



What to do against high cholesterol and / or increased triglyceride levels

(are usually the result of unfavorable eating habits and lack of exercise)

In addition to low-fat diet and physical activity, you can influence your cholesterol levels favorably: 2-3 salmon oil capsules (EPA-omega-3 fatty acids) daily increase the "good" HDL cholesterol, but have no lowering effect on the "bad" LDL cholesterol. However, LDL cholesterol can be very well lowered with isoflavones (**3 red clover isoflavone capsules**) - these also provide hormonal balance in women and protect against breast cancer.

If the blood lipid levels of the patient do not improve after three to six months of diet and dietary supplementation, medications can be used in parallel with nutritional therapy.

However, not every patient responds equally well to a change in diet. The level of cholesterol reduction in the blood, which can be achieved by a consistent dietary change to a low-fat diet, varies greatly from one individual to another, averaging between 15 and 25%. The maximum cholesterol reduction is evident after a few months of low-fat diets. For most patients, dietary change measures mean drastic changes. Intensive dietary advice by nutritionists and/or the doctor is usually necessary to achieve a permanent change in dietary habits.

If cholesterol levels are too high, excessive obesity should be reduced and normal weight should be sought. In addition, the lipid-lowering diet is the most important therapy measure based on the following four points:

1. fat intake shall be reduced to 30% of the total energy intake, with a maximum of 7 to 10% of the energy saturated fatty acids

Lowering the total fat intake and lowering the intake of saturated fats also reduces cholesterol intake, as cholesterol is present in the high-fat foods of animal origin together with saturated fat. Saturated fatty acids therefore increase cholesterol levels in the blood. Cholesterol itself also causes cholesterol levels in the blood to rise but not as strongly as saturated fats. This may sound surprising, but it is related to the complicated regulation mechanisms in the body.

You can reduce the total fat intake and intake of saturated fat by:

- **Swap high-fat meats and high-fat sausages for lean cuts of meat and low-fat sausages. Also whole milk and cream-containing dairy products as well as high-fat cheeses against lean or low-fat dairy products and cheeses.**
- **Use the spread, cooking and frying fats only to a limited extent, without butter, lard, bacon and coconut fat. Chemically hardened vegetable fats are not recommended because of their cholesterol-enhancing trans fatty acid content, which also lowers HDL levels. As the main source of**
- **Trans fatty acids are industrially hardened or partially hardened fats, which are mainly used for margarine or for baking and frying fats.**

- **Prefer low-fat preparations such as steaming, cooking in foil, grilling or using special cookware such as .B coated pans.**

Fatty fish are an exception: mainly herring, mackerel, salmon and tuna (not applicable to eel) contain only low saturated fatty acids, but are rich in unsaturated omega-3 fatty acid. Omega-3 fatty acids counteract an increase in triglyceride and cholesterol levels and are considered to be preventative against atherosclerosis. **Good effects can be achieved by taking salmon oil capsules.**

2. the proportion of monounsaturated and polyunsaturated fatty acids in the fat intake is increased

It is ideal if half of the total fat intake is in the form of monounsaturated fatty acids and a quarter is absorbed as polyunsaturated fatty acids. Multiple and monounsaturated fatty acids lower cholesterol levels. Vegetable fats contain these fatty acids and no cholesterol. Rapeseed and olive oil in particular are suitable for lipid-lowering diets due to their excellent fatty acid composition.

3. Increased intake of complex carbohydrates and fibre

Not only the amount and selection of fats can lower cholesterol levels, but also a carbohydrate- and fiber-rich diet has a positive effect. **Here also flea seed shells have proven themselves.** More than half of the energy absorbed should be carbohydrates. This can be achieved through a high-fibre mixed diet with cereal whole grains, vegetables, legumes, potatoes and fruit, all of which are low in fat. Soluble fiber also has a cholesterol-lowering effect by influencing bile metabolism. They bind bile acids in the intestine, which are then excreted with the stool. The body then forms new bile acids, for which it uses cholesterol. Soluble fibre is contained in oat products, legumes and pectin-rich fruits such as apples, pears and berry fruit.

4. The amount of cholesterol ingested daily is less than 300 mg

It is unnecessary to calculate the cholesterol content of the daily diet. The importance of food cholesterol has long been overstated. This is also reflected in the still frequently expressed recommendation to adhere to a "low cholesterol diet". It is more correct to aim for a low-fat diet, as fat reduction is the key measure to lower blood cholesterol levels. Since most animal foods with a high content of saturated fats have a high cholesterol content at the same time, the reduction of saturated fats and cholesterol is practically parallel. Care should only be taken to avoid particularly high-cholesterol foods such as eggs or innards as far as possible.

Those who use the variety of foods, eat varied and full-fledged foods, can meet their nutritional needs with conventional foods and also avoid diet-related diseases. Therefore, dietary supplements are usually superfluous. For certain diseases, disabilities and dietary styles, in adolescents, in particular stresses such as competitive sports, in the desire to have children, in pregnancy and lactation, in older age and in intolerances, a dietary supplement may be useful. The consumption analysis of the Federal Government regularly finds certain deficiencies in the population. This affects: folic acid, vitamin D, calcium and omega-3 fatty acids.

Taking dietary supplements can fill gaps and should be individually coordinated with your doctor or nutritionist.