

NONPRESCRIPTION SUPPLEMENTS

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March, 2004

Health food and supermarket shelves are stocked to the brim. Advertisements abound. Which dietary supplements are useful in the treatments and prevention of heart disease? Here are some of the more widely used supplements, their health claims, and my view on their use.

As you know from the press, many of these are the subjects of intense research. Efficacy will be shown for some, and not for others. Keep in mind, though, that dietary supplements are completely unregulated. As long as specific health claims are not made, they are not subject to review by the Food and Drug Administration, and do not have to prove their effectiveness by rigorous medical studies. The manufacturer can bottle and sell virtually any product as long as they do not state such things as, "Lowers the risk of heart attack."

In fact, there are not even standards as to how much of a particular substance is in each tablet or capsule. Some studies have analyzed these products and have found less than half of the stated amount of a particular supplement was present in many of the products sampled.

Some promoters have said that there is a "conspiracy" among the medical profession to keep these drugs from the public. What a lot of nonsense! These are the same people who gain directly from their sales – either by direct profit, or by enhanced prestige as an "expert". It seems that everyone needs a gimmick. Everyone wants to be on the cutting edge. In fact, medical journals are filled with articles on vitamins, supplements, etc., in an effort to sort out the effective from the ineffective. There is no conspiracy.

Others imagine efforts by pharmaceutical companies to keep research studies out of medical journals, since these companies fund studies on their own products, and exclude products not their own. More nonsense! There have been hundreds upon hundreds of studies on such things as exercise, aspirin, diets, etc. No one has a patent on any of these things.

We live in an era of "evidence-based medicine", in which we await well-controlled data to be affirmed before recommending a particular treatment. We should resist rushing from one herb or supplement to another, in the latest attempt to "be on the inside." There is no "inside" in medicine. Research data is very public.

Here are some of the more commonly used supplements, and my views on their use.

Fish oil

Some studies have shown that omega-3 fish oil, derived from mostly cold water fish, can have beneficial effects on blood fats, and can in fact prevent potentially fatal heart rhythm disorders. Other uses are still under investigation. For patients with established heart disease, I recommend their use. I favor the enteric-coated product, in order to avoid a nasty after-taste. You can order these from companies on the Internet, such as iherb.com. The brand that I've had good success with is Fisol Brand. Each capsule has 500mg of the product, and I recommend two a day.

Coenzyme Q10

This is an enzyme that has been shown to be deficient in some patients with weak hearts. Some studies suggest symptomatic benefit in these patients. However, there are few studies that used a placebo, or dummy pill, in a well-controlled setting. One study actually measured how well the heart works in response to this enzyme, and showed no benefit. It may well be that the enzyme is simply a "marker" of a weak heart, and does not provide benefit. Imagine a person in the late stages of cancer. They may well have a low blood count, but transfusing blood into the patient will not cure the cancer. In any case, research continues. At this time, I do not recommend this product – there simply is not enough data to suggest benefit in patients with either normal or diseased hearts.

Vitamins -E and C, beta-carotene, and other micronutrients and multivitamins

There was a time several years ago when articles appeared in the medical press showing that people who took these vitamins were healthier than those who did not. Suddenly, it seemed everyone was taking vitamin supplements. Tens of thousands of patients have now been studied in a prospective, "blinded" manner, in which neither the patient nor the doctor knows whether the patient is receiving vitamins or not. For vitamins E and beta-carotene, these studies have consistently shown **no** benefit in preventing heart disease, or its manifestations. This was surprising and disappointing at first, but the research data has been quite consistent. For vitamin C, the data has been somewhat more promising in some studies, and adding 100mg in the form of a supplement might make sense.

With respect to the earlier research showing that people who took vitamin supplements tended to be healthier, it could simply be that those who take these products are more health conscious in general, and of course, would reap the benefits of a healthier lifestyle.

Some vitamins and nutrients may prove to be helpful in maintaining normal blood sugar levels, fat metabolism and in the protection of cells from damage. Certainly, taking a multivitamin each day would seem to cause no harm, and I will be happy to recommend some brands if you wish. At the same time, I do not recommend the use of high supplemental doses of these vitamins for the treatment or the prevention of heart disease,

and they are certainly no substitute for a well-balanced diet and a generally healthy lifestyle that includes exercise, the maintenance of proper weight, etc.

Folic acid

One of the effects of folic acid supplementation is the lowering of homocysteine, a chemical in the bloodstream that, when elevated, is associated with a higher risk of heart disease. Homocysteine can be measured by a simple blood test, and when elevated, can be treated with a high dose of folic acid. One particular formulation is available in a prescription-strength, and is combined in this product with a couple of B-vitamins, which also help lower the homocysteine level.

For those with coronary artery blockage or other manifestations of arteriosclerotic cardiovascular disease such as a history of stroke, and for those at high risk (those with a history of high blood pressure, cigarette smoking, or high cholesterol), supplemental folic acid may help lower the risk of future heart attacks. A good source of this supplement is in some brands of multivitamins, which I would be happy to recommend to you. A measurement of homocysteine, though, is best done first, in order to be sure that this supplement is being given with good reason.

Aspirin

We don't normally think of aspirin as a supplement, but I'm including it because of its nonprescription status and its usefulness. Aspirin works by interfering with the function of blood platelets, and thus reducing the tendency of blood to clot and occlude arteries. Bad things happen when blood vessels become occluded. Those with coronary artery disease, and even those at high risk for developing this problem, such as those with high blood pressure, high cholesterol, and/or a cigarette habit should be taking aspirin. Also, those who have had a stroke and those with partial blockage in their carotid arteries (the arteries that bring blood to the brain) should take aspirin.

I recommend a 325mg tablet each day for those with established coronary or carotid artery disease. If some indigestion results, the aspirin can be taken in an enteric-coated form, that will bypass the stomach altogether. For those who are at risk for developing hardening of the arteries but have not had any manifestations as of yet, an 81mg tablet is probably enough.

Herbal Remedies

Many herbs have been advertised for such uses as lipid lowering, estrogen replacement, memory enhancement, weight loss, etc. Certainly, as medicine progresses and compounds are tested for various purposes, some of these products may prove beneficial. At this point, however, results have been quite disappointing in most scientific trials with little or no benefit. Remember that these products do not have to undergo rigorous scientific testing, as the FDA does not regulate them. Indeed, Consumer Labs – an independent body – has found that the products themselves often

contain a fraction of the “active compound” as listed on the bottle. Remember that if something seems “too good to be true”, it probably is.

Other

Certainly, there are numerous supplements, vitamins and minerals that have not been discussed here. I have tried to focus on those of particular interest to cardiac patients. Please ask if you have questions about specific products. Unlike vendors of these products, my only concern is your health. I derive no other benefit from the sale or nonsale of any product.