were no such thing, at least as far as this trial is concerned. [Source](#)

It's another example of the master planners finding something to be white, and calling it black. When they spend billions of dollars on promotion, you might believe it is black! Certainly your doctor believes it!

You realize, of course, that it was NOT butter they were after, but the cholesterol contained in butter -- if the trolls could make cholesterol into a danger substance (which it is NOT), then they could find a drug to "lower cholesterol" (which they did) and make billions of dollars managing a fake disease. This is the ideal scene for a drug company -- a drug that "works" (because it does lower cholesterol) but doesn't decrease death or illness!

What Is Cholesterol?

As I was preparing this article I wanted to find a "good" definition for "cholesterol." I have heard the terms "LDL," and "HDL" used, but never could get interested in really learning what those words meant.

I'm glad now that I didn't spend more time trying to understand LDL and HDL. The Trolls are grasping at straws. They first said that "high cholesterol" caused death from heart disease. That was easily proven to be false. So, they did what trolls often do, they brought out some new words, more complicated, and said that there was really "good cholesterol" and "bad cholesterol." This puzzled me, and perhaps it puzzles you?

For this article I decided I had to really get to the bottom of this -- and, as I said, I'm glad I waited. Of all the many sources I investigated for an explanation of these words, none of them made sense to me until I found Dr. Uffe's explanation. It is not very technical, and it is VERY good, so I urge you to learn these terms, from the full article I have [published HERE](#):

Your cholesterol tells very little about your future health

Cholesterol is a peculiar molecule. [[click here](#) to see a molecular model] It is often called a lipid or a fat.

However, the chemical term for a molecule such as cholesterol is alcohol, although it doesn't behave like alcohol.



Its numerous carbon and hydrogen atoms are put together in an intricate three dimensional network, impossible to dissolve in water. All living creatures use this indissolvability cleverly, incorporating cholesterol into their cell walls to make cells waterproof. This means that cells of living creatures can regulate their internal environment undisturbed by changes in their surroundings, a mechanism vital for proper function. The fact that cells are waterproof is especially critical for the normal functioning of nerves and nerve cells. Thus, the highest concentration of cholesterol in the body is found in the brain and other parts of the nervous system.

Because cholesterol is insoluble in water and thus also in blood, it is transported in our blood inside spherical particles composed of fats (lipids) and proteins, the so-called lipoproteins.

[Karl: Consider these "spherical particles" to be like submarines that contain the cholesterol. The submarines floating along through water (or blood).]

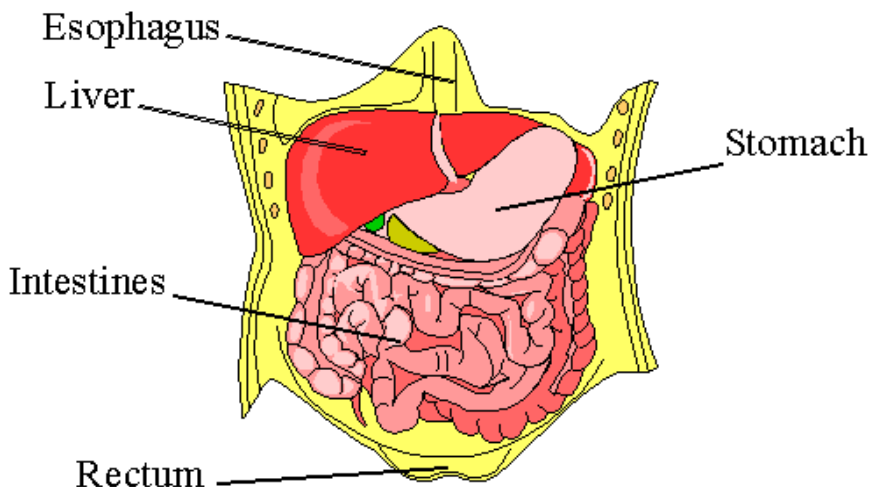


Lipoproteins are easily dissolved in water because their outside is composed mainly of water-soluble proteins. The inside of the lipoproteins is composed of lipids, and here are room for water-insoluble molecules such as cholesterol. Like submarines, lipoproteins carry cholesterol from one place in the body to another.

The submarines, or lipoproteins, have various names according to their density.

The best known are HDL (High Density Lipoprotein), and LDL (Low Density Lipoprotein).

The main task of HDL is to carry cholesterol from the peripheral tissues, including the artery walls, to the liver. Here it is excreted with the



bile, or used for other purposes, for instance as a starting point for the manufacture of important hormones.

The LDL submarines mainly transport cholesterol in the opposite direction. They carry it from the liver, where most of our body's cholesterol is produced, to the peripheral tissues, including the vascular walls.

When cells need cholesterol, they call for the LDL submarines, which then deliver cholesterol into the interior of the cells. Most of the cholesterol in the blood, between 60 and 80 per cent, is transported by LDL and is called "bad" cholesterol, for reasons that I shall explain soon.

Only 15-20 percent is transported by HDL and called "good" cholesterol.

A small part of the circulating cholesterol is transported by other lipoproteins.

You may ask why a natural substance in our blood, with important biologic functions, is called "bad" when it is transported from the liver to the peripheral tissues by LDL, but "good" when it is transported the other way by HDL.

The reason is that a number of follow-up studies have shown that a lower-than-normal level of HDL-cholesterol and a higher than-normal level of LDL-cholesterol are associated with a greater risk of having a heart attack, and conversely, that a higher-than-normal level of HDL-cholesterol and a lower-than normal LDL-cholesterol are associated with a smaller risk. Or, said in another way, a low HDL/LDL ratio is a risk factor for coronary heart disease.

However, a risk factor is not necessarily the same as the cause. Something may provoke a heart attack and at the same time lower the HDL/LDL ratio. Many factors are known to influence this ratio.

[Karl Note: He is very correct here! One of the biggest mistakes medical science makes is to equate "cause" with "effect." In other words, they SEE some effect, and put the label of "cause" on that effect. The label is a lie! The effect that was observed is often accurate. The "label" is a political decision, not a scientific one!]

What is good and what is bad?



People who reduce their body weight also reduce their cholesterol.

In a review of 70 studies Dr. Anne Dattilo and Dr. P.M. Kris-Etherton concluded that, on average, weight reduction lowers cholesterol by about 10 per cent, depending on the degree of the reduction. Interestingly, it is only cholesterol transported by LDL that goes down; the small part transported by HDL goes up. In other words, weight reduction increases the ratio between HDL- and LDL-cholesterol (1).

An increase of the HDL/LDL ratio is called "favorable" by the diet-heart supporters; cholesterol is changed from "bad" to "good". But is it the ratio or the weight reduction that is favorable?

When we become fat, other harmful things occur to us. One is that our cells become less sensitive to insulin, so that some of us develop diabetes. And people with diabetes are much more likely to have a heart attack than

people without diabetes, because atherosclerosis and other vascular damage occur very early in diabetics, even in those without lipid abnormalities. In other words, overweight may increase the risk of a heart attack by mechanisms other than an unfavorable lipid pattern, while at the same time overweight lowers the HDL/LDL ratio.



Also smoking increases cholesterol a little.

Again, it is LDL-cholesterol that increases, while HDL-cholesterol goes down, resulting in an "unfavorable" HDL/LDL ratio (2).

What is certainly unfavorable is the chronic exposure to the fumes from burning paper and tobacco leaves.

Instead of considering the low HDL/LDL ratio as bad it could simply be smoking itself that is bad. Smoking may provoke a heart attack and, at the same time, lower the HDL/LDL ratio.



Exercise decreases the bad LDL-cholesterol and increases the "good" HDL-cholesterol (3).

In well-trained individuals the "good" HDL is increased considerably. In a comparison between distance runners and sedentary individuals, Dr. Paul D. Thompson and his colleagues found that the athletes on average had a 41 per cent higher HDL-cholesterol level (4).

Most population studies have shown that physical exercise is associated with a lower risk of coronary heart disease, and a sedentary life with a higher risk. It also seems plausible that a well-trained heart is better guarded against obstruction of the coronary vessels than a heart always working at low speed.

A sedentary life may predispose people to a heart attack and, at the same time, lower the HDL/LDL ratio.

A low ratio is also associated with high blood pressure (5). Most probably, the hypertensive effect is created by the sympathetic nerve system, which is often overstimulated in hypertensive patients. Hypertension (or too much adrenalin) may provoke a heart attack, for instance by inducing spasm of the coronary arteries or by stimulating the arterial muscle cells to proliferate, and, at the same time, lower the HDL/LDL ratio. [There is more to this data -- [click here](#) for the full article by Dr. Uffe.]

Well, you know, now that the only difference between HDL and LDL is the DIRECTION IN WHICH THE STUFF IS MOVING! I'll bet you've never seen that explanation before?

What Did You Miss?

By now you are wondering, *What am I missing? Who said that margarine was safe and butter dangerous? Why should the government try to eliminate butter from the marketplace?* You can see, above, that the government is helping the cottonseed people promote the value of their margarine against butter, on the basis of some sort of danger in butter.

What was the scientific basis for such claims?

Now, you have to go back in time to 1948 when the master planners secretly got some very early government money to start proving that butter was dangerous and margarine was safe and good for you. This very desirable conclusion, from their point of view, required two earlier inconvenient facts to be proven false:



First, it had been well established that cholesterol in the blood stream did not cause death from heart disease. If the master planners were to sell their oil they would have to reverse this truth.

Second, it had been well established that cholesterol in your diet did not cause cholesterol in your blood stream. If the master planners were to sell their oil they would have to reverse this truth.

The master planners concluded:

1. There needed to be research showing that high cholesterol in the blood caused death from heart disease.

The cholesterol myth started in 1913 when a Russian scientist, Dr. Nikolai Anitschkov, fed rabbits massive amounts of cholesterol -- the rabbits died of heart disease. [Click here](#) for more about this misleading study.

Later scientists, who had a point they wanted to prove, often quote these studies as the first proof that dietary cholesterol causes heart disease. It isn't that these studies, in 1913, were so scientifically conducted, it was simply that they represent a historical foundation. If a scientist, today, wants to claim that dietary cholesterol causes high blood cholesterol and that that is the cause of heart disease, he will cite all sorts of studies, but in order to get some historical legitimacy he will often cite the 1913 study.

The 1913 study done by the Russian simply ignores the fact that rabbits are vegetarians and that their bodies cannot handle animal fat.

As my friend [Dr. Mendelsohn](#) would say, *The Russian study proves conclusively that you should not feed butter to rabbits!*



Today's master planners will start off citing the rabbit study, but omit the fact that there were rabbits involved, or fail to mention that rabbits can't use animal products in their diet -- they die! One of the most misleading of these is Dr. Kenneth H. Cooper:

With Anitschkov's experiments, however, the connection between cholesterol-laden foods and hardening of the arteries began to be much clearer. [Click here for more about Dr. Cooper.](#)

2. Then, there was need for research which would show that a diet which is high in cholesterol (eggs and butter) would cause high cholesterol levels in the blood.

This second research need would have seemed insurmountable to any honest researcher. There were, by 1970, literally dozens of well-done scientific studies which showed the exact opposite -- that cholesterol in the diet had no significant effect on cholesterol in the blood stream.

The master planners have succeeded, as you realize. Health care costs go up, not for health, but for the profits of the drug industry. [Click here](#) to read one of the latest stories -- how health care will soon be at \$3 trillion dollars per year -- about 17% of the entire GDP. [Dr. Scott Grundy](#) was the hidden author of the diet that is killing America! Dr. Grundy is still doing it -- [click here](#) for a recent article. [Click here](#) for his biographical information.

How did they do that?

One of these master planners was [Dr. Daniel Steinberg](#). Dr. Steinberg could be called the father of death by cholesterol lies. [Click here](#) for a recent claim by him. But, he has also been whitewashed -- made to look respectable. [Click here](#) to read an interview in which he, now, endorses vitamins as a preventive for heart disease. The whitewasher should have known better. But, for a more candid view of Dr. Steinberg's real position, [click here](#). I covered Dr. Steinberg, and the entire cholesterol lie in Chapter Five of my Book -- beware there is some [heavy stuff here](#).



Dr. Steinberg was a physician who worked on cholesterol drug research at the University of California at San Diego. He was the Chairman of the Conference and cut off any speaker who criticized the lie that was being launched. He may wish to forget this, or hide it, but those who were there will remember. This "conference" was NOT administered in the way prescribed by the rules!

Another master planner was [Dr. Robert I. Levy](#) of Columbia University. In 1973, Levy was named director of NHLBI's extramural Division of Heart and Vascular Diseases where he coordinated a network of Lipid Research Clinics (LRC) to carry out research on blood-lipid abnormalities.

Another master planner was Dr. Richard Peto, an Oxford University epidemiologist. Review of dozens of scientific studies for which he gets credit do not include this infamous period when he contributed to the lies about cholesterol. He is another who hides his past -- as those guards at Nuremberg who, found after 50 years, claim that it was just too long ago for them to be brought to justice.



Technically, the head master planner would have been [Dr. Basil M. Rifkind](#). He presented false data to the Conference and Dr. Steinberg cut off any debate on it. Dr. Rifkind had taken over from Dr. Steinberg, in some flawed research referred to as the Coronary Primary Prevention Trial, CPPT, of which more later. (Dr. Rifkind has been active spreading lies and preventing truth even a few years ago. He has not disappeared! But he lost out to the other trolls in prestige.)

Here is a quote from another researcher on this subject. [Click here](#) to read the entire report:

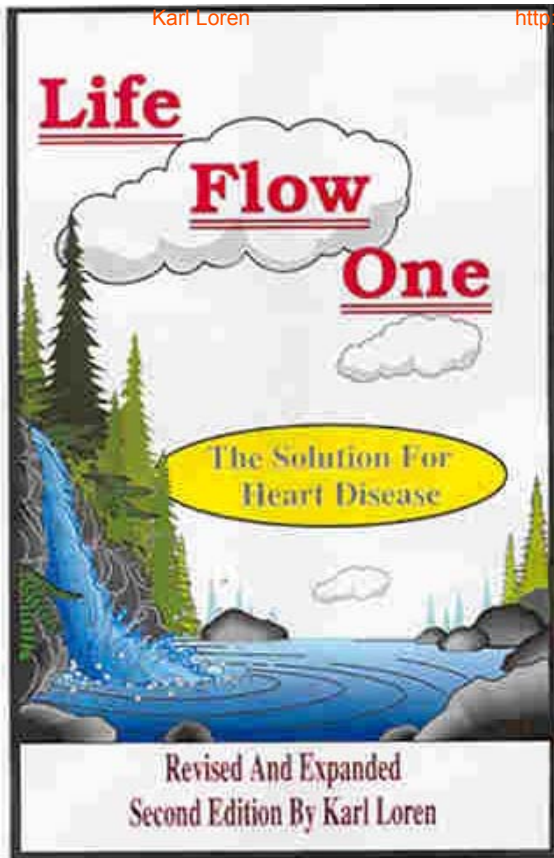
LRC [Lipid Research Clinics] researchers claimed that the group taking the cholesterol-lowering drug had a 17 per cent reduction in the rate of CHD [coronary heart disease], with an average cholesterol reduction of 8.5 per cent. This allowed LRC trials Director Basil Rifkind to claim that "for each 1% reduction in cholesterol, we can expect a 2% reduction in CHD events".

The statement was widely circulated, even though it represented a completely invalid representation of the data - especially in light of the fact that when the University of Maryland lipid group analyzed the LRC data, they found no difference in CHD events between the group taking the drug and those on the placebo.

There is much more to this complete story. It is all among the links on this page and in the several Chapters of my Book, Life Flow One, The Solution For Heart Disease. I urge you to study further.

I am not including HERE much of the corrupt history of the Framingham Studies -- all of that data is in my Book.

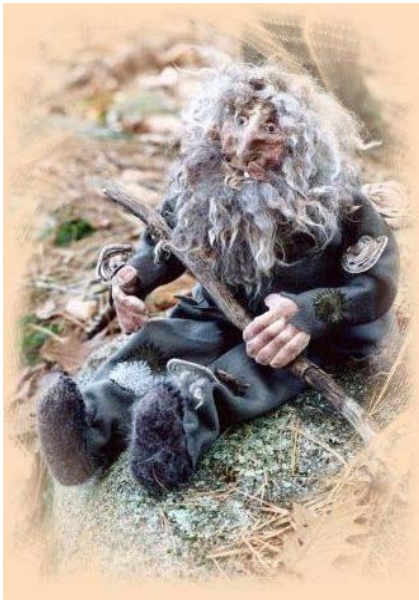
Here is part of that, however, from [THIS SOURCE](#):



The ongoing Framingham Study found that there was virtually no difference in coronary heart disease (CHD) "events" for individuals with cholesterol levels between 205 mg/dL and 294 mg/dL - the vast majority of the US population. Even for those with extremely high cholesterol levels - up to almost 1,200 mg/dL - the difference in CHD events compared to those in the normal range was trivial. This did not prevent Dr William Kannel, then Framingham Study Director, from making claims about the Framingham results. "Total plasma cholesterol," he said, "is a powerful predictor of death related to CHD."

It was not until more than a decade later, in 1992, that the real findings at Framingham were published - without fanfare - in the Archives of Internal Medicine, an obscure journal. "In Framingham, Massachusetts," admitted Dr William Castelli, Kannel's successor, "the more saturated fat one ate, the more cholesterol one ate, the more calories one ate, the lower people's serum cholesterol ... we found that the people who ate the most cholesterol, ate the most saturated fat, ate the most calories, weighed the least and were the most physically active."

Corruption Within The Heart, Lung And Blood Institute



Another Troll, [Dr. Lenfant](#) has been part of the corruption within the National Heart, Lung and Blood Institute which allowed cholestyramine to be sanctioned as the first officially recommended cholesterol-lowering drug by the government. This stuff was so unpleasant in taste that when it was tested the researchers allowed for the possibility that up to 35% of the people taking it would refuse to continue. A large percentage of people who were supposed to be part of the official scientific trial of this stuff refused to take it. The cholesterol-lowering effect was also much less than they needed to substantiate its use. Dr. Lenfant ALSO changed the way blood pressure is measure and doomed us to decades of harmful drugs thereby. [Click to learn more on that one!](#)

Cholestyramine continues to be still available for sale -- under the brand name [Questran](#), marketed by Bristol Laboratories.

Merck Sharp & Dohme's drug lovastatin ([Mevacor](#)) later became the drug officially sanctioned by the United States Government, and the one, had the master planners had their way, which you would have been forced to take, even

against your will. ([Source](#))

I am not including **HERE** more evidence of corruption at the National Heart, Blood, and Lung Institute. For the purposes of this article **THIS** was the group that approved a cholesterol-lowering drug even though the study showed that it had no value.

There is so much more!

Even if YOU are not taking a cholesterol-lowering drug, there are millions of others, around you, who are taking Lipitor and others. They have swallowed the lies of these trolls -- you can help some of them. Give them a copy of this material, ask them to read it. Some will.

The world doesn't much seem that it wants to be saved! But, here and there, among the many, are the few who are aware enough to seek out the truth and test it, then apply it.

Dr. Uffe Ravnskov Demolishes The Cholesterol Myths!

As I prepared to write this major research report about cholesterol I spent many hours looking for a "good" definition and description of cholesterol. Many of the results of my searches are among [these pages](#), but none of those ever satisfied me. When I found [THIS article](#), by Dr. Ravnskov, I was instantly amazed at the simplicity and thoroughness of the explanation. Thus I am now using THIS reference to "cholesterol" as my central focus for the simple definition and description of this term. I have taken the liberty, further, of adding comments within this article to point out information that I think needs further detail or emphasis. I also found Dr. Ravnskov's Book on this subject and have one illustrative Chapter from that book, excerpted below or the whole Chapter -- [click here](#).

Did you know. . .

. . . that cholesterol is not a deadly poison, but a substance vital to the cells of all mammals?

. . . that your body produces three to four times more cholesterol than you eat?

. . . that this production increases when you eat only small amounts of cholesterol and decreases when you eat large amounts?

. . . that the "prudent" diet, low in saturated fat and cholesterol, cannot lower your cholesterol more than a small percentage?

. . . that the only effective way to lower cholesterol is with drugs?

. . . that many of the cholesterol-lowering drugs are dangerous to your health and may shorten your life?

. . . that the new cholesterol-lowering drugs, called statins, do lower heart-disease mortality, but this is because of effects other than cholesterol lowering? Unfortunately, they also stimulate cancer, at least in rodents.

. . . that you may become aggressive or suicidal if you lower your cholesterol too much?

. . . that polyunsaturated fatty acids, those which are claimed to prevent heart attacks, stimulate infections and cancer in rats?

. . . that if you eat too much polyunsaturated oil you will age faster than normal? You will see this on the outside as wrinkled skin. You can't see the effects of premature aging on the inside of your body, but you will certainly feel them.

. . . that too much polyunsaturated oil may provoke atherosclerosis?

. . . that people whose blood cholesterol is low develop just as many plaques in their blood vessels as people whose cholesterol is high?

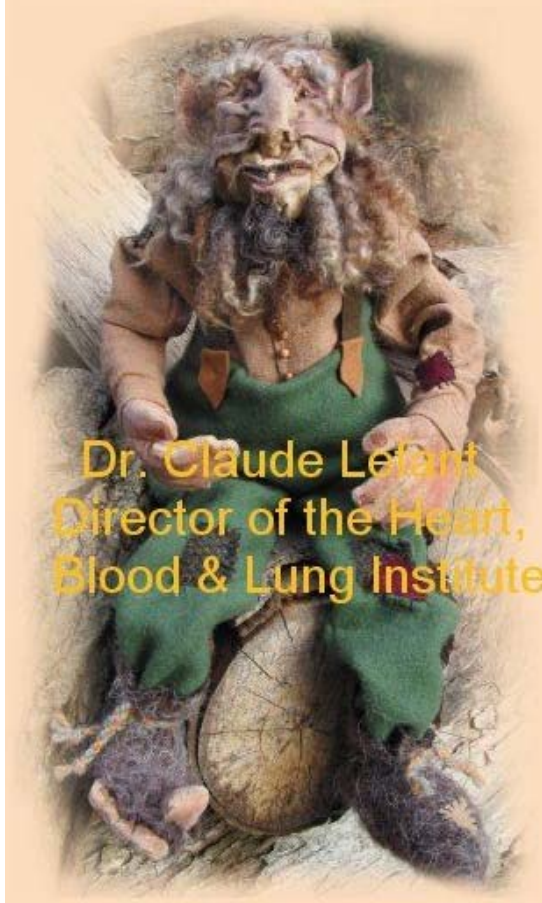
. . . that more than thirty studies of more than 150,000 individuals have shown that people who have had a heart attack haven't eaten more saturated fat or less polyunsaturated oil than other people?

... that old women with high cholesterol live longer than old women with low cholesterol?

... that many of these facts have been presented in scientific journals and books for decades but proponents of the diet heart hypothesis never tell them to the public?

... that the diet-heart idea and the cholesterol campaign create immense prosperity for researchers, doctors, drug producers and the food industry?

Dr. Uffe has also written [THIS](#) about cholesterol.



Dr. Claude Lenfant -- Master Planner -- Corrupter of Truth -- Troll!

Here is Congressional Testimony by Dr. Claude Lenfant, Director of the National Heart, Blood & Lung Institute -- one of the major trolls responsible for millions of deaths in the United States and the rest of the world. [Click here](#) to read his verbal testimony, and [click here](#) to read his "prepared statements." Here is an evil person.

"During the 1950s, it was observed that a patient who was receiving chelation therapy for lead poisoning coincidentally experienced relief of angina symptoms. Since that time, many patients have sought and received chelation therapy for atherosclerosis, a "hardening of the arteries" that leads to heart disease and stroke. One theory behind using chelation to treat this disease is that it may remove calcium, which is present in some atherosclerotic lesions, and therefore decrease the obstruction in the arteries.

"The patient receives repeated intravenous infusions of the drug EDTA that, some believe, grasps the calcium and pulls it from the area of obstruction."

This last statement by Dr. Claude Lenfant is, of course, absolutely false -
- Lenfant is repeating it because many IV doctors, foolishly, still say this same thing!

The lies started by the trolls have spread world-wide. [CLICK HERE](#) for an interesting, if covert, message from an Associate Professor in Japan -- a man who finds fault with my article about cholesterol.

Who are the "some" he quotes? The foolish ACAM doctors! I [wrote about this](#) many months ago -- unfortunately it remains true. The IV doctors are their own worst enemies!

Notice, here, how ACAM has harmed itself. ACAM has continued to refuse to recognize that EDTA removes metals, and that metals cause free radical multiplication, and that free radicals cause heart disease. Thus, a scientist or doctor, like Dr. Lenfant, can shoot holes in the EDTA therapy simply by alluding to the foolishness of EDTA directly affecting calcium. Thus, Lenfant brings up the handling of calcium by EDTA when he knows, full well, that is NOT how it works, and the ACAM doctors are stuck in their own corner -- not willing or able to speak the truth about their own specialty!]

"However, others believe that when EDTA is administered intravenously, it encounters and binds with calcium circulating in the blood, and not with any calcium that may exist in the



atherosclerotic lesions. According to this view chelation therapy not only may be ineffective in reversing atherosclerosis, but also may expose the patient to risk by depleting the body of calcium and other essential nutrients. "

Another foolish straw man put up by Lenfant, so he could knock it down -- Oh! What an evil man this is!

"There is, in fact, no sound evidence that EDTA chelation therapy is effective or has clinical benefit for atherosclerosis. For nearly three decades, the NHLBI has carefully followed the scientific literature on this issue. Our thorough and critical review of the published literature on EDTA chelation, which includes numerous case studies and testimonials, identified only two scientifically rigorous clinical trials, neither of which found any benefit of the therapy."

The Original Troll Slayer -- Thomas Moore

Here is the man who started it all -- writing the brave Book, now out of print, "Heart Failure."

[Click here](#) for one of the most powerful Chapters from his Book.

It was Mr. Moore's book that got ME, Karl Loren, passionate about writing my own Book on heart disease. Mr. Moore has done a major service to mankind. Unfortunately his Book got him into enough trouble that he has not continued writing along that line -- the pressures involved here must be measured in the many, many billions of dollars.

His Book is out of print! Few remember it!

The cholesterol-lowering drugs are the single largest category of profitable drugs. Every drug company is in on the act. If Mr. Moore's Book had been accepted as true, and his truth spread through the "news media" then literally billions of dollars of drug company profits would have been lost and some millions of Americans would not have died when they did.

[Click here](#) for a page that describes his Book, for sale, if you can find one.

Mr. Moore's Book can take credit for saving many lives, as shown here:

The death rate on the operating table, from bypass surgery, varies from 1% to as high as 25% depending on what doctor holds the knife. The differences used to be greater, but publicity started by Thomas Moore's book, *Heart Failure*, forced several hospitals to transfer (rather than to report to the police for murder) those surgeons whose death rates were too high. But, the average death rate, under the knife, is about 5%. ([Source](#))

Mr. Moore is also the man who exposed this false information:



In 1971 these master planners formed the *Task Force on Arteriosclerosis*. The terrible story behind this corrupt group is very well told by Thomas Moore in his Book, *Heart Failure*.

Over many pages, in great detail, Mr. Moore reports on individual master planners. There was a peak in their activities, in December, 1984, when they formed the [Consensus Development Conference](#). The previous link is for a description of the process, itself -- a "consensus

development conference." [Click Here](http://www.chembiotheonline.com/articles/v72.htm) to see the actual document from the 1984 Conference.



Another Slayer Of Trolls

[Sally Fallon](#) and [Dr. Mary Enig](#) are two others who have been battling the cholesterol trolls! Mary, unlike Dr. Uffe, has named the names of the trolls in her writings. She hasn't told the whole story about butter and margarine, but she has done more investigative work on the actual sources of the cholesterol lies than any other person, except me and Mr. Moore, author of "[Heart Failure](#)."

Here is a full story about the cholesterol myths, and the constant rejection by so-called serious publications to print the truth about cholesterol. The full report by Dr. Enig and Ms. Fallon is [HERE](#).

The problem with the 40 years of NHLBI -sponsored research on lipids, cholesterol and heart disease was that it had not produced many answers—at least not many answers that the NHLBI was pleased with. The ongoing Framingham Study found that there was virtually no difference in coronary heart disease "events" for individuals with cholesterol levels between 205 mg/dL and 294 mg/dL—the vast majority of the US population. Even for those with extremely high cholesterol levels—up to almost 1200 mg/dL, the difference in CHD events compared to those in the normal range was trivial.²⁹ This did not prevent Dr. William Kannel, then Framingham Study Director, from making claims about the Framingham results. "Total plasma cholesterol" he said, "is a powerful predictor of death related to CHD." It wasn't until more than a decade later that the real findings at Framingham were published—without fanfare—in the Archives of Internal Medicine, an obscure journal. "In Framingham, Massachusetts," admitted Dr. William Castelli, Kannel's successor "the more saturated fat one ate, the more cholesterol one ate, the more calories one ate, the lower people's serum cholesterol. . . we found that the people who ate the most cholesterol, ate the most saturated fat, ate the most calories weighed the least and were the most physically active." ([source](#))



Mary Enig, alone, has also publicized that something called "trans-fatty acids" are much more found in margarine than in butter, and that these trans-fatty acids are very harmful.

The final results of Enig's ground-breaking compilation were published in the October 1983 edition of the Journal of the American Oil Chemists' Society. Her analyses of more than 220 food items, coupled with food disappearance data, allowed University of Maryland researchers to confirm earlier estimates that the average American consumed at least 12 grams of trans fat per day - directly contradicting ISEO assertions that most Americans consumed no more than 6 to 8 grams of trans fat per day. Those who consciously avoided animal fats typically consumed far more than 12 grams of trans fat per day. ([Source](#))

[Click here](#) for a German language condemnation of cholesterol as having anything to do with heart disease.

One method of selling more of these useless, even harmful, drugs is for the drug companies to apply to the FDA for permission to sell their drugs "over the counter" rather than through prescription.

That is finally happening, in 2005.

Should cholesterol-lowering statins, the biggest selling drugs in the world, be

available to consumers as easily as aspirin - on drugstore shelves without a prescription?
Karl Loren <http://www.chelationtherapyonline.com/articles/p72.htm>

A joint venture between Merck & Co. and Johnson & Johnson is asking for permission to sell a 20-milligram dose of Merck's Mevacor over-the-counter, arguing that the step would extend the benefits of the drugs to potentially millions of patients who currently aren't taking them. ([Source](#))

Before they tried to shift these drugs to "OTC" status, it had become obvious that cholesterol was NOT responsible for heart disease, the trolls came up with the concept of "good cholesterol" and "bad cholesterol. Click one on of the links below for what a famous scientist has to say about that one! That is demolished as valid science by all those exposing the old cholesterol myth. But, there is now a brand new culprit in the heart disease arena. It is now "C-Reactive Protein." You can click here to learn about it, but what you really should know about it is that it is what will gradually push cholesterol off the medical claims pages. Here are some of the references on THIS web site:

[American Heart Association -- On C Reactive Proteins](#)

... Source Inflammation, Heart Disease and Stroke: The Role of **C-Reactive Protein**. ... What is the role of **C-reactive protein** in predicting risk? ...
www.chelationtherapyonline.com/PreventCancer/p109.htm - 49k - [Cached](#) - [Similar pages](#)

[Vulnerable Plaque -- The New Kid On The Block!](#)

... In this case Garry found a very specially refined version of Cat's Claw that is far, far better at reducing **C Reactive Protein** levels. ...
www.chelationtherapyonline.com/articles/p204.htm - 63k - [Cached](#) - [Similar pages](#)

[Fuster -- Clinical Frontiers in Atherosclerosis Research: ...](#)

... a program in which patients with two measured risk factors and either a high level of tissue factor activity in the blood or **C-reactive protein** undergo ultra ...
www.chelationtherapyonline.com/GarryGordon/KarlLorenResearch/p8.html - 90k - [Cached](#) - [Similar pages](#)

[Note Fifteen Dr. Garry Gordon Lecture](#)

... 2. **C Reactive Protein** In this lecture Garry talks about **C Reactive Protein**. ... Other pages where I describe this **C Reactive Protein** are HERE: ...
www.chelationtherapyonline.com/GarryGordon/GarryGordonLectures/note15.html - 83k - [Cached](#) - [Similar pages](#)

[If I Were Vice President Dick Cheney's Physician. . .](#)

... This means we must measure levels of things like **C-reactive protein**, fibrinogen, homocysteine, antibodies to oxidized LDL, vascular cell adhesion molecules ...
www.chelationtherapyonline.com/GarryGordon/ChelationResearch/p3.htm - 62k - [Cached](#) - [Similar pages](#)

[Dr. Ron Kennedy Interview With Dr. Garry Gordon](#)

... Professional, who should provide a complete evaluation, including all the proper lab tests such as Homocysteine and **C-reactive protein**, platelet aggregation ...
www.chelationtherapyonline.com/GarryGordon/ChelationResearch/p33.htm - 60k - [Cached](#) - [Similar pages](#)

[ORAL CHELATION – THE OTHER SIDE OF THE STORY by Dr. Garry F. ...](#)

... inflammatory therapy to deal with the newly recognized molecular risk factors such as fibrinogen, ultra sensitive **C-reactive protein**, Intracellular Adhesion ...
www.chelationtherapyonline.com/anatomy/p63.htm - 51k - [Cached](#) - [Similar pages](#)

[New Study Shows Protein Boosts Heart-Disease Risks -- WSJ](#)

... Why? Because they found a reason, other than cholesterol, for heart attacks -- some mysterious new danger -- **C-Reactive Protein**. ... Source. **C-REACTIVE PROTEIN** ...
www.chelationtherapyonline.com/PreventCancer/p108.htm - 59k - [Cached](#) - [Similar pages](#)

In other words, the medics will never admit they were "wrong" about cholesterol, but they will now start talking about this "new thing" until cholesterol is just old news, and the "new science" suggests that "C Reactive Protein" is REALLY the problem. Here is an excerpt from the Wall Street Journal, one year after the above references, showing that, indeed, C Reactive Protein IS the new problem -- sliding the always-false cholesterol scare further down the scale of people's awareness.

Here comes the Wall Street Journal, one of the final endorsements of false drug science -- validating the importance of "C-Reactive Protein" (whatever that may be) and making you comfortable with the "false fact" that your Lipitor is still effective, but that it is now found to be effective against a new villain -- now that the old villain is proven false. ([Source](#))

Wall Street Journal:

In findings that could change medical care for heart patients and spur a new wave of drug development, two research groups reported compelling new evidence in the effort to prevent heart attacks: Reducing levels of a protein known as CRP may be just as important as fighting cholesterol.

Cardiologists who led the studies said the findings are likely to transform how doctors think about and use cholesterol-lowering statins, the world's top-selling class of drugs and a major weapon against the ravages of cardiovascular disease.

The results also amount to the strongest evidence yet that CRP, or c-reactive protein, is a cause of heart disease. That is likely to spur already heightened interest among drug companies to develop other medicines that would reduce levels of CRP. ([Source](#))

C Reactive Protein is just another symptom of heart disease caused by free radical damage to the cells in the arteries. For some years into the future you will see cholesterol being minimized and C Reactive Protein being emphasized.

It is planned!



Another slayer of trolls is Dr. Elmer Cranton, who wrote:

A recent multi-country study in Europe, funded by the World Health Organization, showed that low blood levels of vitamin E are statistically 100 times more significant as a predictor of coronary heart disease than are high blood levels of cholesterol.(141). In another report, all published autopsy studies that correlated the extent of atheromatous arterial plaque with levels of blood cholesterol were reviewed. Surgical specimens removed at the time of bypass surgery were also analyzed. After eliminating data from those few individuals with a hereditary form of extremely high cholesterol (above 400 mg/dL), no correlation was found between blood cholesterol levels and the severity of atherosclerosis.(142) The author stated that prior studies falsely concluded that blood cholesterol levels correlated with atherosclerosis because of failure to eliminate those occasional individuals with extremely high cholesterol caused by a lethal genetic mutation. ([source](#))



The National Cholesterol Education Program -- Dr. James Cleeman -- Troll!

Dr. Cleeman was chosen many years ago to head the campaign to sell lies to the American public. He has bragged of how successful he has been. He is a troll --- guilty of preying on humans by spreading false information that has caused millions of Americans to abandon the diet of their grandparents and enrich the pockets of the

Here is a quote from the Book, Heart Failure, by Thomas Moore:

ONE MORNING IN EARLY OCTOBER OF 1987 THE U.S. health authorities announced that 25 percent of the adult population had a dangerous condition requiring medical treatment. Since there were no symptoms, it would be necessary to screen the entire population to identify those in danger. More than half of those screened would be dispatched to their physicians for medical tests and evaluation. Then for one out of four adults treatment would begin. The first step would be a strict diet under medical supervision. If within three months the dieting had not achieved specified results that could be verified by laboratory tests, a more severe diet would be imposed. The final step for many patients would be powerful drugs to be taken for the rest of their lives. ([Source](#))

You have probably read a few "conspiracy stories" or at least been exposed to them?

I've noticed that as exciting as they often are, they are very short on the type of details you can check out -- yourself. Yet, Dr. Cleeman is STILL the head of this "educational program" and he has been in the news, with his [picture and title, recently](#). He exists. I say to you that he is one of the terrible trolls -- that is my opinion. What is yours?

The Current Scene

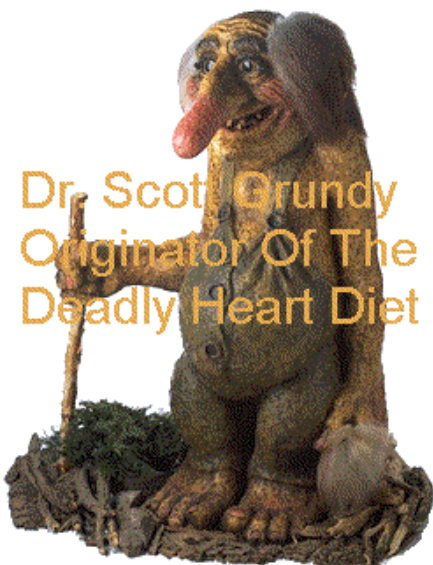
The popular media in the United States continue to spread these lies, as shown in the cover of Newsweek for July 13, 2003, and the related story:

Welcome to the age of statins. If you aren't taking a cholesterol-lowering drug yourself, chances are you know someone who is. And it's not necessarily an overweight, out-of-shape sports fan in his 50s who ventures off the couch only in search of chips and beer. An estimated 12 million to 15 million American adults of every age and description—from Gen-Xers to their octogenarian grandparents—depend on America's most popular prescription drugs to scour their bloodstreams of LDL cholesterol, the waxy goo that can block arteries and cause heart attacks and strokes. And, according to federal health guidelines, 21 million more Americans *should* be taking statins to help ward off cardiovascular disease. Statins have become so critical in the war against cholesterol that a leading statin researcher compares them to the ultimate miracle med. Says Dr. Rory Collins of Oxford University: "Statins are the new aspirin." ([source](#))

The Final Objective -- Drugging America Into Submissive Apathy! -- The Trolls Are Winning!

First the trolls wanted to convince you that butter was dangerous. Then they wanted you to change your diet -- Dr. Scott Grundy was the architect of that diet -- hidden behind the walls of the American Heart Association at the time. Just a short while ago he was the one to [announce to America](#) that the "danger level" for cholesterol had just been reduced, and that another 20+ million people now must take a cholesterol-lowering drug. I wrote about that in a Wednesday Letter -- [HERE](#). The American Heart Association, of course, continues to spread the lies -- [click here](#).

Then they convinced you that your high cholesterol was because you were weak and unable to stick to their diet. So, they then suggested you might have to take a cholesterol-lowering drug for the rest of your life! They have succeeded. If the drug didn't work, then bypass surgery, another fraud, was ready for you.



They may have succeeded with society as a whole, but YOU, as an individual, can still escape the clutches of these trolls -- the truth is what you need to set you free!

The sales of just ONE of the cholesterol-lowering drugs, [Lipitor](#), climbed 28% from 1999 to 2000, as reported in the Wall Street Journal:

During the period under investigation, Lipitor was owned by Warner-Lambert Co., which co-marketed the drug with Pfizer. In 2000, Pfizer completed a hostile takeover of Warner-Lambert, in large measure to gain complete control over Lipitor, which is the New York-based company's biggest seller and most important drug. Last year, Pfizer reported Lipitor sales of \$6.45 billion, a 28% increase compared with 2000. [Source](#)

and another quote from the WSJ on March 29, 2002. Lipitor is the NUMBER ONE drug in sales:

WASHINGTON -- Spending on prescription drugs jumped 17% last year, raising concerns about further big increases in health-insurance premiums and steeper pharmacy bills for those without drug coverage.

The National Institute for Health Care Management Foundation said in a report to be released Friday that spending rose sharply because more people are using prescription drugs, more people are buying more expensive drugs and prescription-drug prices in general are rising faster than the cost of living. [Source](#)

If the Test Results are Too Low -- Change The Tests!

The terrible truth that 50% of all those who have had heart attacks had "normal" cholesterol OUGHT to teach these fools that high cholesterol is NOT associated with the cause of heart disease. This page is that major article by me, Karl Loren. But, when the observations don't fit the theory, then you invent new and different tests -- that the "normal tests" for cholesterol must be "wrong." Then, all you have to do is design a new test that shows more people with high cholesterol, so you can then scare them into taking more Lipitor. There is no end to the evil in this business!

This [VAP test](#) is another complete fraud in the largest medical industrial business in the world -- heart disease!

There is another change of the ground rules. Originally the "safe" level of cholesterol was set at the apparent "national average" of 200. When that hasn't sold enough Lipitor, the great gods of science decided to change the level at which cholesterol would be considered dangerous. You understand this is all trash science!



New Government Cholesterol Standards Would Triple Number of Prescriptions (May 2001)

Rarely have so few doctors recommended so many drugs for so many people -- virtually overnight.

For the first time in eight years, the federal government has published new cholesterol standards. If the more rigorous guidelines are widely followed, doctors could end up writing a stack of prescriptions that would nearly triple -- to 36 million people -- the number of Americans on cholesterol-lowering drugs.

The recommendations would put fully 18% of American adults on "statin" drugs like Pfizer Inc.'s Lipitor, Merck & Co.'s Zocor and Bristol-Myers Squibb Co.'s Pravachol. And the new guidelines could theoretically triple U.S. sales of these medicines to nearly \$30 billion a year.

The standards come from the National Cholesterol Education Program's expert committee on cholesterol, and they are published in this week's Journal of the American Medical Association. The quasigovernmental group was appointed by the National Heart, Lung and Blood Institute, which is part of the National Institutes of Health.

Under the guidelines, anyone who already has coronary artery disease and whose LDL, or "bad," cholesterol is above 130 generally should be on drug therapy. "We used to say to try lowering it with diet first, but now we say that if your LDL is above 130 and you have coronary disease, you should be on drug therapy," says the committee's chairman, Scott M. Grundy, director of the center for human nutrition of the University of Texas Southwestern Medical Center at Dallas.

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Some doctors suggest the financial ties of some committee members may have played a role in the emphasis on drug therapy. Five of the 14 panel members were consultants to -- or received honorariums from -- Pfizer, Merck, Bristol-Myers or other companies, including AstraZeneca PLC, maker of the experimental drug Crestor, which may be the most powerful cholesterol drug yet. "This whole program has the flavor of a drug industry/NIH cabal," says Sidney Wolfe, director of the Health Research Group of Public Citizen, a Washington-based consumer advocacy group. "The fundamental principles are correct, but it seems like they are pushing too hard toward drug therapy." [[Source](#)]

It is hard to believe how blatant this attack on our public health is.



Depth Of Research -- Enormous!

I, Karl Loren, have spent more time researching this article than any other newsletter I've written.

I have published literally hundreds of NEW pages, in addition to the thousands of previously published pages about the cholesterol myth.

You won't find a more complete story about the fraud of cholesterol claims by the trolls anywhere else on the planet. This newsletter, when printed on paper will take about 31 pages, but there are literally HUNDREDS of more pages linked from this one newsletter.

I urge you to take the time to read it all. Make a copy for your hard disk! Who knows whether it might not just be deleted from here???

Why?

Because you are one of the very tiny number who are learning the truth about cholesterol -- because you have a responsibility to your family, friends, neighbors and mankind to help spread this truth. Evil is a real force on this planet. The drug companies making \$10 BILLION per year in sales of a worthless drug? Do you think they might use some illegal means to clamp down on this story?

I invite you to write to me, Karl Loren, personally, to tell me what you think of this information. [CLICK HERE](#) to go to the message page -- write to me. I will respond, personally, and will publish your opinion, questions, comments on a page located [HERE](#).

Research References

This Wednesday Letter is one of the most heavily researched writing projects that I, Karl Loren, have ever undertaken. There are probably at least 3,000 pages among my 12 web sites that deal in one way or another with the subject of "cholesterol," and probably a few hundred were added JUST BECAUSE of my research for this article.

Not too many of my readers will want to spend the dozens of hours going through all these pages, but some might, and some might like to know that this resource is available anytime they want to take a look. The article above includes many links to other sections and pages. The most important of these many pages, and others, are now shown below.



You may well run into some doctor or other person who simply dismisses the claim I make: "Cholesterol is not a factor in predicting heart disease -- the entire campaign to get people to take cholesterol-lowering drugs is a fraud!" But, challenge any of these people to read through these references, write to me, Karl Loren, personally, as they may wish to refute anything they find, and see if they can continue with their foolish false notion about cholesterol.

All the links below are among the 15,000 pages and 12 web sites published by me, Karl Loren.

- One index page contains many links to other pages on the subject of cholesterol. This index page would be a good place to take a look at, glance over the many titles of other web pages, and click on any that interest you. This page is located at: <http://www.chelationtherapyonline.com/articles/indexcholesterol.htm>
- One particular web site has several very useful references to cholesterol:
 - [Study HMG-CoA reductase inhibitor & Cholesterol](#)
 - [CHOLESTEROL DRUGS - - A DEATH SENTENCE?](#)
 - [Report Favors Cholesterol Drugs, But Doctors Say Diet Is Effective](#)
 - [Cholesterol-Lowering Drug's Arrival Has Drug Industry Hearts Pounding](#)
 - [Low Cholesterol Levels May Be Linked To Depression, Anxiety](#)
 - [Half the people who have heart attacks have normal cholesterol!](#)
- Any serious researcher, wanting to get full advantage of my 15,000 pages, should read how the Google search feature works on these web sites. The Google search feature, on every page on these webs, allows you to search for any word or phrase on any one of the 12 web sites -- the search is very fast and helpful. Go to the one page that describes all the features of using the Google Search: <http://www.chelationtherapyonline.com/articles/google1.htm>
- Using the Google Search feature with the word "cholesterol" gives a very large number of link references on each of several webs. Take a look:
 - [A Google Search For "Cholesterol" On Heart-Disease-Bypass-Surgery Web Site](#)
 - [A Google Search For "Cholesterol" on the Oral Chelation Net Web Site](#)
 - [A Google Search For "Cholesterol" on the Oral Chelation Com Web Site](#)
- A special edition of The Wednesday Letter, about the change in the level of cholesterol considered to be

dangerous ^{Key to press} so that 36 million more Americans need ^{http://www.chelationtherapy.com/articles/p72.htm} drugs:

<http://www.oralchelation.com/wednesday/previous/2001/SpecialEdition21May2001.htm>

- Three of the Chapters in my Book, Life Flow One, The Solution For Heart Disease, deal with the cholesterol mysth -- they are partially quoted in this article, but the original and full details are available here:
 - [Section Two: Cholesterol](#) Chapter Three: Butter Vs. Margarine
 - [Chapter Four -- The Cholesterol Corruption](#)
 - [Chapter Five -- The Official Lie](#)
- There are more than 100 individual scientific studies about cholesterol on my web pages. They are mentioned in one of the above references, but they are so useful to the serious researcher that they warrant separate mention here. These are pages that can no longer be obtained in any of the current search engine, except on a very pain-staking one-at-a-time basis:
 - 100 Studies on Cholesterol: <http://www.oralchelation.net/data/Cholesterol/data11.htm> sdfsd
 - 56 Studies on Cholesterol: <http://www.oralchelation.net/heartdisease/ChapterFive/page5p.htm>
 - 200 Studies on Cholesterol: <http://www.oralchelation.net/data/Cholesterol/data11b.htm>
 - 100 Studies on Cholesterol: <http://www.oralchelation.net/data/Cholesterol/data11c.htm> ++

- [The VAP Test For Cholesterol -- Wonderfully Accurate For A Worthless Result](#)

[Forensic Chemist From New Zealand == contributes his further data.](#)