The Hidden Diabetes Link No One is Telling You About...
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By Suzy Cohen, R.Ph.

Coronary heart disease is a leading cause of death in the United States, killing one in five adults, and doctors are very quick to prescribe statins. In fact, statin drug sales rank in the billions each year globally.

These drugs are so pervasive that they are no longer just indicated for hypercholesterolemia, they are also being prescribed for elevations in C reactive protein, and are promoted for kids as young as eight years old.

Heart disease is so pervasive that some have boldly suggested that we should put statins in our water supply as some kind of protection.

This is very disturbing.

Do You Really Need a Statin Drug?

By far, statin drugs are the most popular cholesterol-lowering drugs available today. They work in your liver by preventing your body from making cholesterol. The drugs block an enzyme called HMG-CoA Reductase. This can be helpful, but only if you are one of those people who happen to produce too much cholesterol.

It doesn't do a good job at removing it from your clogged arteries, contrary to what most people think.

Physicians and health experts now agree that statins seem to offer more benefit through their ability to reduce dangerous inflammatory chemicals in your body, rather than by reducing production of cholesterol, which usually leads to uncomfortable, unwanted and dangerous side effects. One study found that lowering cholesterol too much actually backfires.
Cholesterol is good for you; it's one of your body's most powerful antioxidants, it makes important neurotransmitters and sex hormones so this madness to lower it as much as possible really concerns me. Plus, I believe the indiscriminate use of statins has contributed to the staggering rise in diabetes…

The Statin—Diabetes Connection Few People Know About

I watched this happen to my mom who was given a statin, and then told months later she suddenly had diabetes. All of a sudden? This happened many years ago, and it began my search to understand the connection. It also prompted me to write a book on the subject entitled "Diabetes Without Drugs" (Rodale, 2010).

It typically happens like this:

Many statin users come back to see their physician for a routine visit and after the blood work is drawn, they find their cholesterol ratios may be improved, but now they have high blood glucose.

It's entirely possible that some physicians then mistakenly diagnose their patients with "Type 2 diabetes" when in fact they just have hyperglycemia—a side effect, and the result of a medication that was prescribed to them months earlier.

Do you think you have type 2 diabetes?

I will provide more information so you can see for yourself that so-called "diabetes" diagnosis might not really be genuine diabetes. It may just be hyperglycemia (high blood sugar)—the result of your cholesterol medication, and for some people, it may be reversible with drug discontinuation. Whether or not you are able to discontinue your medication is between you and your physician.

Research Suggesting Raised Blood Sugar is a Side Effect of Statin Use

Several studies have indicated that statins can cause high blood sugar, which can be mistaken for "diabetes." For example, researchers in Glasgow, Scotland conducted a meta analysis, known as the JUPITER trial, which took into account 13 statin trials that each included 1,000 patients or more. The participants were followed for over than a year. The conclusion was there was indeed an increase, albeit small, in the development of Type 2 diabetes.

It should be considered that some of the patients in this meta analysis already had symptoms of insulin resistance or metabolic syndrome, so it could be said that they were on their way to diabetes anyway.
Now consider another meta-analysis published in the *Lancet*. Here, the researchers reviewed randomized controlled trials beginning in 1994 and ending in 2009, for a total of 91,140 participants who took either a statin or a placebo.

They found that people treated with statin drugs showed a nine percent increase for diabetes. They did not evaluate other factors however, which would be considered pre-diabetes, so I suspect their nine percent number to be on the low side.

Insulin is a pancreatic hormone that reduces blood sugar. You want some insulin to maintain blood glucose levels, but too much of it is bad—it's an inflammatory compound in your body when it is elevated. And guess what? The use of statin drugs appears to INCREASE your insulin levels! High insulin is extremely harmful to your health.

For starters, elevated insulin levels lead to heart disease, and isn't that the reason cholesterol drugs are prescribed in the first place?

The ratio of glucose to insulin should be less than 10:1, this ratio is far more important than the levels of glucose or insulin alone. Keep that in mind if you seek a complete recovery. For more information about the harmful effects of elevated insulin levels, see [my article on dearpharmacist.com](http://www.dearpharmacist.com), or my book *Diabetes Without Drugs*.

You want to keep insulin normal, to protect yourself from heart disease and high blood pressure. Chronically elevated insulin causes a cascade of inflammatory chemicals and high cortisol which lead to belly fat, high blood pressure, heart attacks, chronic fatigue, thyroid disruption, plus major diseases like Parkinson's, Alzheimer's and cancer.

Unfortunately, the most popular cholesterol drugs in the world seem to increase insulin levels. However, that's just one mechanism by which these drugs can raise your risk for diabetes.

**How Statins Raise Your Insulin**

Keeping things simple, you might imagine it like this: When you eat a meal that contains starches and sugar, some of the excess sugar goes to your liver, which then stores it away as cholesterol and triglycerides. Now stay with me -- when you have a statin on board, it's like a message to your liver saying, "No! Don't make any more cholesterol, please stop."

So your liver sends the sugar back OUT to your bloodstream. As a result, your blood sugar goes up.

In 2009, it was proven that statins could directly raise blood sugar, whether or not you have diabetes. Over 340,000 people were included before this conclusion was made. The people who did not have diabetes but took statins experienced a rise in blood glucose from 98 mg/dl.
to 105 mg/dl. Those who already had diabetes and also took statins experienced a rise from 102 mg/dl to 141 mg/dl.

After adjustments for age and medication use were considered, researchers concluded that both diabetic and non-diabetic statin users showed a statistically significant rise in blood sugar.

Why take all these risks, just to get the convenience of taking a pill instead of eating a better diet and exercising?

It’s been scientifically discussed and even published in JAMA that eating a better diet could lower cholesterol as well as the statin drug lovastatin.

And of course, there are so many other benefits to eating a healthier diet that consists of fruits, vegetables, nuts, seeds, and lean meats. Besides feeling better and increasing lifespan, you can squeeze into those skinny jeans you’re hiding in your closet.

Another way statins can affect your blood sugar is via their "drug mugging" effect. A drug mugger is my term, and the title of my newest book, which describes how a drug can rob your body's warehouse of a valuable nutrient. In the case of statins, they rob your body of two different nutrients, both of which are needed to maintain ideal blood sugar.

**Two Important Nutrients Decimated by Statins**

The first nutrient that is mugged is vitamin D. There have been mixed studies regarding the D-depletion effect of statins, but statins reduce your body's natural ability to create active vitamin D called 1,25-dihydroxycholecalciferol, shortened to "calcitriol" when it is eventually converted to its active hormone form.

This happens because statins reduce cholesterol, and you need cholesterol to make vitamin D! It is the raw material that exposure to UVB from sunlight will convert to vitamin D.

It is well documented that D improves insulin resistance, so needless to say, when you take a drug mugger of vitamin D (like statins), then you increase your risk for diabetes.

More specifically, a 2004 study published in the American Journal of Clinical Nutrition determined that raising a person's serum vitamin D levels (from 25 to 75 nmol/l) could improve insulin sensitivity by a whopping 60 percent.

Compare that to the blockbuster diabetes drug metformin, one of our pharmaceutical gold-standards, which can dispose of blood sugar by a meager 13 percent according to the New England Journal of Medicine.
Now, statins also suppress your natural coenzyme Q10—also called "ubiquinol" in its active form; it makes energy for every cell in your body, and it's produced mainly in your liver.

This powerful antioxidant just so happens to also play a role in maintaining blood glucose. When you deplete levels of CoQ10 by taking a drug muggers of it, like a statin drug, then you lose that benefit. You also raise your risk for heart failure, high blood pressure and heart disease as CoQ10 deficiencies can contribute to those conditions. A study by Hodgson et al, published in 2002 found that 200mg CoQ10 taken daily caused a 0.4 percent reduction in hemoglobin A1c.

Moreover, CoQ10 protects your body from oxidative stress, a strong contributing factor in the development of diabetes, metabolic syndrome and heart attacks. You want to make sure you have enough CoQ10 (or ubiquinol) on board to protect every cell in your body. The take home point is that statins annihilate this compound and you need it for good health.

In summary, if you take a statin medication and you've been told that you have diabetes, it may be drug-induced, and it's possible that it can be reversed over the course of time. However, you will have to eat right, exercise, and take supplements that help to lower your risk for heart disease naturally.

About the Author

Suzy Cohen, R.Ph., has been a licensed pharmacist for 22 years, and has had a weekly syndicated health column for the past 13 years which you can get for free by signing up at her website Widely recognized as "America's most trusted pharmacist," she has appeared on The Dr OZ Show, The View, Good Morning America Health and The 700 Club.

Cohen is also the author of three books: The 24-Hour Pharmacist, Diabetes Without Drugs, and Drug Muggers: Keep Your Medicine from Stealing the Life Out of You.

For more information, see www.SuzyCohen.com.

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Dr. Mercola's Comments:

Statins are HMG-CoA reductase inhibitors; that is, they act by blocking the enzyme in your liver responsible for making cholesterol (HMG-CoA reductase). The fact that statin drugs cause side effects is well established—there are now 900 studies proving their adverse effects, which run the gamut from muscle problems to increased cancer risk.

I first learned of the association between statins and diabetes when I had lunch at Expo West with Suzy Cohen, who is a nationally syndicated pharmacist. She offers compelling evidence that this popular drug is further worsening the epidemic of diabetes, and that untold numbers of people are then being treated for a disease they do not actually have. Rather, they may actually be suffering from a side effect of the statin drug.

One of the most recent studies supporting this finding was published in February in the International Journal of Obesity. Reuters recently reported on the findings stating:

"Australian researchers found that among more than 11,400 adults with high blood pressure and/or diabetes, those on beta-blockers weighed more, on average, and had larger waistlines. And in a separate look at 30 patients with high blood pressure, they found that people on beta-blockers generally burned fewer calories and fat after a meal -- measured by a device called a calorimeter.

The patients on beta blockers also reported lower physical activity levels in their day-to-day lives. (Beta blockers are suspected of curbing people's physical activity because the drugs slow the heart rate and may cause people to tire more easily.) Together, the findings suggest that beta blockers lead to weight gain by curbing people's calorie expenditure, according to the researchers, led by Dr. Paul Lee of St. Vincent's Hospital in Sydney.

..."Our hypothesis is that widespread use of beta blockers may fuel the modern-day obesity epidemic," he told Reuters Health..."

Ninety-Nine Out of 100 People do NOT Need a Statin Drug

That these drugs have dominated the market the way they have is a testimony to the power of marketing, corruption and massive conflict of interest, because the odds are very high—greater than 100 to 1—that if you're taking a statin, you don't need it.
The ONLY subgroup that might benefit are those born with a genetic defect called familial hypercholesterolemia, as this makes them resistant to traditional measures of normalizing cholesterol.

Part of seeing past the propaganda is to understand that cholesterol is NOT the cause of heart disease. If your physician is urging you to check your total cholesterol, then you should know that this test will tell you virtually nothing about your risk of heart disease, unless it is 330 or higher.

These two ratios are far more potent indicators for heart disease and are the ones you should pay attention to:

1. HDL/Total Cholesterol Ratio: Should ideally be above 24 percent. If below 10 percent, you have a significantly elevated risk for heart disease.

2. Triglyceride/HDL Ratio: Should be below 2.

I have seen a number of people with total cholesterol levels over 250 who were actually at low risk for heart disease due to their elevated HDL levels. Conversely, I have seen many people with cholesterol levels under 200 who had a very high risk of heart disease, based on their low HDL.

Your body NEEDS cholesterol—it is important in the production of cell membranes, hormones, vitamin D and bile acids that help you to digest fat. Cholesterol also helps your brain form memories and is vital to your neurological function.

There is also strong evidence that having too little cholesterol INCREASES your risk for cancer, memory loss, Parkinson’s disease, hormonal imbalances, stroke, depression, suicide, and violent behavior.

If You Take Statins, You MUST Take CoQ10 or Ubiquinol

Another important aspect that most doctors fail to tell you about is that statins are non-specific inhibitors of not just one, but a number of very important liver enzymes, one of the most important being Coenzyme Q10. Hence, if you take statin drugs without taking CoQ10, your health is at serious risk. Unfortunately, this describes the majority of people who take them in the United States.

CoQ10 is a cofactor (co-enzyme) that is essential for the creation of ATP molecules, which you need for cellular energy production. Organs such as your heart have higher energy requirements, and therefore require more CoQ10 to function properly.

Statins deplete your body of CoQ10, which can have devastating results.
Physicians rarely inform people of this risk and only occasionally advise them to take a CoQ10 supplement. As your body gets more and more depleted of CoQ10, you may suffer from fatigue, muscle weakness and soreness, and eventually heart failure.

Coenzyme Q10 is also very important in the process of neutralizing free radicals. So when your CoQ10 is depleted, you enter a vicious cycle of increased free radicals, loss of cellular energy, and damaged mitochondrial DNA.

If you decide to take a CoQ10 supplement and are over the age of 40, it is important to choose the reduced version, called ubiquinol. Ubiquinol is a FAR more effective form—I personally take 1-3 a day since it has such far ranging benefits.

**Optimizing Your Cholesterol Levels, Naturally**

The real tragedy here is that for nearly everyone that is prescribed these drugs, there's simply no reason to be taking them and suffer the damaging health effects from these dangerous drugs when they are far more effective, less dangerous and inexpensive ways to optimize your cholesterol profile.

The fact is that 75 percent of your cholesterol is produced by your liver, which is influenced by your insulin levels. Therefore, if you optimize your insulin level, you will automatically optimize your cholesterol.

It follows, then, that my primary recommendations for safely regulating your cholesterol have to do with modifying your diet and lifestyle:

- Reduce, with the plan of eliminating, grains and sugars in your diet. Eat the right foods for your nutritional type, and consume a good portion of your food raw.

- Make sure you are getting plenty of high quality, animal-based omega 3 fats, such as krill oil.

- Other heart-healthy foods include olive oil, coconut and coconut oil, organic raw dairy products and eggs, avocados, raw nuts and seeds, and organic grass-fed meats as appropriate for your nutritional type.

- Exercise daily. Make sure you incorporate peak fitness exercises, which also optimizes your human growth hormone (HGH) production.

- **Address your emotional challenges.** My favorite technique for stress management is the Emotional Freedom Technique (EFT).

- Avoid smoking or drinking alcohol excessively.
• Be sure to get plenty of good, restorative sleep.

Unlike statin drugs, which lower your cholesterol at the expense of your health, these lifestyle strategies represent a holistic approach that will benefit your overall health—which includes a healthy cardiovascular system.