

Module 1 Lesson 4

Transcript

Since we're talking about the heart, we've got to talk about cholesterol medications. Unless you're a doctor, you won't need to worry, of course, about prescribing these medications to clients, but if you're helping clients live healthier lifestyles, you've got to have a basic understanding of the medications they're taking.

Today, we're going to review common types and brands of medications. We're going to talk about what each of those medications does in the body and we're going to go over your role as a health provider or a coach. The goal here isn't that you become an encyclopedia of medications. Who wants to do that? The goal is to become familiar with common medications and understand their role in a potential client's overall health. Okay, so let's do this.

If I had a dollar for every client who told me she wished there was just a pill she could take to be thin, I'd be one wealthy lady. It's funny how many of us wouldn't bat an eyelash at taking a pill to lose weight, but so many of us are so resistant to taking even an aspirin when we have a headache or an antibiotic when we have a bacterial infection.

As a culture, we definitely have a lot of feelings about taking a pill for health, and I get it. If you try Prozac for depression, what if you're on Prozac for the rest of your life? Does it mean you're dependent and doomed to rely on pills to buffer your mood? Or if you swallow that pill to fight a fever, doesn't it mean that the infection causing the fever isn't going to leave your system? Isn't the point of a fever to get rid of the invaders by heating them out?

I get it. If we put ourselves, the whole TNS community in a room, and had a discussion about how we feel about taking meds, we'd have a large spectrum to look at. Some of us would be comfortable with Theraflu while others of us are cool with naturopathic treatments and others of us just put up a kettle for tea and ride out the flu completely.

Usually, I'm pretty respectful and meet people where they're at, as long as they're safe, of course. I don't give unwanted opinions because I don't want to come off as judgmental of their decisions, but I draw the line with some clients and make sure they have all the information so they can make really good decisions when it comes to heart medications, and that's what I recommend for you too.

I go over this in the thyroid module as well, and here, in our cardiac lesson, all about meds, I want to make sure you're well versed in the common meds people take so you can help and not

hinder in your care. So I'll list the common classes and brand names for you and what each med is about so you can be familiar with what you'll likely come across in the future.

Most people who are put on cardiac meds are put on cholesterol medications and the most common class are statins. They're the only cholesterol-lowering drug class that is associated with reduced risk of stroke and heart attack. People get put on statins if they have atherosclerosis and risk factors for heart attack. Statins target the liver. They reduce the production of LDL and triglycerides and increase HDL levels. We're going to talk more about cholesterol in a later lesson.

Common statins, and these are the brand names by the way, are Lipitor, Lescol, Mevacor, Pravachol, Crestor and Zocor. Also, PCSK9 inhibitors may also be prescribed with a statin. They work in a similar way by inhibiting LDL production in the liver. There are also selective cholesterol absorption inhibitors and are another class of drugs that prevent the absorption of cholesterol in the intestines and they also lower LDL levels and to a lesser extent lower triglycerides and raise HDL levels.

They're relatively newer and Zetia and again, a brand name, is the one you'll hear about. You also have resins. Resins are a class of drugs that basically dump cholesterol from your system by binding to bile acids. Your body responds to resins by producing more bile that binds more cholesterol, lowering the amount in the body. They're called Questran, Prevalite, and Localest. Again, brand names. Also, Colastid and WellCall.

You may hear about fibrates. They lower triglycerides but don't really change LDL levels. Lopid, Ontara, TriCore, TriGlide, Atromid S. Those are examples.

You may also hear of niacin or niacin acid treatment, which is effective in the prescription form to slow fat production in the liver. And there is also Omega 3 fatty acid ethyl esters such as Lovaza and Vesepa, which are prescribed with dietary changes to lower triglyceride levels.

Okay, so what is all of this information mean for you? I'd say it's important to know your cholesterol lowering medications and to make it a point to let your clients know that they're not to be shamed or blamed if they need to take a little cholesterol lowering help. Nobody wants to take medications, but these medications have been around for a long time and they are pretty safe for most people, most of the time. A client's doctor will help in finding one that fits so clients can feel good about what is really important in preventing a cardiac episode and there's a lot of good in that.

Okay. On your side, make sure you know about drug nutrient interactions that are common among cholesterol lowering medications by familiarizing yourself with your client's prescriptions.

You can work with clients on diet and lifestyle changes that promote heart health, such as swapping out packaged foods for fresh, watching sodium intake, of course, limiting the intake of saturated fats and choosing those fats wisely and of course, increasing the amount of dietary fiber in the diet.

Okay. So let's review the types of medications we just talked about. Statins, which reduce the production of LDL and triglycerides and increase HDL levels. PCSK9 inhibitors, which inhibit LDL production in the liver. Selective cholesterol absorption inhibitors, which prevent the absorption of cholesterol in the intestines, lower LDL and triglycerides, and raise HDL levels. Resins, which help eliminate cholesterol by binding it to bile acids. Fibrates, which lower triglycerides. Niacin, which slows fat production in the liver, and Omega 3 fatty acid ethyl esters, which can lower triglyceride levels.

And that wraps up this lesson in the heart disease module, and I cannot wait to see you in the next one.