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Pantethine

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PANTETHINE: NEW OPTIONS FOR MID MANAGEMENT AND HEART HEALTH

By Daiichi Fine Chemicals,¹ Cardiovascular disease (CVD) continues to be the leading cause of death in most industrialized countries². High HDL cholesterol, levels (LDL-C) and low HDL cholesterol levels (HDL-C) are primary risk factor for this disease, though both can be modified to reduce CVD events. Based on the recently revised guidelines issued last year by the National Institutes of Health's National Cholesterol Education Program (Adult Treatment Panel III), more than 33 percent Americans have blood cholesterol levels in less than optimal ranges.

The first course of action is to pursue lifestyle changes to improve LDL-C and HDL-C levels. However, it is unlikely that diet and exercise alone will be sufficient to optimize these levels in many and additional therapies will need to be considered. Heart health supplements containing pantethine offer an excellent option for many individuals to improve their lipid profile. Pantethine has been used successfully for several decades to help individuals raise HDL-C

levels, lower HDL-C levels, and lower triglycerides. Hundreds of studies have been conducted using pantethine since the early 1970s.

TOTAL CHOLESTEROL

In one of the scientifically strongest studies to date, Gaddi et al showed that 900 mg of pantethine given daily over eight weeks resulted in a 15 percent decrease in total cholesterol³. A large number of studies using various dosing schedules and treatment periods have shown that pantethine consistently lowers total cholesterol when taken daily at doses between 400 and 1200 mg. The amount of total cholesterol reduction

may vary considerably because pantethine also raises HDL-C. Therefore the more pantethine raises a persons HDL-C, the less the total cholesterol value will drop.

HDL CHOLESTEROL

HDL-C levels are considered by most experts to be just as important as LDL-C levels in prevent-

ing heart disease. HDL-C levels are typically higher in women than in men. However, as women's estrogen levels decrease when they approach menopause and after its onset, their HDL-C levels are known to significantly decrease. Therefore, low HDL can be a very serious concern for pre and post-menopausal women as well as men. Pantethine may be especially useful for persons with this problem. Most other lipid-lowering agents are not as effective at raising HDL-C levels. One exception is niacin, which is used both as a prescription drug and as a dietary supplement.

Although most studies have show, that pantethine raises HDL-C levels, pantethine appears to more dramatically increase HDL-C levels in those individuals low amounts of HDL-C in their blood. For example, Zhu et, in a small randomized trial, reported a 45 percent increase in HDL-C levels amount those participants with abnormally low values but only a six percent increase among those with normal pre-treatment HDL-C values, The average HDL-C increase appears to be about 15 percent when pantethine taken daily at doses between 600 and 900 mg.

LDL CHOLESTEROL



The effects of pantethine on LDL-C are somewhat less consistent than its effects on HDL-C levels. However, some studies have shown that pantethine can lower LDL-C by about 10 to 15 percent. For example, Avogaro et al showed that by giving 900 mg of pantethine per day reduced LDL-C by 15 percent⁵. Gaddi et al also gave 900 mg of pantethine per day and showed a 14 percent drop in LDL-C³.

In general, pantethine lowers LDL-C after a minimum of four weeks of use. It appears to work better in those people who have moderately elevated (130-160 mg/dl) levels of LDL-C as opposed to those who have very high levels.

TRIGLYCERIDES

Triglycerides are fatty substances in the bloodstream that, when elevated, can increase the risk of heart disease and other organs, ailments of the major organs such as the liver and kidneys. Another benefit of taking and pantethine is that studies show it lowers these blood fats by an average of about 20 percent.

Gaddi et al. in their cross-over trial, showed that 900 mg of pantethine per day resulted in an average triglyceride reduction of 23 percent³. Other studies have shown a similar effect.

High triglyceride levels are normally seen in persons with insulin resistance, a condition often associated with low HDL-C levels. Thus, pantethine could be a supplement to help manage insulin resistance, a problem that affects a growing number of middle-aged and older Americans.

SIDE EFFECTS



A positive benefit of pantethine therapy is that it is virtually free of adverse side effects. Many patients report a mild increase in laxation, especially at doses over one gram per day, which is often considered a benefit. At higher doses, some sensitive individuals may experience abdominal cramping or diarrhea but this is rare and infrequent.

SUPPLEMENTATION AND LIPID MANAGEMENT RECOMMENDATIONS

Pantethine should be considered when attempting to improve lipid levels in customers with low to moderate dyslipidemia who have failed to reach target lipid goals with lifestyle change (diet and exercise). Mention to your customers that this ingredient is a safer alternative to more conventional drug intervention. This typical starting level of pantethine is 600 mg (300 mg in the morning and 300 mg in the evening), with a re-check of lipid levels in four to six weeks. If target lipid goals are achieved, then the supplementation level is continued as maintenance, with a blood lipid recheck in three to six months.

Pantethine may be taken with or without meals and has no known food interactions. Some studies indicate that pantethine may be less effective in persons with renal failure (uremia), persons on diuretics or beta blockers and in persons with familial hyperlipidemia.

Pantethine is not contraindicated in such situations but just may not be as effective. Pantethine is not intended to replace therapeutic treatments for individuals with high to very high dyslipidemia

However, pantethine can be used in conjunction with other therapeutic treatments.

References

1. Articles written by: Keenan J.M. M.D. and Pins, JJ MPH M.S. L.N.: Dept. of Family Practice and Community Health University of Minnesota Medical School.
2. Third Report of the National Cholesterol Education Program (NCEP) Expert Panel on Detection, Evaluation and Treatment of High Cholesterol Adults (Adults Treatment Panel III). Executive summary, JAMA. 2001; 16,285 (19):2486-97
3. Gaddi A, Descovich GC, Noseda G, Fragiaco Colombo L, Craven A et al. Controlled Evaluation of Pantethine, a Natural Hypolipidemic Compound, in Patients with Different Forms of Hyperlipoproteinemia. Atherosclerosis. January 1984;50(1):74-83.
4. Zhu JR. Han QQ. Chen B. Mode of Action of Pantethine in increasing HDL-C in Hyperlipidemic Patients with Low HDL-C. Atherosclerosis. 1997;134(1-2):356.
5. Avogaro P. Bittolo Bon G. Fuselio M. Effect of Pantethine on Lipids, Lipoproteins, and Apolipoproteins in Man. Curr. Ther. Res. 1983;33:488-493