

Cholesterol Fact Sheet

What is cholesterol?

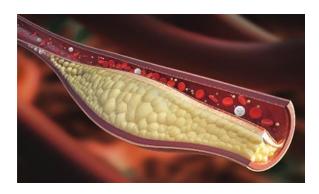
Cholesterol is a soft, waxy fat (lipid) in the blood stream that is found in all of your body's cells. Your body naturally makes all the cholesterol it needs to form cell membranes, hormones, and vitamin D. Some foods such as egg yolks, liver, and fried foods contain cholesterol and saturated fats that increase cholesterol levels.

What is LDL cholesterol?

LDL cholesterol is often called the "bad" cholesterol because it can clog arteries. LDL carries cholesterol into the blood stream and to your tissues where your body stores it. LDL cholesterol can cause plaque build-up, which can clog arteries. In time, the plaque can cause the arteries to narrow or block completely, leading to a stroke or heart attack.

What is HDL cholesterol?

HDL carries cholesterol away from the tissues to the liver, where it is filtered out of the body. High levels of HDL, also called "good" cholesterol, seem to protect against stroke and heart disease, so higher numbers are better. HDL less than 40 mg/dL is low, and is a risk factor for heart disease. HDL levels of 60 mg/dL or more can help lower your risk.



What do my cholesterol levels mean?

According to National Heart, Lung, and Blood Institute (NHLBI), for people over age 18, total cholesterol of more than 200mg/dL is considered high. If your total cholesterol is more than 200mg/dL or your HDL is less than 40mg/dL, your risk of stroke and heart disease could increase.

Cholesterol levels are measured in milligrams (mg) of cholesterol per deciliter (dL) of blood. If you have had a previous stroke or heart attack, your cholesterol levels may need to be less than indicated below. Ask your healthcare professional about your cholesterol levels.

Total Blood
Cholesterol Levels
Desirable:
Under 200 mg/dL
Borderline High:
200-239 mg/dL
High:
240 mg/dL and above
LDL Cholesterol
Levels
Optimal:
Under 100 mg/dL
Near Optimal/Above Optimal:
100-129 mg/dL
Borderline High:
130-159 mg/dL
High:
160-189 mg/dL
Very High:

What can I do to manage my cholesterol?

Eat a low-fat diet – A diet with 30 percent or fewer total calories from fat, and low in saturated fat, can help to lower cholesterol. Your diet should also include vegetables, fruits and lean meats such as chicken, fish and low-fat dairy products. Adding fiber to the diet,

such as whole grain bread, cereal products or dried beans, may also help reduce cholesterol – from 6 to 19 percent, according to published studies. Changing cooking habits to include baking, broiling, steaming or grilling instead of frying can also help.

Exercise – Active people tend to have lower cholesterol. Regular physical activity also seems to slow down or stop fatty deposits from clogging arteries. Your healthcare professional may recommend a program of regular physical activity to help lower your cholesterol. Be sure to check with your healthcare professional before starting any new programs.

For best results, you should take part in some aerobic activity most days of the week for at least 20 to 30 minutes each day. And there are simple ways to increase your activity level: take a brisk walk with a friend, take the stairs instead of the elevator, or park farther from your destination.

Medications – For people who cannot lower their cholesterol through diet and exercise, medications such as statin drugs might be prescribed. It's important to take the medicine as directed, even when you feel well. Statins are drugs that may help reduce the size of plaque particles that can clog or harden the arteries.

Studies have shown that some statins may be effective in reducing the risk of stroke or transient ischemic attack (TIA) in some people. Ask your healthcare professional about the best cholesterol management method for you.

For more information:

National Heart, Lung and Blood Institute – Cholesterol Education Project 1-800-575-WELL (575-9355) www.nhlbi.nih.gov/chd

National Stroke Association 1-800-STROKES (787-6537) www.stroke.org

Note: This fact sheet is compiled from general, publicly available information and should not be considered recommended treatment for any particular individual. You should consult your provider about any personal medical concerns.

All publications are reviewed by National Stroke Association's Publications Committee.
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