

PREVIEW 1 - Paul Mason (Denver 2019)

Dr. Paul Mason: So anyway, he gave me this letter. You see, he had recently applied for income protection insurance that required medical testing and he had failed. So, this is him. This photo was taken a few days after he received the letter.

He's 48 years old, a regular exerciser and he also happened to be on a high fat ketogenic diet. This is what's called a DEXA scan. This is his DEXA scan showing his body composition. The blue areas represent lean tissue and the red areas represent fat.

So, I wasn't getting it, why was this guy considered too much of a medical risk to insure? Well it was his cholesterol levels. These are his actual test results, the ones the insurer used to make their decision and here are the US values there.

And on the right hand side you can see the standard reference ranges, which his values were meant to reflect. And based on these reference ranges his LDL of 6.7 or 259 in U.S. units is where he came unstuck.

The insurance company was worried that this high LDL level would cause him to have a heart attack. After all atherosclerosis plaques are filled with LDL cholesterol so high circulating levels must cause it, right?

No, this myopic perspective ignores the fact that both LDL and cholesterol are essential for good health. Indeed, they're essential for life full stop. And LDL itself can also be good and it can also be bad and the process of turning good LDL into bad LDL isn't driven by fat in the diet.

It's driven by carbohydrate. This is because carbohydrates even the so-called healthy complex carbohydrates, they're literally made of sugar, glucose molecules sequenced together. And when you eat carbohydrates that same glucose enters your circulation and there it can damage the LDL particles.