

# 심혈관질환의 기능의학적 접근 및 치료

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아주의대 가정의학과

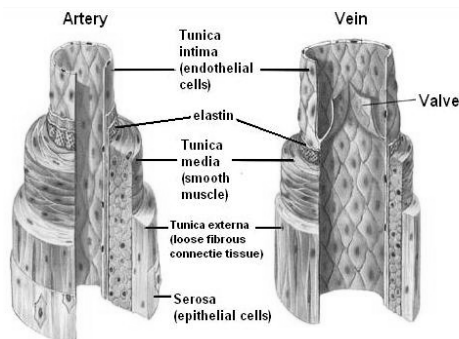
## Contents

- Pathophysiology of atherosclerosis and vascular calcification
- Traditional Approach of ASCVD
- New options from Function medicine

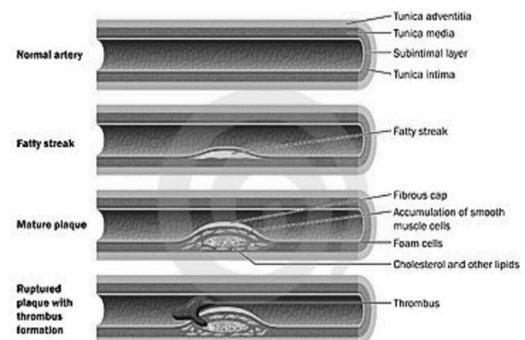


## Pathophysiology of atherosclerosis and vascular calcification

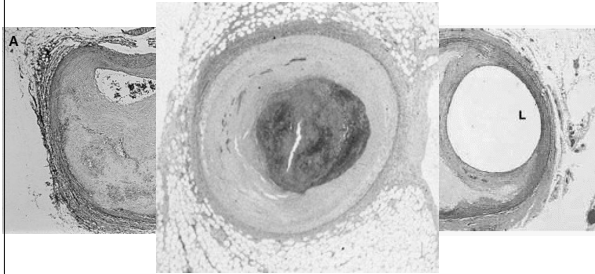
## Anatomy of Blood vessels



## Gross development of atherosclerosis



Which is more dangerous?

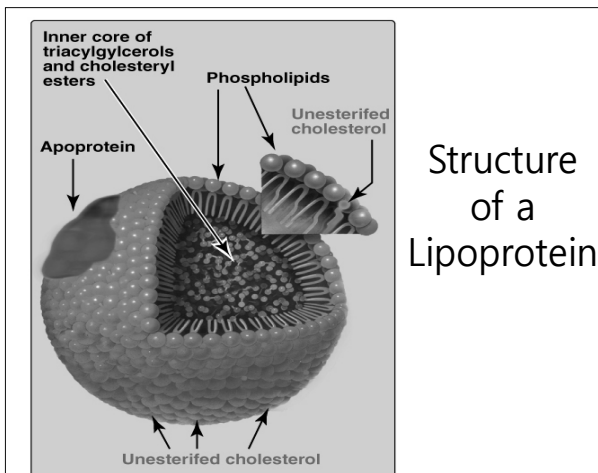
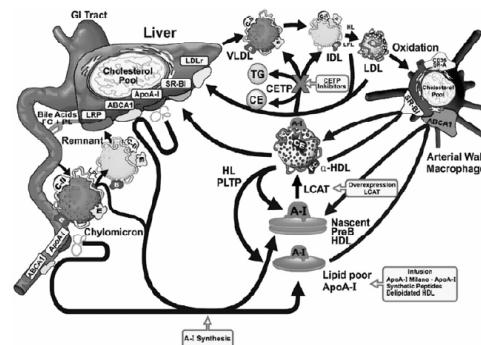


## Lipoprotein Metabolism

## Functions of Cholesterol in Body

- Membrane fluidity
- Synthesis of steroidal hormones
- Synthesis of vitamins – D, E
- Synthesis of Bile acid

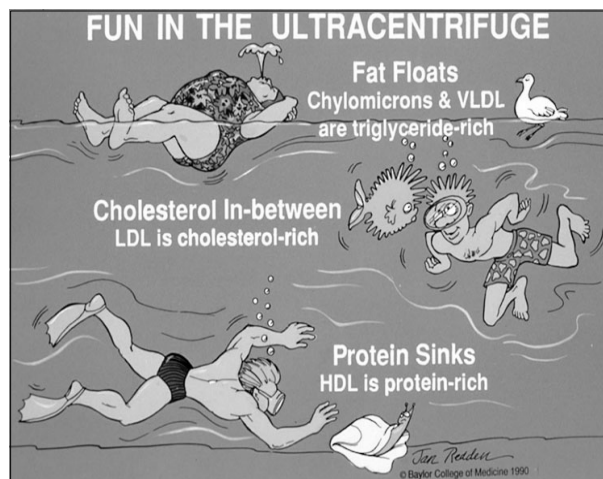
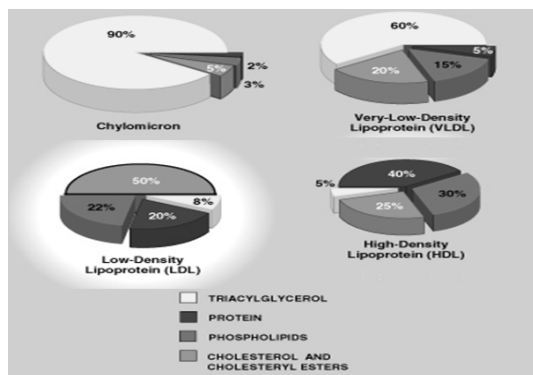
## Lipoprotein Metabolism - overview -



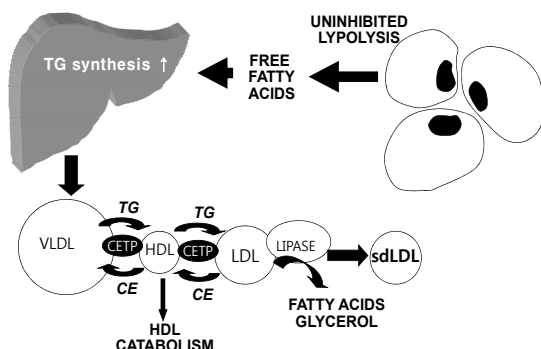
## Functions of a Apoprotein

1. Structural proteins
2. Activators
3. Recognition sites

## Composition of Lipoproteins



## Dyslipidemia of Metabolic Syndrome



## Intervention points 1

- Free Fatty Acid reduction
  - Calorie Restriction
  - Avoid fatty meal and CHO rich diet
  - High Fiber diet
  - Moderate exercise for at least 20 Min
- Endothelial dysfunction correction
  - L-arginine

## Dietary Adjuncts: Efficacy at Reducing LDL-C

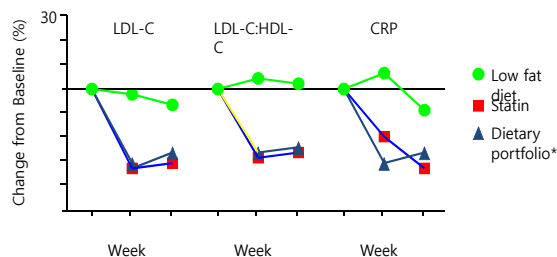
Therapy	Dose (g/day)	Effect
Dietary soluble fiber	2-8	↓ LDL-C 5-10%
Soy protein	20-30	↓ LDL-C 5-7%
Stanol esters	1.5-4	↓ LDL-C 10-15%



Jones PJ. *Curr Atheroscler Rep* 1999;1:230-235  
 Lichtenstein AH. *Curr Atheroscler Rep* 1999;1:210-214  
 Rambjør GS et al. *Lipids* 1996;31:S45-S49  
 Ripsin CM et al. *JAMA* 1992;267:3317-3325

## Diet Evidence: Effect on Lipid Parameters and CRP

46 dyslipidemic patients randomized to a low fat diet, a low fat diet and lovastatin (20 mg), or a dietary portfolio\* for 4 weeks

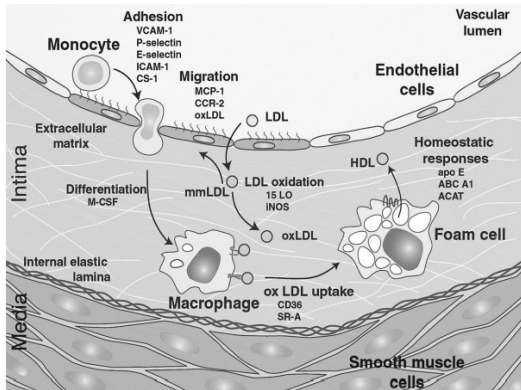


**A diversified diet improves lipid parameters and CRP levels**

\*Enriched in plant sterols, soy protein, viscous fiber, and almonds

Jenkins DJ et al. *JAMA* 2003;290:502-10

## Initiation of Atherosclerosis

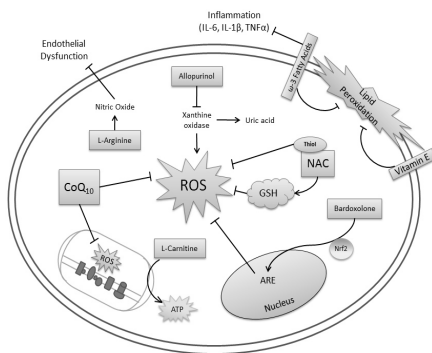


Glass and Witztum. Cell. 2001; 104(4): 503-516

## Intervention points 2

- Prevention of oxidation of LDL
  - Antioxidants
  - Avoid fatty meal and CHO rich diet
  - Chelation
  - Moderate exercise for at least 30 Min 3/week
- Reduction of inflammation
  - Treatment of Periodontal diseases and Gut dysbiosis
  - Stress regulation
  - Aspirin

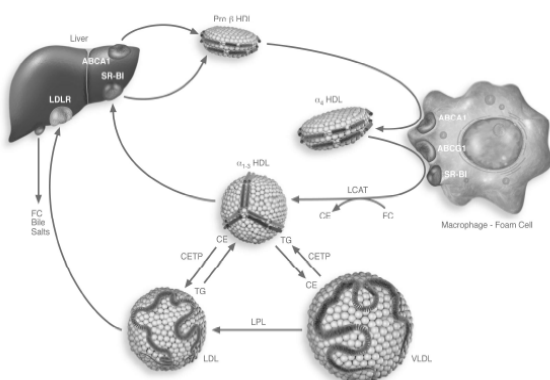
## Action of antioxidants



## Antioxidants prescription

- Vitamin C 500 – 1000mg
- Vitamin E 400 IU
- Vitamin A 400 IU
- Vitamin D 800 IU
- Selenium 50 µg

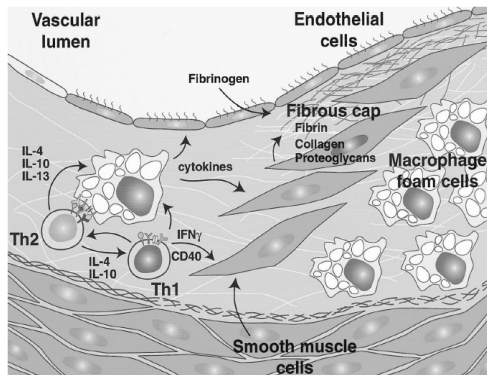
## HDL metabolism



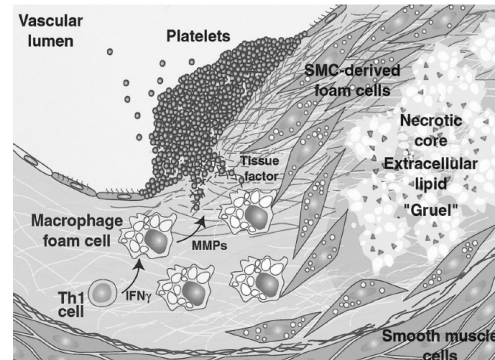
## Intervention points 3

- Increase HDL and Cholesterol efflux
  - Protein
  - Niacin
  - Omega3
  - Weight reduction
  - Moderate exercise for at least 30 Min 3/week

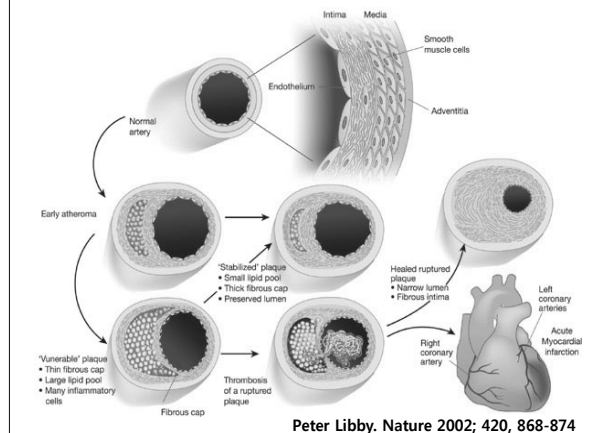
## Formation of A-Plaque



## Plaque rupture and Thrombosis



## Natural history of Atheroma



## Intervention Points 4

- Anti-inflammatory diet
  - Vegetarian diet
  - Fish
  - Olive oil
  - licorice
- Anticoagulants
  - Aspirin
  - Zincomin
  - Gallic
  - Onions
  - Ginger

## Anti-inflammatory Foods

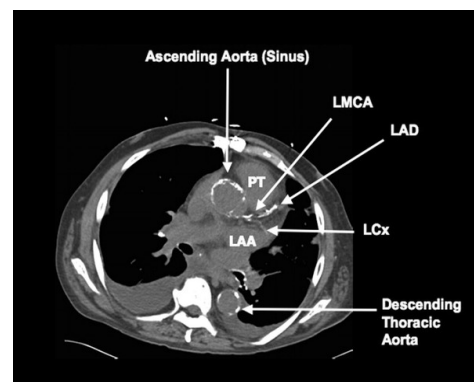
use these in smoothies, soups and salads

alfalfa	cilantro	oregano
alfalfa grass	coconut - fresh	parsnips
almonds	cucumber	peas - fresh
almond butter	cumin seeds	pumpkin
artichokes	egg plant	red beets-fresh
asparagus	endive	red cabbage
avocado	fennel seeds	red radish
barley grass	figs	rutabaga
basil	garlic - fresh	savoy cabbage
bee pollen	ginger - fresh	sea vegetables
bell peppers	green cabbage	seaweed
black radish	horseradish root	sesame seeds
bok choy	joama	spelt
brussels sprouts	kale	spinach
buckwheat	kamut	sprouted seeds
cabbage	leaves	squash
caraway seeds	lemon - fresh	sweet potato
carrots	lentils	tomatoes
cauliflower	lettuce	turnip
cayenne pepper	limes - fresh	wheat grass
celery	mustard greens	white radish
cherries	navy beans	yam
chives	onion	zucchini

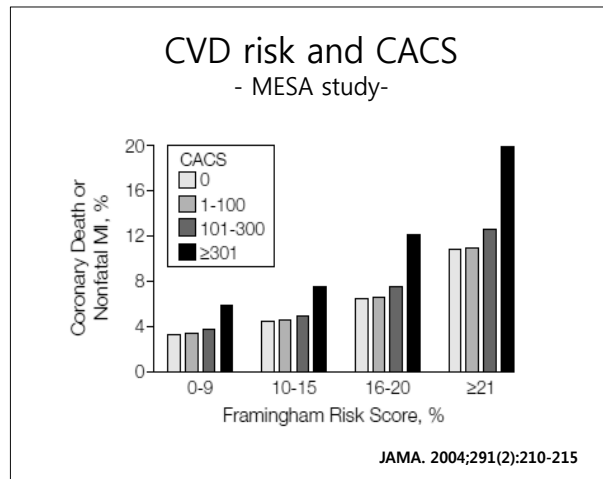


www.elemental.com

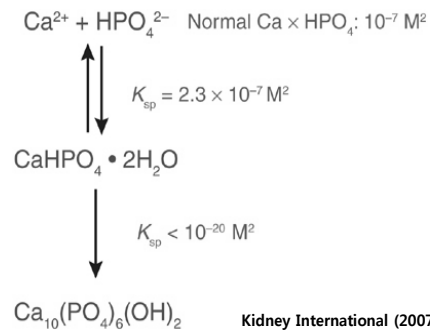
## Calcification of arteries



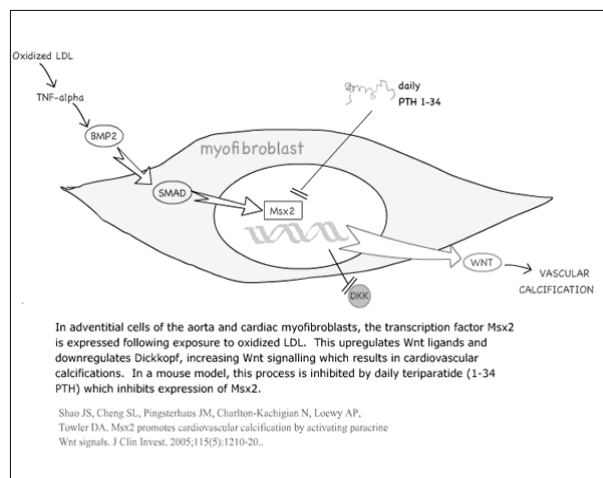
IBMS BoneKEy (2008) 5, 41-58



**A two-step process of ESC :  
formation of amorphous calcium phosphate  
spontaneous conversion to apatite.**

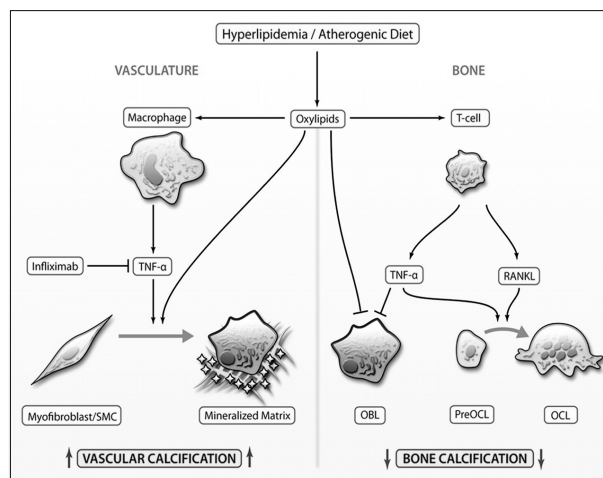


Kidney International (2007) 71, 282–283



## Intervention Points 5

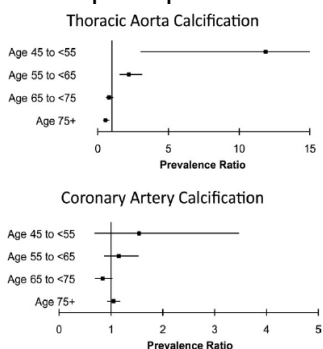
- Avoid hypercalcemia
  - Osteoporosis treatment
  - Avoid calcium supplement
- Vitamin K supplement



## Intervention Points 6

- Avoid hypercalcemia
  - Osteoporosis treatment
  - Avoid calcium supplement
    - Daily requirement less than 900mg
    - Vitamin D supplement
  - Daily PTH injection

## Vascular calcification and bisphosphonate use

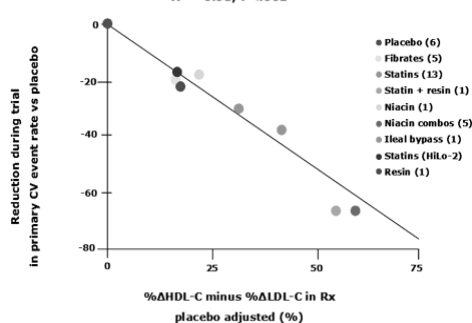


J Am Coll Cardiol. 2010;56(21):1752-1759

## Lipid Drug Classes Effects on LDL-C and HDL-C Change Compared to Primary Clinical Trial Outcome.

$$\text{Percent event reduction} = 1.28 (\% \Delta \text{HDL-C}) + 0.97 (\% \Delta \text{LDL-C})$$

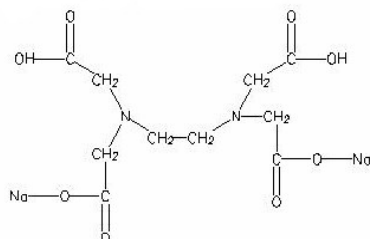
$$R^2 = 0.93; P < .001$$



Brown BG *et al.* J Clin Lipidology. (2007) 1:88-94.)

## Intervention Points 7

### Disodium EDTA



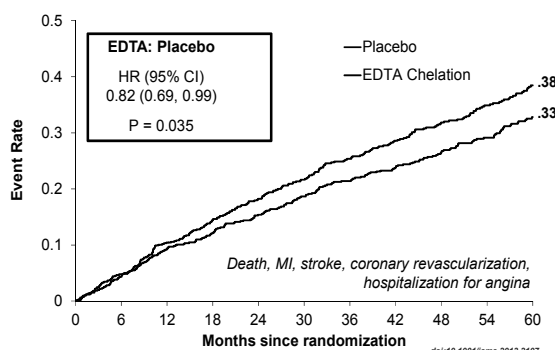
### CHELATION INFUSION

- disodium EDTA, 3 grams, adjusted downward based on eGFR
- ascorbic acid, 7 grams
- magnesium chloride, 2 grams
- potassium chloride, 2 mEq
- sodium bicarbonate, 840 mg
- pantothenic acid, thiamine, pyridoxine
- procaine, 100 mg
- unfractionated heparin, 2500 U
- sterile water to 500 mL

### PLACEBO INFUSION

- normal saline, 1.2% dextrose, 500 mL

## TACT Primary Endpoint Results



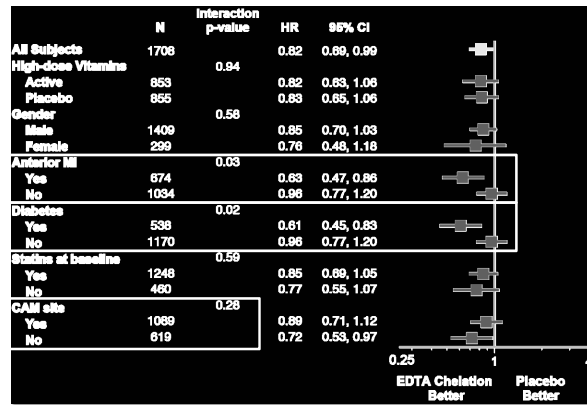
Number at risk:	869	776	701	638	566	515	475	429	384	322	205
Placebo											
EDTA chelation	839	760	703	650	588	537	511	476	427	358	229

## Comparison of Primary Endpoints

	EDTA Chelation (N= 839)	Placebo (N= 869)	Hazard Ratio (95% CI)	P Value
Primary Endpoint	222 (26.5%)	261 (30.0%)	0.82 (0.69,0.99)	0.035
Death	87 (10.4%)	93 (10.7%)	0.93 (0.70, 1.25)	0.642
Myocardial Infarction	52 (6.2%)	67 (7.7%)	0.77 (0.54, 1.11)	0.168
Stroke	10 (1.2%)	13 (1.5%)	0.77 (0.34, 1.76)	0.531
Coronary revascularization	130 (15.5%)	157 (18.1%)	0.81 (0.64, 1.02)	0.076
Hospitalization for angina	13 (1.5%)	18 (2.1%)	0.72 (0.35, 1.47)	0.359

doi:10.1001/jama.2013.2107

## Results from Subgroup analysis



## Side Effects and Safety

- 79 patients (38 EDTA, 41 placebo) discontinued infusions due to AE or side effect
- In 611 (1.1%) instances, short infusions by at least 15 minutes were administered. No serious adverse events were reported
- 4 unexpected severe adverse events possibly or definitely related to study therapy
  - 2 placebo arm, 1 death
  - 2 chelation arm, 1 death

## Take Home Message

- LDL 보다는 Small sized LDL, Oxidized LDL이 중요하다. 이를 조절하기 위한 노력이 중요하다.
- Vascular Calcification은 ASCVD의 중요한 위험인자이다.
- Chelation은 Vascular Calcification을 줄이는 좋은 Option이다.