



BY WILLIAM FALOON

## An Illogical Position of the American Heart Association

If you could travel back to year **1980**, you'd read some of the first published data revealing low heart-attack rates in those who consume coldwater **fish**.

These initial findings were based on observations of Eskimos and Greenlanders whose diets consist of foods high in **omega-3s**.<sup>1</sup>

Additional publications in the early **1980s** provided biologic explanations for the **arterial protective** effects of **omega-3s**.<sup>2</sup>

Since then, many studies have been published describing the potential of **omega-3s** to reduce cardiovascular risks.

Here we are **38 years** later and there is still a **debate** as to whether healthy people should supplement with **fish oil**.

You may ask why anyone still questions **fish oil's** value. After all, **heart disease** and **ischemic stroke** remain among the leading causes of disability and death.<sup>3</sup>

One answer can be found on the graphic at the end of this article. It describes **19** independent **heart-attack** risk-factors. **Fish oil** offers a degree of **protection** against some, but not all of these independent risks.

So when an isolated study fails to show a cardioprotective benefit, hurried doctors erroneously conclude there to be little benefit to **omega-3** supplements.

Omitted from these knee-jerk reactions are the other vascular risks that must be corrected if one is to reduce their odds of ischemic stroke, coronary artery blockage, and sudden cardiac arrest.

This kind of misguided reaction occurred in **2017** when the **American Heart Association** issued an advisory stating that **fish-oil** supplements:

*"... prevent death from heart disease in patients who recently had a heart attack and may prevent death and hospitalizations in patients with heart failure."<sup>4</sup>*

The **American Heart Association** immediately followed this advisory by stating there is "**lack of scientific research**" to support use of **fish oil** in the **general population**.<sup>4,5</sup>

An article on page 62 of this month's issue refutes this **illogic** by describing studies supporting use of **fish oil** to mitigate vascular risks and a **new** study showing that **omega-3s** reduce all-cause mortality.

This editorial describes approaches to cardiovascular disease **prevention** that most **Life Extension Magazine**® readers already follow.



## Fish-Oil Use Sharply Increases

Surging numbers of Americans now supplement with **fish oil** that provides **omega-3** fatty acids.

According to a report published by the **National Institutes of Health**, between **2002** and **2012**, there was almost a **four-fold increase** in the number of people using a **fish-oil** supplement.<sup>6</sup>

Another survey published by the **American Medical Association** showed a **nine-fold** increase in **fish-oil** supplement users between **1999** and **2012**.<sup>7</sup>

This same survey, however, revealed only **12%** of adult Americans are using an **omega-3** supplement.<sup>7</sup>

This indicates that while **fish oil-supplement** use has **increased** over the past two decades, vast numbers of Americans are **not** achieving optimal **EPA/DHA** status.

And most people in the United States are not ingesting sufficient **EPA/DHA** potencies via their diet or supplement program.<sup>8</sup>

### Results from the National Health Interview Survey Conducted by the National Center for Health Statistics

*"Fish oil was the most popular natural product used by adults in the United States in 2012. Nearly 8 million more adults used fish oil in 2012 than in 2007."<sup>9</sup>*

The public is now so aware of the **heart-health** properties of coldwater fish that the media garner few ratings by reporting on yet **another** favorable **fish-oil** study.

Instead, headline-hungry reporters latch onto any comment that challenges the **benefits** of **omega-3s**.

This happened in **2017**, when the **American Heart Association** published a favorable report about fish oil's newly discovered **cardiac benefits**,<sup>10</sup> but then argued **against** fish-oil supplementation for healthy adults.

## American Heart Association Declares that Fish Oil Combats Heart Failure

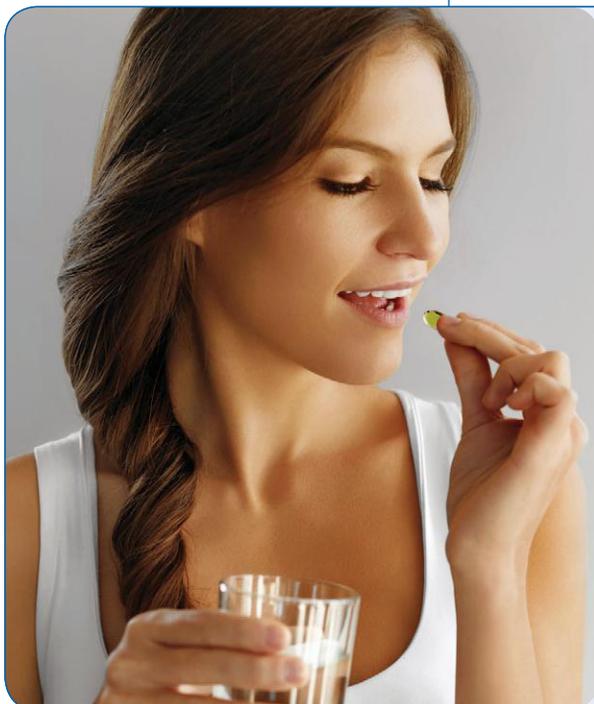
**Heart failure** occurs when the heart cannot adequately pump blood. An estimated **5.7 million** Americans currently suffer failing heart function.<sup>11</sup>

Headline news stories in **2017** report on "surprising" findings that **fish oil-supplements** not only help prevent **death** in **heart attack** patients, but they may also prevent **hospitalizations** in patients with chronic **heart failure**.<sup>12,13</sup>

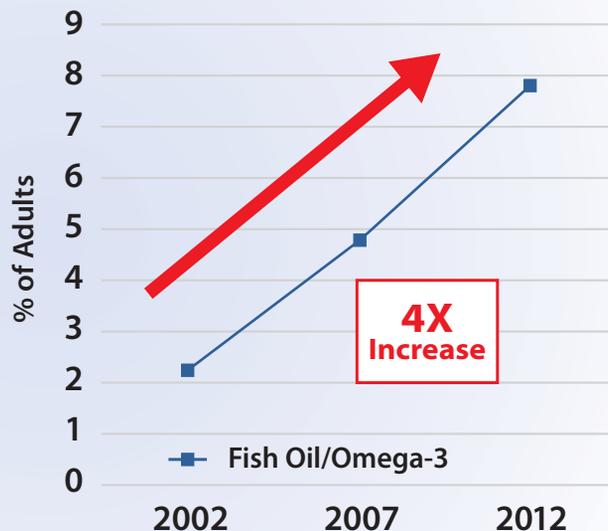
In response to this study, an **American Heart Association** physician stated:

*"What is new is that people with heart failure also may benefit from omega-3 fish-oil supplements."<sup>4</sup>*

This study, published by the **American Heart Association**, was based on a large, randomized, clinical trial.<sup>10</sup>



### Surging Use of Fish Oil/Omega-3 Supplements in the United States<sup>6</sup>





The results showed a low-dose fish-oil supplement reduced death and hospitalization by **9%** in **heart-failure** patients. This led the study authors to determine that doctors could consider **fish-oil supplements** for **heart-failure** patients.<sup>4</sup>

When we saw only a **9%** risk reduction in heart-disease patients taking approximately **1,000 mg** a day of an **omega-3** supplement, our reaction was how **trivial** this risk reduction and fish-oil potency were.

We say this based on better improvements in **cardiac function** that have been observed in response to supplementation with **coenzyme Q10**,<sup>14-22</sup> **taurine**,<sup>23-25</sup> **magnesium**,<sup>26-29</sup> and **higher-dose fish oil**.<sup>30-33</sup>

The fact that this **modest dose** (approximately **1,000 mg** a day of EPA/DHA) produced such benefits in **heart failure** patients is a revelation.

Most of you supplement with double this **EPA/DHA** dose, along with healthy dietary choices **AND** other nutrients that protect against cardiovascular disease via different mechanisms.

## American Heart Association Attacks Fish-Oil Supplements

After publishing the favorable **2017** report on fish oil aiding **heart failure** patients and preventing **cardiac death**, the **American Heart Association** emphasized that healthy people would not benefit by taking low-dose fish-oil supplements.

This recommendation against **healthy** people using **fish oil** was based on earlier flawed studies that were discredited in rebuttals we long ago published that can be accessed at [LifeExtension.com/fish](http://LifeExtension.com/fish)

The American Heart Association advisory concludes that:

*“supplementation with omega-3 fish oil may benefit patients with specific, clinical, cardiovascular disease indications, including patients with a recent prior heart attack and heart failure.”<sup>4</sup>*

According to this twisted logic, people should wait until after they have a **heart attack** or suffer **heart failure** before supplementing with **fish oil**.

We view these kinds of public decrees, such as “*don’t take fish oil until after you suffer a heart attack*”, as an example of widespread **medical stagnation** that causes so many premature illnesses.

## Multiple Factors Involved In Heart Disease

The **arterial system** is our modern day Achilles tendon.

Normal aging results in loss of **endothelial function** and subsequent development of **atherosclerotic** lesions that impede blood flow.

When **platelets** bump up against jagged **atherosclerotic** plaque, they can abnormally aggregate and cause an acute **blockage** of blood flow to a coronary or cerebral artery. This can result in a myocardial infarction (heart attack) or ischemic stroke.

Unstable **arterial plaque** is prone to sudden **rupture**, which can acutely occlude blood flow to arteries in our heart or brain resulting in sudden death.

Serious plaque buildup in **coronary arteries** creates angina pain that mercifully can be relieved via insertion of **stents** into narrowed arteries. In cases of severe coronary blockage, **open-chest surgery** is needed to bypass the blocked arteries.

**Multiple** pathologies are involved in the initiation and progression of arterial disease. **Fish oil** helps circumvent some of them by:

- Reducing triglyceride levels<sup>34,35</sup>
- Reducing C-reactive protein (helps stabilize plaque)<sup>36,37</sup>
- Reducing platelet stickiness (a thrombotic factor)<sup>38-40</sup>
- Reducing inflammation<sup>41-45</sup>
- Increasing EPA/DHA blood levels<sup>46,47</sup>
- Increasing large buoyant LDL particle size and other sub-lipid profiles<sup>48,49</sup>

These six validated benefits make it obvious that healthy people should ingest sufficient **omega-3s**.

**Fish oil**, however, does not miraculously circumvent all independent vascular pathologies.

When one understands that fish oil protects against many, but not all arterial **risk factors**, studies showing benefit to **omega-3** supplementation alone should be viewed with greater respect.

The inability of fish oil to circumvent other atherogenic risk factors mandates that people take additional steps to protect their delicate vascular system. Most readers of this magazine follow these preventive strategies.

### Curcumin Mitigates Heart Failure

Popularity of **curcumin** in recent years has grown more rapidly than **fish oil**.

Relief from **inflammation** is one reason why people use standardized **curcumin** supplements.

Curcumin is a **polyphenol** contained in the curry spice turmeric. It has demonstrated **anti-cancer** effects and may protect against

the deleterious changes involved with **atherosclerosis** and **atrial arrhythmia**.<sup>50</sup>

A hallmark characteristic of **heart failure** is **enlargement** of the heart muscle. In particular, the **left ventricle** that pumps blood directly into circulation **enlarges** and gradually loses **functionality**.

Heart enlargement can occur in response to **stress signals** that create adverse **gene-expression** changes in heart-muscle cells.

**Curcumin** has been shown to specifically inhibit **gene-expression** changes that contribute to chronic **heart failure**.<sup>51</sup>

Curcumin inhibits enlargement of cultured heart cells and prevents onset of heart failure caused by hypertensive heart disease and coronary infarction in rat models.<sup>52</sup>

One of several drugs used clinically to mitigate **heart failure** is **enalapril**. A group of researchers found that **curcumin** works simi-

larly to **enalapril** monotherapy in rat studies.<sup>51,53</sup>

When researchers combined **curcumin** with **enalapril**, they observed additive improvements in heart function. This suggests the mechanism of action of curcumin differs from the conventional cardiac drug (enalapril).<sup>51,53</sup>

The researchers pointed out that:

*“Combination therapy with curcumin and these agents [cardiac drugs] may be more effective for cardiac hypertrophy and heart failure.”<sup>51</sup>*

When reviewing published data, it would appear that combining **curcumin** with **fish oil** (along with conventional therapy) would reduce deaths and hospitalizations more than the meager **9%** reported in **2017** by the **American Heart Association** that focused on low-dose **fish oil**.



Curcumin and turmeric root

## Fight Back Against Medical Apathy

Protecting against **arterial disease** and **heart failure** are paramount concerns for aging humans.

**Pomegranate** improves **nitric oxide** status in the inner arterial wall,<sup>54,55</sup> vitamins like **5-MTHF** (folate) slash **homocysteine**,<sup>56</sup> while **CoQ10**,<sup>57-59</sup> **PQQ**,<sup>60,61</sup> and **NAD**<sup>62</sup> bolster **mitochondrial energy** in heart cells. All of this improves cardiac function.

No one should be **deficient** in **vitamins D** and **K2** as these are **low-cost** supplements that readily **absorb** when taken with a meal that contains some fat.

While some supplements help lower **blood pressure**, most aging people need medications to achieve optimal systolic readings of around **115 mmHg**. The drug **telmisartan** safely lowers blood pressure AND has vascular side benefits.<sup>63-67</sup>

**AMPK**-activating nutrients and/or drugs (like metformin) **lower** blood **glucose** and **insulin**.<sup>68</sup>

We advocate that **LDL cholesterol** be kept in the **low** normal ranges (under **100 mg/dL**). This can usually be accomplished by following a **Mediterranean** style diet and/or using **low**-doses of prescription drugs.

**Hormone balance** should be initiated after comprehensive **blood testing**.

## Refuting Illogic

By understanding the many factors that underlie **heart attack** and **stroke**, one can readily dismiss allegations made by groups like the **American Heart Association** that claim **fish oil** benefits heart-disease patients but is of little value to the general population.



This illogic assumes **heart-attack** and **stroke** victims were **not** part of the general population **prior** to their vascular disaster.

Most readers of *Life Extension Magazine*<sup>®</sup> were alerted to these **independent** vascular risk factors decades ago and take appropriate preventive measures.

## Obtain Premium Supplements at Lowest Prices

Thirty-eight years ago, **Life Extension**<sup>®</sup> embarked on a mission to radically extend healthy human lifespans.

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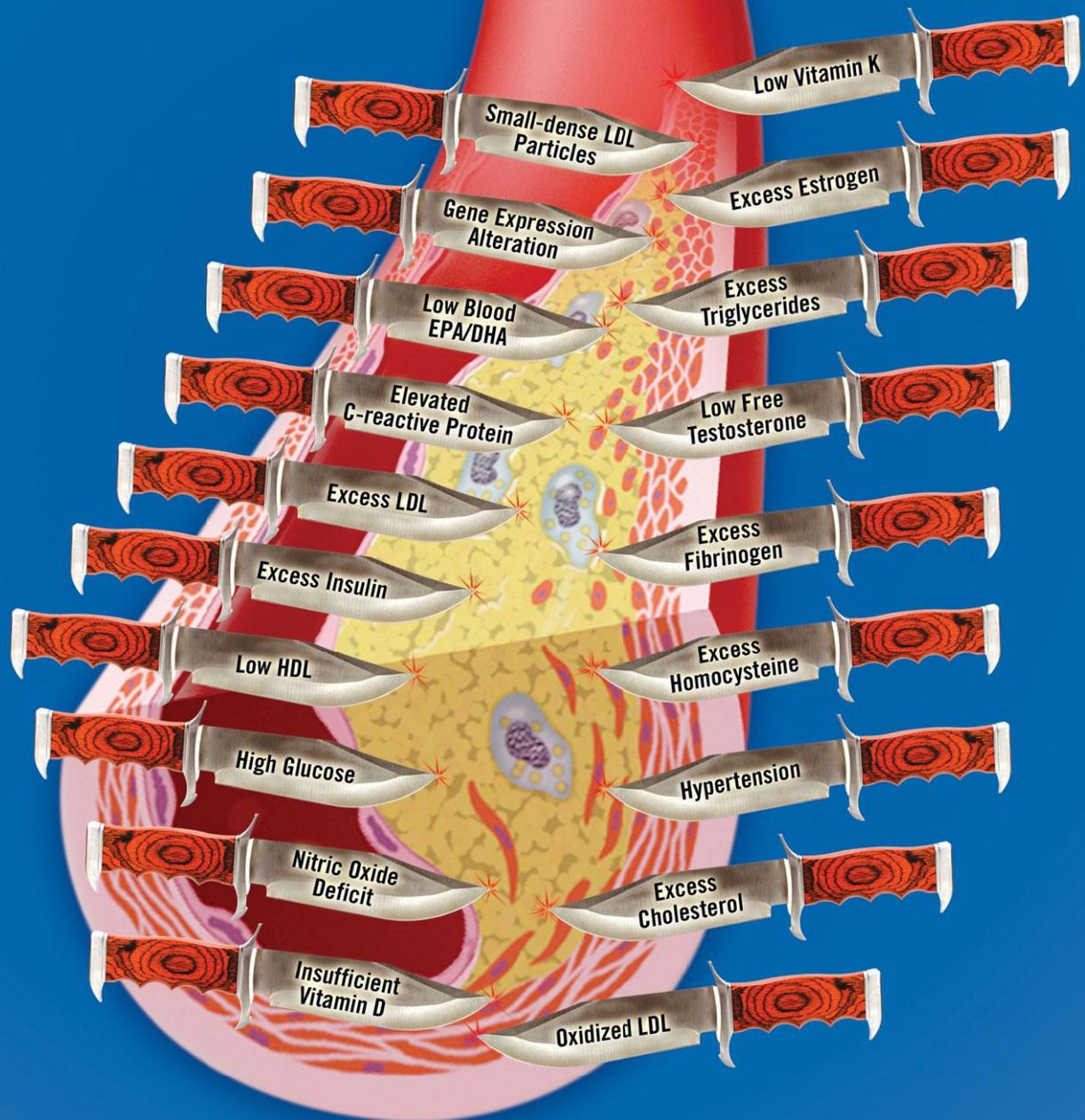
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William Faloon, Co-Founder  
Life Extension Buyers Club

Turn this page to view 19  
independent vascular risk factors.

Scientific references for  
this article begin on page 14.

## 19 DAGGERS OF ARTERIAL DISEASE



This graphic shows **19** daggers aimed at an artery occluded with atherosclerotic plaque.

Any one of these “daggers” can initiate and propagate atherosclerotic vascular disease.

You’ve just read statements made by the **American Heart Association** claiming there is little value in fish oil supplementation to the general population.

Most readers of this magazine are aware of the pathologies involved in **arterial disease** and follow comprehensive preventive measures.



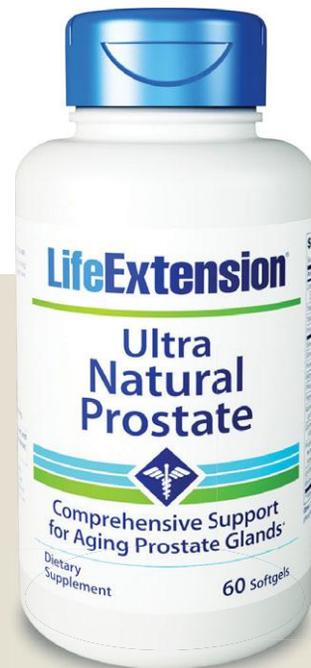
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