Study Confirms Red Yeast Rice Benefits

Before I started my training in neurology at Mt. Sinai Hospital in New York City in the early 1980s, I had completed three years of internal medicine at Temple University Hospital in Philadelphia. At part of my internal medicine training, I would read the most prestigious American journals for internists, those being the *New England Journal of Medicine*, the *Annals of Internal Medicine* and the *American Journal of Medicine*. If there was an article in one of these journals, you certainly had to take note.

Well, I certainly did take note earlier this week when I read a great study[1] published on the benefits of red yeast rice in the *Annals of Internal Medicine*. Researchers from the University of Pennsylvania School of Medicine studied the effects of red yeast rice in a group of patients with elevated cholesterol who had been on statin medication but had to stop the medication because of muscle pain. The study involved 62 patients with elevated cholesterol. Half of the group was randomly assigned to receive 1,800 mg of red yeast rice twice a day or a placebo pill twice daily for a total of 24 weeks. Concomitant with this supplement regimen, all of the patients participated in a twelve-week therapeutic lifestyle change program which included diet, exercise, relaxation techniques and so on.

At the end of twelve weeks, those patients supplemented with red yeast rice saw their LDL (bad cholesterol) drop by an amazing 43 mg from baseline and 35 mg at the end of the 24-week study. Those in the placebo group did notice a small decrease in LDL cholesterol by 11 mg and 15 mg, respectively. The results were statistically significant. Of importance, patients given the red yeast rice did not notice any increase in liver enzymes, weight loss or muscle pain compared to the placebo group. The authors concluded that a combination of red yeast rice supplementation and lifestyle change may be a safe option for those who cannot tolerate the statin drugs.

Although the study size was relatively small, the results were very important. I am not quite sure why the authors concluded that red yeast rice could be a treatment option for those who could not tolerate statins. I know that there are many people out there including medical doctors who are leery of drugs because of their very high prices and long list of side effects. I would ask the question if there is a safe, natural, inexpensive and effective option proven by controlled well done human studies, why not utilize it first? I would like to compliment ABC News for doing a great article and video on red yeast rice and also for mentioning another red yeast rice study indicating heart attack patients reduced their risk of heart attack by 45% after five years of use. Click here to see the article.

I chose to do some quick math by reviewing one of the top selling and rated red yeast rice extracts sold at Vitacost for $14.99 per 240 capsule bottle using a six cap, 3,600 mg total serving for $0.38 cents per day versus a website selling Lipitor at $124.99 for a 30 tablet serving. Lipitor is $4.17 per day, 11X (1,100% more expensive) compared to 3,600 mg of red yeast rice. You may say that you have insurance, Medicare or Medicaid so who cares, but you should. The reason is the high costs of health care and drugs are bankrupting our government both state and federal and many employers. Also the #1 reason for personal bankruptcy is health care expenses.

Obviously, I am not telling those who read this newsletter to stop taking their statin drugs such as Zocor or Lipitor in lieu of the red yeast rice, but certainly I would bring this article to the attention of their treating physician and ask about exploring natural options. I also strongly recommend you consume 200 - 400 mg of coenzyme Q10 (CoQ10) along with red rice yeast or statin drugs. CoQ10 is proven to benefit cardiovascular and neurological health

and statin drugs are proven to lower CoQ10 levels and this may be one of the reasons people have a risk of developing muscle and nerve pain. All cells in the body need CoQ10 and a lack of CoQ10 can kill muscle, heart, nerve and other cells.

A couple of weeks ago, I wrote a newsletter about the poor dietary habits of many Americans. I recently came across a study[2] regarding overweight children in this country that I want to share with you. The study was published a couple of weeks ago in the *International Journal of Behavioral Nutrition and Physical Activity*. The study involved more than 11,000 U.S. children and teenagers. Researchers found that compared to their healthy weight peers, overweight children between the ages of 6 to 11 years old generally ate a larger share of their daily calories after 4 p.m. Interestingly, the reverse was true among teenagers. Dr. Kranz, the lead researcher on this study, indicated that the quality of the child's diet and total calorie intake along with physical activity are really is what is most important in preventing childhood obesity. Dr. Kranz recommended that the parents help their children by teaching them healthy habits and giving them more "nutrient dense" foods like fruits, vegetables, beans and high fibers. All of these have relatively low calories but a great deal of nutrients.

Speaking of children, I would like to warn those who give their children certain drugs such as Adderall for ADHD about a recent study indicating a 740% higher risk of sudden death. I would strongly urge you to watch this ABC News video and read the article and forward it to everyone with children. It shocks me the FDA has not issued an immediate recall and ban on these drugs after this study was published. I give credit to ABC News again for covering this study and I quote them:

"In the study of 564 children and teens who died suddenly, researchers led by Madelyn Gould of the New York State Psychiatric Institute and Columbia University in New York City found that that those who died suddenly were 7.4 times more likely than not to have been taking the stimulant medications. The results of the study are reported online in The American Journal of Psychiatry." Click here to see the article.

Natural options to promote healthy neurological function in children include good nutrition such as multi-vitamins and foods without artificial colors, aspartame, MSG and other harmful chemicals. Healthy amount of omega-3 EPA and DHA fatty acids are essential. A diet with broccoli, wild caught salmon, nuts such as almonds, walnuts, etc and fruits such as organic berries, oranges, etc. are essential. Also eliminating sugar and corn syrup and increasing healthy amino acids and proteins is a very wise idea. I would ban soda from the home and encourage children to consume water or unsweetened tea by explaining to them soda causes muscle weakness, unhealthy weight, poor blood sugar, and also weakens their immune system.

There was a another great study[3] regarding nutrition just presented by Dr. Anthony Goldstone at the Endocrine Society's Annual Meeting in Washington, D. C. Dr. Goldstone found that people who skip breakfast actually have a greater likelihood of gaining weight. The study involved brain imaging performed in 20 non-obese, healthy people who were shown pictures of low calorie foods, such as fish, salads and vegetables and high calorie foods, such as pizza, cake and similar items. They were asked to rate how appealing these pictures were after having a filling breakfast or having no breakfast whatsoever.

Dr. Goldstone noted, "It may be when you miss meals, and particularly breakfast, your brain reward system is biased toward these high calorie foods over low calorie foods." Dr. Goldstone added that about 30% to 40% of people who are trying to lose weight do so by skipping meals in an attempt to lose weight. In actuality, this may hinder their attempts to

lose weight and may actually have the opposite effect. Dr. Goldstone noted that people who skip breakfast on a regular basis actually tend to be heavier and get more of their calories from fat and also tend to gain more weight than those who eat breakfast on a regular basis.

The study on red yeast rice just published in the *Annals of Internal Medicine* was incredible. Vitacost offers numerous red yeast rice products. I would read the reviews and compare prices to make a good choice.

I will say again that I recommend you consume 200 mg to 400 mg per day of CoQ10 with red yeast rice or statin drugs. CoQ10 is a great antioxidant and helps promote a healthy heart, nervous system function and healthy immune function. In terms of healthy breakfast foods, just do a search on Vitacost.com on the word "breakfast" and you'll come up with 439 different items, from Atkins Healthy Food Bars to Arrowhead Organic Cereals, Nature's Path, Mountain House and many other products, just to name a few. And don't forget the latest brand we offer called Best of All™, providing a selection of different nuts, fruits and seeds, many of which are organic and great tasting.

I would also again recommend vitamin D3 at 2,000 to 4,000 IU per day. There are so many studies indicating most children and adults have levels far below optimal and recent research indicates obese people have very low levels. Vitamin D3 may be the most important and least expensive supplement to take and a good multi such as NSI® Synergy will have at least 2,000 IU of D3 per daily serving. Make sure it is the D3 form as this is the most potent and active form. NSI just launched new vitamin D3 softgels and drops in 2,000 IU per drop for adults and children and for babies a 400 IU per drop. The drops version contains healthy olive oil for enhanced absorption. To view all 23+ varieties and versions of Synergy click here.

1. Becker DJ, Gordon RY, Halbert SC, et al., **Red Yeast Rice for Dyslipidemia in Statin-Intolerant Patients**, *Annals of Internal Medicine*, June 16, 2009, Pp 830 – 839.

2. Kranz S, et al., **Eating late in the evening is associated with childhood obesity in some age groups but not in all children: the relationship between time of consumption and body weight status in U.S. children** , *International Journal of Behavioral Nutrition and Physical Activity*, Published online May 21, 2009.

3. Goldstone A., **Fasting and Postprandial Hyperghrelinemia in Prader-Willi Syndrome Is Partially Explained by Hypoinsulinemia, and Is Not Due to Peptide YY3–36 Deficiency or Seen in Hypothalamic Obesity Due to Craniopharyngioma**, Endocrine Society's Annual Meeting, Washington, D. C.

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