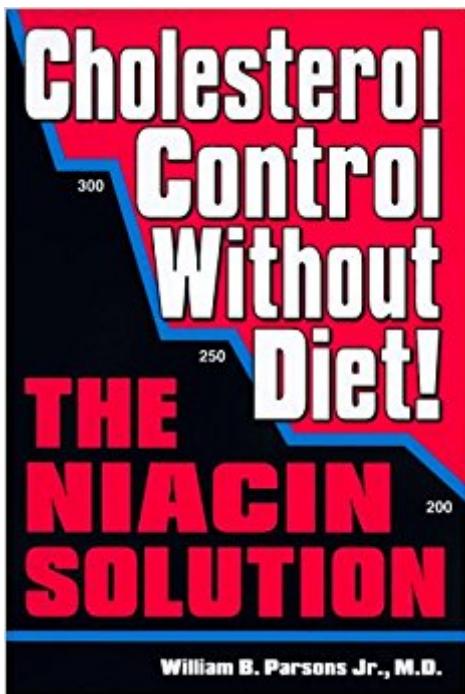


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# Cholesterol Control Without Diet!: The Niacin Solution



## Synopsis

2001 UPDATE: PAUL HARVEY STILL LIKES THIS BOOK! On his 2/14/01 newscasts, Paul Harvey again referred to CHOLESTEROL CONTROL WITHOUT DIET! THE NIACIN SOLUTION. He cited a recent report at the American Heart Association annual meeting in which a combination of niacin and simvastatin (Zocor) reduced heart attacks and other coronary events by 70% in a 3-year study of persons who already had coronary disease. Then he asked his listeners not to say that Paul Harvey said they didn't have to diet and should take niacin, but he told them to have their doctors watch the New England Journal of Medicine later this year for the report. He went on to say, "Meanwhile, YOU can read about the cholesterol matter in a book by Dr. William B. Parsons Jr." At this point he DID NOT give the book's title, sending listeners to their bookstores or to .COM with just the author's name. He was right in saying that the book is readable by the general public and gives its readers a handle on the cholesterol situation they have not had before. Here's the news release from which Mr. Harvey excerpted this item: **B-VITAMIN NIACIN IMPROVES RESULTS OF STATINS BY RAISING GOOD CHOLESTEROL.** Combination Reduced Coronary Events by 'Phenomenal' 70%. Niacin, a B-complex vitamin known as a cholesterol-reducing agent since 1955, greatly reduces heart attacks and strokes when used with "statin" drugs, according to two recent reports at meetings of heart specialists. Dr. Moti Kashyap (Long Beach, CA) and Dr. Greg Brown (Seattle) each studied niacin-statin combinations and found markedly better cholesterol results than with either drug alone. Both drugs lower bad cholesterol, which fell 45% in Kashyap's 800-patient VA study, but niacin also raises good cholesterol, which rose by 41%. Triglycerides, another hazardous blood fat, fell by 42%, also due to niacin. This study combined lovastatin (Mevacor) with niacin. In Brown's study, which followed 160 patients with coronary disease for three years, niacin plus simvastatin (Zocor) reduced coronary events by 70%. Earlier studies had shown that niacin and statin drugs used singly reduced such events by 25% to 35%. Artery x-rays showed that progression of narrowing in coronary arteries was "virtually halted," Brown announced. Dr. William Parsons (Scottsdale, AZ), a niacin proponent since he pioneered its use in US in the mid-1950's, called the reduction of events in Brown's study "truly phenomenal" because they were so much better than previous results with either drug alone. He pointed out that the statins reduce bad cholesterol, as niacin does, but niacin also raises good cholesterol, lowers triglycerides, and favorably changes several other cholesterol fractions, which no other form of treatment can match. The National Cholesterol Education Program teaches that persons with previous coronary events require stricter control of cholesterol than others. Publicity about Vice-President Cheney's previous heart attack, bypass surgery, and his recent stent placement has brought this to the public's

attention. Full results of the Kashyap and Brown studies will be published later this year. Experts predict that doctors and patients will then be seeking information about niacin. In his book, **CHOLESTEROL CONTROL WITHOUT DIET! THE NIACIN SOLUTION**, Parsons tells how to use niacin successfully and manage its side effects, including flushing of the skin early in treatment. He assures that a skillful doctor can minimize or prevent flushing by using time-release niacin and starting each day with a plain aspirin tablet for the first few weeks. It makes sense to start treatment with niacin because of its distinctive advantages, adding a statin only if niacin alone fails to control bad cholesterol adequately, Parsons advised. There is a major difference in expense, niacin costing \$9 to \$12 a month, compared to \$50 to over \$300 a month for the widely advertised statins. In recent years the US market for statins has been \$7 to \$8 billion annually.

## **Book Information**

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## **Customer Reviews**

In a new book, William B. Parsons Jr., MD tells why niacin, a drug whose use for cholesterol control he pioneered more than 40 years ago, is really a "designer drug" for this purpose. Niacin, unlike other drugs in this field, does everything right. It reduces bad cholesterol, increases good cholesterol, lowers triglycerides, and has favorable effects on several recently discovered components of blood cholesterol. No other drug does all these things, or even the first two. Best of all, niacin does all this in the presence of an ordinary American diet. Dr. Parsons calls his book, **CHOLESTEROL CONTROL WITHOUT DIET! THE NIACIN SOLUTION**, a wake-up call to the public and the media. When most people hear "choelsterol," they think "diet" because advocates of

diet have brainwashed the media, which in turn has brainwashed the public, including the medical profession, he contends. This book shares the author's long experience in research and use of niacin in medical practice. "Although available without prescription, niacin is not a do-it-yourself drug; it requires knowledgeable medical supervision," the book repeatedly emphasizes. Parsons says that if every doctor were good at using niacin, more than 90% of patients with cholesterol problems could have the drug's distinctive advantages at a cost one-sixth to one-tenth the cost of the expensive "statins," the best-selling cholesterol control drugs. Dr. Parsons has studied niacin since 1955, his final year of internal medicine training at the Mayo Clinic in Rochester, Minnesota. Following up on preliminary findings of Canadian doctors, he conducted the firstg systematic study of niacin's effects, which showed that it lowered bad cholesterol and raised good cholesterol without diet.

This book contains a wealth of information about preventing heart attack and stroke, not limited to cholesterol control--although that is its main thrust. As in the first edition, it teaches that diet has so little to do with your cholesterol level that we might as well say it has nothing to do with it. The problem is that you inherited a body factory that produces too much bad (LDL) cholesterol, not enough good (HDL) cholesterol, or to much triglyceride. Total cholesterol is essentially irrelevant; you and your doctor need to know and manage all of those fractions. To change the body factory requires medication. The best medication is niacin, which does everything right (lowers LDLC, triglycerides, and Lp(a)--"the heart attack cholesterol"--while raising HDLC. The widely advertised, expensive statin drugs do only one thing well--reduce LDLC. Statin drugs had, until 2001 (no later figures available) caused 112 deaths in the US and resulted in withdrawal of one such drug (Baycol) from the market. Statins do this by causing rhabdomyolysis ("dissolving of muscles"), with circulating myoglobin then blocking the kidneys, causing kidney failure. The muscle pains that often accompany statin use are warning signs to stop those drugs. Read the fine print or listen closely to the fast talk at the end of commercials, then decide whether the statin manufacturers are trying to sweep these hazards udner the rug. Some experts think statins may, in time, prove to cause cancer, based on the fact that they all cause cancer in animals. Niacin has a safety record dating to the 1950's, when the author pioneered its use at the Mayo Clinic.

This expanded, updated paperback 2nd edition has all the truths of the 1998 hardcover and much more. These truths include:<sup>\*</sup> Diet has so little to do with one's cholesterol level that we might as well say it has nothing to do with it.<sup>\*</sup> It's all right to eat eggs and lean red meat.<sup>\*</sup> TOTAL cholesterol level

is irrelevant; you need to know BAD and GOOD levels, plus triglycerides levels.\* If diet helps at all, it does so only during periods of weight reduction. Diet reduces GOOD cholesterol as much as it lowers BAD cholesterol!\* To change the body factory (which determines your cholesterol levels), requires medication. NIACIN is the best. It does everything right: lowers bad cholesterol, raises good cholesterol levels, lowers triglycerides, reduces Lp(a) (nicknamed "the heart attack cholesterol," especially in women), and produces favorable changes in bad and good cholesterol subfractions.\* The best-selling statin drugs do only one thing well: reduce bad cholesterol.\* Statins have caused at least 112 deaths in US and more worldwide. The first statin reached the US market in 1987, the others in the 1990's. Some experts think statins may cause cancer, as all of them do in animals, and that it will take more time for this to appear. (Tobacco and asbestos take 20-40 years.)\* Statins cause myopathy ("something wrong in muscles"), varying from mild aching to actual dissolving of muscles fibers. The latter can lead to kidney failure and death. If muscle aching occurs, the patient should stop the statin and contact his doctor promptly. Statin ads hide this warning in the small print or the fast talk at the end of expensive TV ads.\* Niacin has a safety record dating to 1956.

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