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# WebMD<sup>®</sup> TAKE CONTROL

FALL 2023

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TAKE STEPS TO CONTROL  
YOUR CHOLESTEROL  
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# QUESTIONS TO ASK

Use this guide to better understand your cholesterol status and options.

*Can you help me understand my cholesterol profile in more depth?*

*Should I get advanced lipid testing (fractionated cholesterol testing)?*

*What are my treatment options beyond statins?*

*Are there new or emerging treatments for high cholesterol I should know about?*

*What kind of specific exercises will improve my heart health at my age and fitness level?*

*Which diet should I try to help improve my cholesterol levels?*

*Are there nutraceuticals that could help lower my cholesterol or risks like high blood pressure?*

*If so, should I take these in combination with medications?*

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# STATS & FACTS

By Sonya Collins

Reviewed by James Beckerman, MD, WebMD Medical Reviewer

**28**  
million



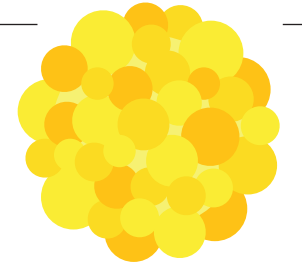
Number of U.S. adults with "high cholesterol"—over 240 mg/dL.

**100 mg/dL OR LOWER**

Goal of LDL ("bad") cholesterol for someone who has cardiovascular disease.

**191 mg/dL**

Average cholesterol level of U.S. adults over age 20.



**65 million**

Estimated number of U.S. adults eligible to take cholesterol-lowering statins.

**5 in 11**

Number of eligible U.S. adults who take cholesterol-lowering statins.

**1x** IN 4 TO 6 YEARS

How often you should have your cholesterol checked.

**2 in 3**

Number of U.S. adults who have had their cholesterol checked in the last 5 years.



**60 mg/dL OR HIGHER**

Ideal level of HDL ("good") cholesterol.

SOURCES: CDC, Cleveland Clinic, National Cholesterol Education Program, *Journal of the American Heart Association*





## OLDER ADULTS AND HIGH CHOLESTEROL: WHAT TO KNOW

TAKING STEPS TO CONTROL YOUR CHOLESTEROL CAN HELP YOU LIVE A LONGER, HEALTHIER LIFE

By Kendall K. Morgan

Reviewed by Brunilda Nazario, MD, WebMD Chief Physician Editor, Medical Affairs

Cholesterol tends to go up with age. Your high cholesterol also makes related health problems more likely as you get older. The first goal of lowering your cholesterol, according to Pei Chen, MD, a geriatrician at University of California San Francisco Health, is to stop cardiovascular or other health conditions before they start.

“For people who’ve had no major cardiovascular disease or heart attack, we’re talking about the prevention of vascular issues in the future,” Chen says. “We have more and more evidence showing that the lower the cholesterol [is], the better.” That goes for both total cholesterol and low-density lipoprotein (LDL) or “bad” cholesterol, she adds.

### WHAT IF YOU’VE GOT HEART DISEASE?

“The picture changes quite a bit once you’ve developed heart disease—whether it’s a history of heart attacks, heart failure, or coronary artery disease where there is a lack of blood flow to the heart,” Chen says. “People who have those conditions must be even more diligent in terms of making sure their cholesterol is better controlled.”

Taking steps to lower your cholesterol—through a combination of healthy

lifestyle changes and medication—is an important way you can improve your overall odds for living longer, she says. It also can help you to avoid major health events, including an additional heart attack or stroke.

### YOUR GOLDEN YEARS

Chen says by the time you reach your 75th birthday, it’s important to talk to your primary care doctor or specialist about your health goals to ensure your cholesterol-lowering treatment regimen is working optimally for you. For this age group, Chen recommends an individualized plan based on your health, values, and preferences.

What’s best at this stage may depend on medications you’ve tried and how you responded to them. You may need to consider other aspects of your health and any medicines you’re taking for other conditions. When a person also has dementia, Chen says, “it’s very important to me to know what type of dementia it is.”

### SEIZE THE DAY

Vascular dementia can develop after a stroke blocks an artery to your brain. High cholesterol is one of many factors that increase your risk for this type of dementia. Getting your cholesterol levels better controlled will help to lower vascular risks that could make vascular dementia worse, Chen says.

The bottom line when it comes to controlling your high cholesterol as you age is: Don’t delay. “From a prevention perspective, the earlier you start, the better,” Chen says.

### TRY THESE

Along with cholesterol-lowering medicines, these steps can help you improve cholesterol at any age:

- + Eat less salt.
- + Eat less saturated fat from animals and more healthy plant-based fats.
- + Stick to a healthy weight.
- + Exercise daily.
- + Manage stress.
- + Stop smoking.
- + Drink less alcohol.

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# THE STRUGGLE TO LOWER YOUR BAD CHOLESTEROL



CAN FEEL  
OVERWHELMING



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GO FROM STRUGGLE TO

CHOLESTEROL SUCCESS  
WITH LEQVIO®



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need help lowering their bad cholesterol (LDL-C).

PROVEN TO LOWER  
**BAD CHOLESTEROL**  
BY **50%** AND KEEP  
IT LOW\*

**2 DOSES  
A YEAR**  
AFTER 2 INITIAL DOSES

\*People given LEQVIO lowered their bad cholesterol (LDL-C) more and kept it low during each 6-month dosing interval vs placebo (a substance that doesn't contain any medication).

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**LEQVIO®**  
(inclisiran) injection  
284 mg/1.5 mL

**WHAT IS LEQVIO?**

LEQVIO (inclisiran) is an injectable prescription medicine used along with diet and other cholesterol-lowering medicines in adults with high blood cholesterol levels called primary hyperlipidemia (including a type of high cholesterol called heterozygous familial hypercholesterolemia [HeFH]) to reduce low-density lipoprotein (LDL-C) or "bad" cholesterol.

**IMPORTANT SAFETY INFORMATION**

The most common side effects of LEQVIO were: injection site reaction (including pain, redness, and rash), joint pain, and chest cold.

These are not all the possible side effects of LEQVIO. Ask your health care provider for medical advice about side effects. You are encouraged to report negative side effects of prescription drugs to the FDA. Visit [www.fda.gov/medwatch](http://www.fda.gov/medwatch) or call 1-800-FDA-1088.

**Brief Summary of Prescribing Information  
on adjacent page.**

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## BRIEF SUMMARY OF FULL PRESCRIBING INFORMATION LEQVIO® (INCLISIRAN) INJECTION, FOR SUBCUTANEOUS USE

### What is LEQVIO?

LEQVIO is an injectable prescription medicine used along with diet and other lipid-lowering medicines in adults with high blood cholesterol levels called primary hyperlipidemia (including a type of high cholesterol called heterozygous familial hypercholesterolemia) to reduce low density lipoprotein (LDL) or bad cholesterol.

It is not known if LEQVIO is safe and effective in children under 18 years of age.

### Before you start taking LEQVIO, tell your health care provider about all your medical conditions, including if you:

- are pregnant. Tell your health care provider right away if you become pregnant while taking LEQVIO. You and your health care provider will decide if you should take LEQVIO while you are pregnant.
- are breastfeeding or plan to breastfeed. It is not known if LEQVIO passes into your breast milk. You and your health care provider should decide if you will take LEQVIO or breastfeed.

### Tell your health care provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements.

Know the medicines you take. Keep a list of them to show your health care provider and pharmacist when you get a new medicine.

### How should I take LEQVIO?

LEQVIO is an injection under the skin (subcutaneous), given by your health care provider, initially, again at 3 months, and then every 6 months (twice yearly).

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### What are possible side effects of LEQVIO?

**The most common side effects of LEQVIO include** injection site reaction (including pain, redness, and rash), joint pain, and chest cold.

These are not all the possible side effects of LEQVIO. **Call your health care provider for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.**

### General information about the safe and effective use of LEQVIO.

Medicines are sometimes prescribed for purposes other than indicated. Do not use LEQVIO for a condition for which it was not prescribed.

This Patient Information leaflet summarizes the most important information about LEQVIO. If you would like more information, talk with your doctor. You can ask your doctor or pharmacist for information about LEQVIO that is written for health professionals.

For more information, go to [www.LEQVIO.com](http://www.LEQVIO.com) or call 1-833-LEQVIO2 (1-833-537-8462).

### What are the ingredients in LEQVIO?

- **active ingredient:** inclisiran sodium
- **inactive ingredients:** water for injection, sodium hydroxide and/or phosphoric acid



# HEART-HEALTHY DIETS

## EXPLORE WHICH ONE MAY BE RIGHT FOR YOU

By Sonya Collins

Reviewed by James Beckerman, MD, WebMD Medical Reviewer

When you have high cholesterol, your doctor may recommend changes in the way you eat. Here's a look at some diets that can improve your heart health.

### A BALANCED, HEALTHY DIET

For some people, the best bet is just to make healthy choices overall.

"Family physicians recommend eating a balanced, healthy diet to reduce risk of serious illness, such as heart disease and stroke. This includes eating a variety of fruits, vegetables, whole grains, and healthy fats," says Jennifer L. Brull, MD, a family doctor in Plainville, KS, and a fellow of the American Academy of Family Physicians.

Others may want a more specific diet to follow rather than broad, general

recommendations. If that sounds like you, read on.

### THE MEDITERRANEAN DIET

Research shows it may lower your risk for heart disease and stroke. The foundation is plant-based foods, including whole grains, vegetables, legumes (think beans, peas, and lentils), fruits, nuts, and seeds. Olive oil, rather than butter, is the main source of fat. Meat protein, in moderation, comes from fish, seafood, and poultry. You'll eat low-fat dairy in moderation, too. Red meat and sweets are only for rare occasions.

### THE DASH DIET

DASH (Dietary Approaches to Stop Hypertension) can lower LDL ("bad")

cholesterol and blood pressure.

Just like the Mediterranean plan, DASH emphasizes plant-based foods, healthy fats, and lean meat. Here are a few other guidelines: Choose foods high in potassium, calcium, magnesium, fiber, and protein. Limit full-fat dairy, saturated and trans fats, sweets including sugar-sweetened beverages, and salt. Aim for no more than 2,300 milligrams of sodium per day, but try to go as low as 1,500.

### THE NORDIC DIET

Like the others, the Nordic plan emphasizes complex carbohydrates found in whole grains, vegetables, and fruit and leans toward fish over other meat proteins. Just a couple of differences: Berries are the preferred fruit, and Nordic eaters go for canola oil over olive oil.

Research shows the diet can lower your cholesterol and your blood sugar.

### A VEGETARIAN DIET

Vegetarians emphasize fruits, vegetables, and whole grains. They cut out meat entirely.

When you drop meat, you take a major source of fat out of your diet. Instead, you fill up on fiber-rich, plant-based foods. Fiber helps your body fight high cholesterol and keeps you satisfied longer. This may mean you eat less and lose weight. The extra fruits and vegetables add antioxidants, which help protect against heart disease.

Vegetarians eat eggs and dairy. Vegans do not. But research doesn't necessarily suggest that you need to go as far as becoming vegan to improve heart health.

## EAT WELL

Heart-healthy diets share these ingredients. Learn where to find them.

#### + WHOLE GRAINS

Brown rice, whole wheat bread, oatmeal.

#### + HEALTHY FATS

Avocados, olive oil, fatty fish like salmon and mackerel.

#### + HIGH FIBER

Whole grains, berries, legumes.

YIPENGE/VIA GETTY IMAGES



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Schedule  
Doctor  
Appt.

## MY LIFE WITH HIGH CHOLESTEROL

### HERE'S HOW I'M TAKING CONTROL

By Michele Noma

Reviewed by James Beckerman, MD, WebMD Medical Reviewer

When I got the news my cholesterol levels were high 10 years ago at my annual physical, I wasn't surprised by the numbers, but I was surprised by the timing. Both sides of my family genetically predispose me to high cholesterol, so I knew I had a higher chance of it hitting me at some point in life, but I didn't think it would happen at age 37.

But after having kids a few years prior, exercise had become less of a priority for me, and a desk job was keeping me sedentary. My health was going in the wrong direction. So my levels were up.

#### MAKING CHANGES

My doctor told me that she thought diet and exercise could manage the problem, so I worked on creating new habits. I drastically reduced the amount of red meat I bought for our family and cut out processed meats entirely. We dialed down the amount of rice we eat, which wasn't easy—it's a staple in our home! But overall, we moved toward greener and leaner choices.

Unfortunately, my numbers never really leveled off, even though I was moving more and eating differently. They'd go down for one visit and be up the next. At my most recent physical this year they were up again, and so my doctor started a conversation about trying medical treatment.

#### MOVING TO MEDS

My doctor explained that my family history of high cholesterol combined with the fact that I was approaching 50 made me a prime candidate for cholesterol-lowering medications. She sent me to get a CT scan to check for calcification around my heart, which was thankfully clear, and then I got a prescription for a statin.

The first one I tried wasn't a good fit for me. It made me so tired; I couldn't wake up in the morning. So my doctor switched me to another, and it's been fine. Being on meds has taken away some of the anxiety I've had about my health because even though I know I'm getting older, I'd like to be doing the best I can not to accelerate any problems.

#### PASSING DOWN GOOD HABITS

When we started modifying our family diet, it opened the door for conversations with our kids about how high cholesterol runs in our

family. We talk about healthy nutrition and how that plays a part.

My daughter is a competitive swimmer, so I often talk to her about what kinds of foods are healthy fuels for her body. My son and I recently had a conversation about what the recommended daily allowance of sugar is and how quickly that gets blown with just one candy bar.

They're still young, and I think about their long-term health and mine. I don't want to get sick and not be able to care for them as they age. I want to experience them as they grow.



#### MICHELE'S TIPS

- + **LISTEN TO YOUR DOCTOR**  
Lean on them for tips and guidance.
- + **DO WHAT YOU CAN**  
Make one healthier choice, and then try another.
- + **TALK TO YOUR FAMILY**  
You can all start new habits together.

JULINICHOLS/VIA GETTY IMAGES; INSET PHOTO COURTESY OF REBEKAH CHAVEZ WYNN

WUNDERVISUALS/VIA GETTY IMAGES



## MONEY, MONEY, MONEY

### LOW-COST OPTIONS TO TREAT HIGH CHOLESTEROL

By Kendall K. Morgan

Reviewed by Brunilda Nazario, MD, WebMD Chief Physician Editor, Medical Affairs

While you may want to lower your cholesterol, you might also worry what it will cost you. Remember that a primary aim of lowering your cholesterol is to help you avoid even more costly health complications such as a heart attack or stroke down the road. Low-cost treatment options are also the most likely first step.

"The beautiful thing about cholesterol and preventive health is that some of the most important treatments are not even pharmacologic," says Joshua W. Knowles, MD, a cardiovascular specialist at Stanford Health Care in Palo Alto, CA. "For cholesterol especially, it's critically important to eat a diet that's low in saturated fat and high in fruits and vegetables and low-fat dairy. That's a bona fide treatment. The data shows

that eating that kind of diet is successful for many people."

Exercise and weight loss also can improve your lipid profile, even if cholesterol doesn't budge as much. Maintaining a healthy weight is still an important and low-cost way to improve your overall health when you have high cholesterol, Knowles says.

#### TRY GENERICS

Statins are the most common medicines used to lower cholesterol, and you'll have many of them to choose from. Despite what you may have heard, the evidence shows that most of them also work well to cut cholesterol with few side effects. Studies have also shown that muscle pain once thought to be linked to

statins is just as likely when people take a placebo pill with no medicine in it. And they aren't costly, either.

"We're lucky that [many] statin medications are now available as generics," Knowles says. Statins have been a mainstay of treatment for high cholesterol for decades, and you can now get them for as little as \$5 or \$10, he notes.

#### CUT COSTS

While older, generic drugs work well for most people, Knowles notes that it is also a "golden age" for the discovery of new medications. "If you need a third-line agent, there are a large number of good [clinical] trials going on."

You could consider enrolling in a trial as a way to get access to new medications earlier and for less, he says. For more costly approved medicines, look into assistance programs offered by drug companies or others. Ask your doctor if they can help justify the need for a newer and higher-cost treatment option with your health insurance provider so they'll more likely cover the cost. Keep in mind that for most individuals, these extra steps won't be necessary.

"For the majority of people—especially those without a very strong inherited predisposition—statin medicines plus diet and lifestyle are extremely effective" for lowering cholesterol, and at a cost that should suit your wallet.



# NEXT STEPS

## DIETS TO TRY

DIET	FOODS TO FOCUS ON	FOODS TO AVOID
MEDITERRANEAN		
DASH		
THERAPEUTIC LIFESTYLE CHANGES (TLC)		

## OTHER HEART DISEASE RISK FACTORS

RISK FACTOR	NORMAL RISK	TIPS FOR IMPROVING
BLOOD PRESSURE		<ol style="list-style-type: none"> <li>1. Low salt</li> <li>2. Magnesium supplements</li> <li>3. Cardio exercise</li> <li>4. Home monitor</li> </ol>
BMI/WAIST CIRCUMFERENCE		<ol style="list-style-type: none"> <li>1. Structured diet</li> <li>2. Nutritional consultant</li> </ol>
SEDENTARY LIFESTYLE		<ol style="list-style-type: none"> <li>1. Trainer</li> <li>2. Gym membership</li> <li>3. Mobile apps</li> <li>4. Home equipment</li> </ol>
LDL		<ol style="list-style-type: none"> <li>1. Prescriptions beyond statins</li> <li>2. Fractionated LDL</li> </ol>
DIABETES		<ol style="list-style-type: none"> <li>1. Diet</li> <li>2. Exercise</li> <li>3. Review medications and other conditions that could worsen control</li> </ol>

**“High cholesterol is like smoking—it builds up over time. We need to keep high cholesterol ‘pack-years’ to a minimum. It is always valuable to monitor diet, exercise, and sleep in patients with high cholesterol, and I routinely ask about this at every clinical visit. ”**

**FATIMA RODRIGUEZ, MD, MPH,**

AMERICAN HEART ASSOCIATION NATIONAL VOLUNTEER EXPERT; ASSOCIATE PROFESSOR IN CARDIOVASCULAR MEDICINE AND SECTION CHIEF OF PREVENTIVE CARDIOLOGY AT STANFORD UNIVERSITY SCHOOL OF MEDICINE IN CALIFORNIA

### What is the purpose of my next visit?

- Blood pressure test
- Cholesterol profile test
- EKG or ECG
- Stress exercise test