
Abstract 309: Twelve Year Followup for Managing Coronary Artery Disease Using a Nutrigenomics Based Diet and Supplement Program With Quarterly Assessment of Biomarkers

Steven R Gundry

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Abstract

Introduction: Coronary Artery Disease (CAD) is thought to be progressive; standard protocols call for a low fat/low cholesterol diet, exercise, and lipid lowering agents in an effort to slow the onset of recurrent MI's, stents, CABG's, stroke, or death. This results in an approximate 30-40% new event rate in 5 yrs.

Methods: Based upon our experience using a Nutrigenomic-based, Lectin-limited diet to prevent/reverse Metabolic Syndrome and CAD, we have enrolled and followed 978 pts (aged 42-89 yrs) with known CAD, defined as previous MI, stent, CABG, or positive stress test/angiogram, positive Corus score greater than 30, into a diet and supplement based, physician coached program, which emphasizes large amts of leafy green vegetables, olive oil, radical reduction of grain, legumes, nightshades, and fruits; and 4 oz amts of animal proteins, emphasizing shellfish, wild fish, and grass fed meats, while avoiding commercial poultry (Matrix Protocol). All Apo E 4 genotypes ate large amts of shellfish and avoided animal fats and cheeses. All pts were instructed to take 2-4,000 mg of high DHA fish oil, 200mg of Grape Seed Extract, and 50 mg of Pycnogenol per day. Supplements were individualized based on results of Advanced Cardiovascular Risk Markers, which were sent to three core labs, (Berkeley Heart Labs, and Singulex, Alameda, CA, Health Diagnostics Labs, Richmond,VA) q 3 months and followed to measure compliance and to change supplement/eating regimens.

Results: Pts have been followed for 1.5 to 12 years (mean 9 yrs). While enrolled, 13/978 pts (1.3%) have received a new stent, two that were predicted by a rising Lp-PLA2, two required CABG, based on a rising Corus score, despite HDL's of 110-120 mg/dl. There have been no MI's, unstable angina. One pt underwent carotid endarterectomy ; one pt suffered a CVA and died, while in atrial fibrillation, A second pt expired from a ruptured cerebral berry aneurysm. Total CV events over 12 years is 16/978 (1.6%).

Conclusions: We conclude that simple Nutrigenomic-based dietary interventions, emphasizing lectin avoidance, with compliance and supplement choices based upon q 3 month assessment of biomarkers, represents a quantum leap forward in preventing/modifying Cardiovascular events in known CAD patients.