

# THE TRUTH ABOUT STATINS



**WHY YOU SHOULD AVOID THESE  
DANGEROUS DRUGS**

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## Chapter

# 1

# Statins: An Increasing Issue

### **What Are Statins?**

Statins are a group of medicines that are frequently prescribed to help lower the level of low-density lipoprotein (LDL) cholesterol in the blood. According to the Cleveland Clinic, statins are prescribed to millions of people to get their high cholesterol under control. <sup>1</sup> *Millions.*

### **So what is it that statins do?**

Statins decrease your LDL or bad cholesterol and may increase your HDL or good cholesterol. LDL is “bad” because it can cause plaque build-up inside your arteries. HDL brings cholesterol to your liver, which gets it out of your body.

### **How do statins work?**

Statins interfere when your liver is trying to make cholesterol. Like a good soccer player who doesn't let an opponent get the ball, statins don't let your liver have an enzyme it needs to create cholesterol. And while your body makes a large portion of your cholesterol, the rest comes from what you're eating.

## **Scary Complications of Statins (weighing the risks)**

No matter where you look on the internet you will find contradicting information about statins. There are even studies that contradict the warning labels on the statin prescription themselves that were placed there by the FDA.

So after extensive research, and following the science, I've compiled a list of data-driven risks related to statins.

### **Muscle pain and damage**

One of the most common complaints of people taking statins is muscle pain. You may feel this pain as a soreness, tiredness, or weakness in your muscles. The pain can be mild discomfort, or it can be severe enough to make your daily activities difficult.

Studies have found that nearly 30 percent of people stopped taking the pills because of muscle aches.

It is however very rare that statins can cause life-threatening muscle damage called rhabdomyolysis. Rhabdomyolysis can cause severe muscle pain, liver damage, kidney failure, and death. The risk of these very serious side effects is pretty low and calculated in a few cases per million people taking statins.

### **Liver damage**

It's reported that statin use can cause an increase in the level of enzymes that signal liver inflammation. If the increase is only mild, medical professionals say that you can continue to take the drug. If the enzyme level increase is severe, your doctor will talk to you about other options (you may need to try a different statin).

Your doctor may order a liver enzyme test before or shortly after you begin a statin regime just to have a base level on file. Symptoms to look out for are fatigue, weakness, loss of appetite, pain in your upper abdomen, dark-colored urine, or yellowing of your skin or eyes.

### **Increased blood sugar or type 2 diabetes**

It's possible your blood sugar level may increase while taking statins. This can lead to developing type 2 diabetes. This is a risk the Food and Drug Administration (FDA) found important enough to include on statin labels.

## **Neurological side effects**

Another warning the FDA issued on statin labels is that some people have developed memory loss or confusion while taking the medication. These side effects do reverse once you stop taking statins, although that isn't usually recommended.

Some people may be at a greater risk than others for side effects while taking statins. These include people:

- Taking multiple medications to lower your cholesterol
- Being female
- Having a smaller body frame
- Being age 80 or older
- Having kidney or liver disease
- Drinking too much alcohol
- Having certain conditions such as hypothyroidism or neuromuscular disorders including amyotrophic lateral sclerosis (ALS) <sup>2</sup>

Now oddly enough, grapefruit juice contains a chemical that can interfere with the enzymes that break down statins in your digestive system. So if you're a regular grapefruit drinker you should talk to your doctor about that too.

And last but sadly not least, there are many drugs that may interact with statins. Be sure your doctor is aware of all the medicines you take and talk to your pharmacist as well just to be safe.

Now you might be wondering why anyone would take statins with all this risk associated with them. You're not alone. There's a reason so much contradicting information is available. Chaos.

## **Myths About Statins**

It's no surprise that we're inundated with opinions from everyone at all times. There seems to be an expert in everything and none of them have the same views. To alleviate the confusion we've compiled the most common myths and the facts behind them from a variety of scientific research.

### **Myth 1: Statin Side Effects Don't Affect A Large Portion Of People**

According to one study <sup>3</sup>, about 10% of people in the U.S. suffer muscle pain, weakness, or cramping after taking a statin. This means that just about three to four million Americans are unable to tolerate statins, because of muscle aches and related side effects, including potential muscle damage.

Another study from 2016 published in JAMA at the beginning of April confirmed that these patients have a condition known as "statin intolerance." <sup>4</sup>

That's just the statistics on ONE of the above-mentioned side effects.

### **Myth 2: Taking statin drugs leads to diabetes**

Well yes and no. In clinical trials, statins do appear to accelerate adult-onset diabetes because they cause a slight elevation in blood sugar. For those who are borderline diabetic, the mild increase in blood sugar can lead to a diabetes diagnosis about five weeks earlier than it would be otherwise.

### **Myth 3: You could get cataracts from taking statin drugs**

Some studies have concluded that there can be a relationship between statin drugs and an increased risk of developing cataracts. These empirical studies have been conducted on animals and humans.



#### **Myth 4: Statins reduce cardiovascular disease risk**

Fortunately, there has been a decline in deaths from heart disease over the last half a century, but it is hard to attribute this to statins. The largest reductions occurred before their widespread use. <sup>5</sup>

# Chapter 2

# The Big Pharma Conspiracy

## The Hunt For A Cure

According to statista.com, the United States spends more on health care than any other country. Annual health spending was **over four trillion U.S. dollars** in 2020, and personal health care expenses totaled 10,202 dollars per resident. <sup>6</sup>

Think about how much your household spent on medications, office visits, and lab work last year (or last month). And for what? How long will this continue? Even if your cholesterol levels are lower, you have to maintain those prescribed medications.

So even with all the millions of dollars spent on research, scientific case studies, and medical advancements...once you're on statins, you can't get off. Why do you think that is?

I hope your wheels are turning.

## How Big Pharma Cashes In

Once prescribed statins, you usually have to continue taking them for life because if you stop taking them, your cholesterol will return to a high level within a few weeks. Isn't that something!

Now we all know that research points to a well-balanced diet and regular exercise as the best way to reduce the risk of many health conditions. But diet and exercise don't make billions.

Between January 1, 2002, and December 31, 2018, an average of 21.35 million statins (95% CI, 16.7-25.5 million) were purchased annually, with an average total annual cost of \$24.5 billion. <sup>7</sup>

What's unbelievable is that a study from the University of Illinois at Urbana-Champaign <sup>8</sup> suggests that statins tend to make exercise more difficult and less beneficial. In this study, lab mice that were given the drug lagged far behind the statin-free mice in distance traveled *and* saw their energy and strength decline.

Lead study author Marni Boppart, a professor of physiology, believes the findings are significant. "The results from this study suggest that statins may reduce the desire to participate in a voluntary or prescribed exercise training program," she told the New York Times. <sup>9</sup>

So while it may be difficult to motivate yourself to exercise in the first place, statins may be making it even more difficult or impossible.

### **Statins: There's a Pill For That**

Statins are among the few drugs that have consistently been endorsed <sup>10</sup> by distinguished panels of scientists and physicians. The problem here is that both doctors and patients have focused on medication without paying enough attention to certain remedies that could do so much more for their health.

It's said time and time again, that regular exercise, a well-balanced diet, and not smoking cigarettes can reduce the risks of poor health.

Sadly, the most optimistic estimates say that taking a statin could add a year to the average person's life expectancy, while not smoking could add nearly 10 years. Plus quitting increases life expectancy <sup>11</sup> by reducing the chances of emphysema, cancer, and heart disease.

Does your doctor ask routinely if you smoke cigarettes, exercise regularly, or eat a healthy diet? These simple questions could add years to your life.

## Chapter

## 3

# The Truth Behind Statins

In the first chapter, we talked about what statins are and the different risks associated with them. We also learned that some empirical studies have shown statins to reduce the desire/motivation to exercise and that Big Pharma has been cashing in on these medications to the tune of billions of dollars.

You might be feeling like someone's pulled the wool over your eyes right now, and that's understandable. But don't worry, as soon as you learn the truth about statins, the solution will seem relatively easy.

So what can you do about the risk of taking statins? We're discussing that next.

### **The Truth About Statins**

Statins come with a wide variety of controversy and debate. It can be difficult to determine if statins are prescribed with science and fact, or just because the medical world believes in treating the symptoms and not the root cause. Either way, the risk of side effects is scary enough to dig further.

Remember when I said that close to 40% of the US population is recommended to be on statins? Well, in actuality a lot of people don't need statins because they're considered low risk for heart attack or stroke. Statin use is intended for people at high risk of heart disease. And here's where we need to do some digging- using the American Heart Association's heart disease risk calculator comes with a separate set of problems.

This widely used calculator is endorsed by the American Heart Association and the American College of Cardiology. The factors that go into the calculations include the familiar warning signs like high blood pressure, high cholesterol, diabetes, and cigarette smoking. And here's the issue- age and gender outweigh everything else.

This formula is supposed to estimate an individual's risk of having a heart attack or stroke during the next decade. High risk is defined as a risk greater than 7.5%. But is this accurate? One study <sup>12</sup> of more than 300,000 adults predicted that 8.7% of high-risk individuals would have a heart attack over the next five years. But only 1.8% of them did. The standard calculator recklessly overestimates risk. <sup>13</sup>

And what about the confusion that statins do or do not cause muscle damage?

Well, in a study <sup>14</sup> conducted in 2016, scientists tested the impact of exercise on statin-associated skeletal muscle myopathy (a disease that affects the muscles that control voluntary movement in the body).

The purpose of this study was to examine the influence of exercise on statin toxicity in high blood cholesterol mice.

The study concluded that two weeks of statin treatment "can significantly impair muscle function, as evidenced by decreased running wheel activity, voluntary grip strength, and maximal isometric force, as well as increased fatigue." <sup>14</sup>

And to further the point, in 2019 Kussin Clarissa reported on a controversial study that found that high cholesterol does not shorten life span and that statins are essentially a "waste of time," according to one of the researchers.

This study reviewed research of almost 70,000 people and found that elevated levels of "bad cholesterol" did not raise the risk of early death from cardiovascular disease in people over 60. <sup>16</sup>

Naturally, the paper caused quite a stir and its conclusions were dismissed by other experts in the field. If you're asking yourself why, you're on the right track. See, one in four Americans over the age of 40 take statins and the drug accounts for more than \$20

billion in spending each year. A study that concludes statins may be overprescribed...could cost Big Pharma a lot of money if it were supported.

So what does all this mean to you?

While there's some confusion if statins may or may not lower cholesterol, what can be agreed upon is that they don't do is address the underlying cause.

For instance, a large majority of people who have heart attacks have normal cholesterol. In other countries where people have higher cholesterol than Americans, they also have less heart disease. In truth, low cholesterol in elderly patients is linked to a higher risk of death compared to high cholesterol.

If you're concerned for yourself or someone you know, start by incorporating an anti-inflammatory diet, release feel-good endorphins on a regular basis through exercise, and identify the root causes of your inflammation.

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