Cardiologist Observes Improved Patient Outcomes & Reversal of Calcification and Atherosclerosis

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I have devoted my career as a cardiologist to finding ways to treat **atherosclerosis**—the buildup of **plaque** in artery walls.

I've relied primarily on healthy lifestyle changes, diet, and supplements.

A few years ago, a **human** study found that a combination of two **plant extracts** significantly <u>reduced</u> **arterial plaque** in the carotid arteries when added to diet, exercise, and healthy lifestyle counseling.¹

I have recommended these plant extracts to thousands of patients and have seen the favorable results firsthand.

Larger studies provide <u>new</u> evidence that arterial **calcification** and blockages are <u>reversible</u>.



My Clinical Practice

I spent seven years after medical school completing my training in **interventional cardiology** or using catheters to treat heart disease.

Much of my practice involved inserting **stents** to prop open **coronary arteries** that were occluded with **atherosclerotic** plaque.

But three weeks into my first job, I decided there was a better, more comprehensive approach.

At that time, I read a study in a respected medical journal focusing on **atherosclerosis**, which often leads to heart attacks and strokes.

The study reported that atherosclerosis had been reversed using lifestyle and diet changes.²

Since then, I've combined interventional cardiology with a search for lifestyle and supplement-based methods to stabilize and <u>reverse</u> plaque buildup.

I was particularly impressed by a published study that reported on a combination of extracts of **French maritime pine bark** and an herbal extract called **Centella asiatica**.

When added to standard diet, exercise, and lifestyle counseling, these two **plant extracts** *improved* plaque stability and reduced size and numbers of **arterial plaques**.¹



The study involved 50 patients with plaque in the **carotid arteries**, which supply blood to the brain, neck, and face. These patients had no history of cardiovascular events, and did not have diabetes or metabolic problems.¹

Over the three-month study period, **pine bark** + **Centella asiatica** extracts <u>reduced</u> **carotid artery plaque** and <u>lowered</u> the **number of plaques** compared to a control group.

After these scientific findings were published, this **pine bark**-*Centella* extract combination became a routine part of my atherosclerosis reversal program.

The Evidence Mounts

I grew more convinced of the effectiveness of this plant combination when a larger, longer-term study was published in **2017**.³

This time, 391 subjects were followed for *four years*. All had asymptomatic atherosclerosis of either the **carotid artery** or the **femoral artery** (which provides blood to the leg). Atherosclerotic lesions extended **50%-60%** into the arteries in at least one location.

Three treatment groups were formed. One was treated with extract of **pine bark** alone, another was treated with **pine bark** and **Centella asiatica**, and a third control group received <u>no</u> extracts. All groups received standard diet, exercise, and lifestyle counseling.

The rate of plaque progression, measured by ultrasound, was significantly <u>lower</u> in both treatment groups than in the control group. The group that took the *combination* of the <u>two</u> extracts had the *greatest* reduction in progression of plaque thickness and length.

The extracts also had a favorable impact on cardiovascular outcomes as follows:

- The occurrence of angina, chest pain caused by reduced blood flow to the heart, was less than 3% in the two extract groups, compared with 6.25% in control patients.
- The rate of **heart attacks** was significantly <u>lower</u> for the combination therapy.
- Events requiring hospital admission occurred in 16.4% of control subjects, 8.9% of subjects using only French maritime pine bark extract, and just 3.3% of patients using the combination of pine bark and Centella extracts.

Pine Bark - Centella Extracts in Practice

I have used this combination with countless patients in my clinic who have plaques clogging their carotid arteries.

I use the **carotid intima-media thickness** (ultrasound) test to identify and track carotid plaque status.

This test measures the thickness of the inner layers of the carotid artery, the **intima** and the **media**.⁴

Increased plaque means *greater* thickness, enabling this carotid ultrasound test to reveal atherosclerosis even in people with no symptoms.

I routinely observe <u>reversal</u> of plaque in patients taking the **pine bark** + **Centella extract** combination. I have even seen **arterial age** drop **10** to **20 years** after only one or two years of therapy.

Preventing Arterial Plaque Progression

My use of these extracts has recently expanded *again*, based on data published in **2020**.

This Italian trial involved 84 normal weight to mildly overweight subjects with asymptomatic **atherosclerosis** in their **carotid** and **femoral arteries**, determined by high-resolution ultrasound.

These atherosclerotic subjects were treated with similar interventions as the studies already discussed. The duration of this trial was three years.⁵

Patients with an atherosclerotic plaque that was blocking less than **50%** of an artery and those with an atherosclerotic plaque blocking <u>more</u> than **50%** of an artery were included in this trial.

All patients were given diet, exercise, and lifestyle counseling.

One group received no additional treatment, a second took **100 mg** a day of **aspirin**, and a third received the aspirin plus the combination of extracts of French maritime **pine bark** (**150 mg/day**) and **Centella** *asiatica* (**450 mg/day**).

At the end of the three years, more than **20%** of patients in the **standard management** and the **aspirin** group had progressed to more severe and extensive atherosclerotic plaque.

Among patients treated with **aspirin** + **pine bark** + **Centella**, only **5.3%** of patients experienced **plaque progression**.

In the diet, exercise, and lifestyle-counseling group, **22%** suffered a cardiovascular event requiring hospitalization. That number <u>declined</u> to **12%** in the **aspirin** group and to just **3.5%** in the group taking aspirin plus the two **plant extracts**.



WHAT YOU NEED TO KNOW

Reducing and Reversing Plaque Progression

- Atherosclerosis is the buildup of plaque in artery walls.
- A combination of two plant extracts significantly <u>reduced</u> arterial plaque in the carotid arteries.
- French maritime pine bark-Centella asiatica extracts prevent plaque progression.
- This combination of plant extracts may <u>reverse</u> the progression of atherosclerosis.

Oxidative stress, a driver of atherosclerosis, was measured in the blood of all subjects and was <u>lower</u> in the group taking the **pine bark** and **Centella** extracts. This makes sense since both these plant nutrients are free-radical scavengers.

Decrease of Coronary Artery Calcification

The same research team evaluated the efficacy of the **pine bark**-**Centella** combination in asymptomatic atherosclerotic patients with coronary artery **calcifications**.⁶ Patients with atherosclerosis in the **coronary arteries**

-those that supply the heart with blood - can experience angina, shortness of breath, and even a heart attack.⁷

The study included three groups of 30 men each with asymptomatic **coronary artery calcifications**. Although they didn't have angina or shortness of breath, the **calcification** in their arteries indicated progressive atherosclerosis.

All subjects received standard diet, exercise, and lifestyle counseling and took **100 mg/day** of aspirin.

The first group received no additional treatment. The second added **150 mg/day** of French maritime pine bark extract. The third used the combination of **150 mg/day pine bark** and **450 mg/day** of *Centella asiatica* extracts.

After one year, there was a **35%** <u>increase</u> in the number of coronary artery calcifications in the group that received diet, lifestyle, and exercise counseling plus aspirin. In those also taking **pine bark** alone, new **calcifications** were **halted**.

In those using the **pine bark** + **Centella** there was a significant **10%** <u>decrease</u> in the number of **calcifica-tions**, a remarkable result.

Testing in Patients with Stents

To evaluate the impact of **pine bark** and **Centella asiatica** extracts on atherosclerotic plaque progression in **stented arteries**, 160 stented patients with partial arterial blockage due to atherosclerotic changes (as determined by ultrasound) were grouped into one of three treatment arms.⁸

The study began 6-10 months after successful **stent** procedures, and patients were followed for 12 months.

All groups received diet, exercise, and lifestyle advice along with anti-platelet medication and low-dose statin. A second group received, in addition, the **pine bark extract**; and a third group received extracts of **pine bark** and **Centella**.

After 12 months, progression of atherosclerotic lesions on inner artery walls occurred in **6.7 times** <u>more</u> patients in the diet, exercise, lifestyle, and medication only group compared to the group that <u>also</u> received the combined **pine bark** + **Centella** extracts.

In fact, in just one year, **nearly 60%** of patients in the group that did <u>not</u> receive **the plant extracts** had marked progression of their **atherosclerosis**.

By contrast, among subjects who received the additional **pine bark extract** without *Centella*, only **18.5%** experienced atherosclerosis progression.

Most remarkable of all, though, were the results in the **pine bark** + **Centella** extracts group. Just **8.9%** of these patients had progression of **atherosclerotic plaques**.

In both groups that received extracts, there was a significant reduction in oxidative stress. No side effects or tolerability problems were observed with the plant extracts.

Summary

These studies consistently show that the combination of **French maritime pine bark** and **Centella asiatica** extracts slows and may reverse the progression of **atherosclerosis**.

The published findings reveal significant <u>reductions</u> in adverse **cardiovascular outcomes**.

I've observed these powerful results in my clinic as well.

The combination of these **plant extracts** (**pine bark** + **Centella**) has promise for millions of people with atherosclerosis. •

If you have any questions on the scientific content of this article, please call a Life Extension® Wellness Specialist at 1-866-864-3027.

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References

- Luzzi R, Belcaro G, Ippolito E. Carotid plaque stabilization induced by the supplement association Pycnogenol(R) and centella asiatica (Centellicum(R)). *Minerva Cardioangiol*. 2016 Dec;64(6):603-9.
- Ornish D, Brown SE, Scherwitz LW, et al. Can lifestyle changes reverse coronary heart disease? The Lifestyle Heart Trial. *Lancet.* 1990 Jul 21;336(8708):129-33.
- Belcaro G, Dugall M, Ippolito E, et al. Pycnogenol(R) and Centella asiatica to prevent asymptomatic atherosclerosis progression in clinical events. *Minerva Cardioangiol*. 2017 Feb;65(1):24-31.
- 4. Bots ML, Evans GW, Tegeler CH, et al. Carotid Intima-media Thickness Measurements: Relations with Atherosclerosis, Risk of Cardiovascular Disease and Application in Randomized Controlled Trials. *Chin Med J (Engl)*. 2016 Jan 20;129(2):215-26.
- Belcaro G, Cesarone MR, Scipione C, et al. Delayed progression of atherosclerosis and cardiovascular events in asymptomatic patients with atherosclerotic plaques: 3-year prevention with the supplementation with Pycnogenol(R)+Centellicum(R). *Minerva Cardioangiol*. 2020 Feb;68(1):15-21.
- Hu S, Belcaro G, Cesarone MR, et al. Central cardiovascular calcifications: supplementation with Pycnogenol(R) and Centellicum(R): variations over 12 months. *Minerva Cardioangiol.* 2020 Feb;68(1):22-6.
- Available at: https://www.mayoclinic.org/diseases-conditions/coronary-artery-disease/symptoms-causes/syc-20350613. Accessed July 15, 2020.
- Belcaro G, Cesarone MR, Scipione C, et al. Pycnogenol(R)+ Centellicum(R), post-stent evaluation: prevention of neointima and plaque re-growth. *Minerva Cardioangiol.* 2019 Dec;67(6):450-5.