Why High Cholesterol Isn’t the Problem (Liver Explained) | Sinclair Kennally Transcript

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Cholesterol As A Tool

We think of cholesterol as a tool that We think of cholesterol as a tool that the body uses. And so we want to ask the body uses. And so we want to ask anytime cholesterol is high, anytime cholesterol is high, is it a problem in and of itself, or is is it a problem in and of itself, or is it the firefighter that's getting sent it the firefighter that's getting sent to put out the fire? We used to call it to put out the fire? We used to call it um like blaming high cholesterol is like um like blaming high cholesterol is like blaming the plumber that comes to fix blaming the plumber that comes to fix the pipes. There's a problem in the the pipes. There's a problem in the pipes. Do we want to ignore the problem pipes. Do we want to ignore the problem in the pipes, or do we want to send the in the pipes, or do we want to send the plumber in? It's a good short-term plumber in? It's a good short-term strategy. It's just an incomplete one.

strategy. It's just an incomplete one.

Why Numbers Donu2019t Match Symptoms

So we would just want to consider that. So we would just want to consider that. I know this. So many people are confused I know this. So many people are confused about cholesterol and blood pressure.

about cholesterol and blood pressure. Like, my cholesterol is high, but I eat Like, my cholesterol is high, but I eat clean. I saw that in the chat just now a clean. I saw that in the chat just now a few minutes ago. My blood pressure won't few minutes ago. My blood pressure won't budge even though I'm doing all the budge even though I'm doing all the right things. My labs are normal, but I right things. My labs are normal, but I don't feel good. Or statins lowered my don't feel good. Or statins lowered my numbers, but nothing else changed. And numbers, but nothing else changed. And it's because these are often metabolic it's because these are often metabolic and liver signaling issues, not and liver signaling issues, not necessarily isolated heart problems in necessarily isolated heart problems in and of themselves. Cholesterol is not a and of themselves. Cholesterol is not a bad thing. It's a tool. It's a bad thing. It's a tool. It's a biological tool. It's not a toxin. It's biological tool. It's not a toxin. It's not toxic to the body itself. We have to not toxic to the body itself.

Healing Fats And Liver Health

We have to remember that cholesterol is required remember that cholesterol is required for cell membrane structure, which every for cell membrane structure, which every cell in your body has to have. We want cell in your body has to have. We want to eat healing fats. So what would to eat healing fats. So what would healing fats be? Let's call them out in healing fats be? Let's call them out in the chat. Let's teach each other.

the chat. Let's teach each other. Healing fats would be you would do Healing fats would be you would do animal-based healing fats, right? So animal-based healing fats, right? So like clean grass-fed ruminant animals like clean grass-fed ruminant animals are a great source of healing fats. What are a great source of healing fats. What else would be a healing fat? Coconut else would be a healing fat? Coconut oil, exactly. Yes, tallow, ghee, oil, exactly. Yes, tallow, ghee, exactly, absolutely. Avocados, yeah.

exactly, absolutely. Avocados, yeah. Salmon, yes, exactly. Black oil, as long Salmon, yes, exactly. Black oil, as long as it's not rancid, absolutely, Robin.

as it's not rancid, absolutely, Robin. So if you wanted to do flax oil and use So if you wanted to do flax oil and use that as a tool, you want to make sure that as a tool, you want to make sure that you're getting that you're getting um cold-pressed flax oil, and it's not um cold-pressed flax oil, and it's not the industrial um ground-up flax oil, the industrial um ground-up flax oil, because it's going to get oxidized and because it's going to get oxidized and rancid,

and there's going to be some rancid, and there's going to be some contamination in there. So um that's contamination in there. So um that's just something to consider. Olive oil?

just something to consider. Olive oil? Absolutely, Christina. Yes, first Absolutely, Christina. Yes, first pressed, cold pressed, extra virgin pressed, cold pressed, extra virgin olive oil, absolutely. We just want to olive oil, absolutely. We just want to be really intentional about where we be really intentional about where we choose these items from. So, it's not choose these items from. So, it's not all fats are bad, that's not true. The all fats are bad, that's not true. The franken fats are hard on the body. The franken fats are hard on the body. The fake ones that we have made in a fake ones that we have made in a laboratory, those are really really hard laboratory, those are really really hard on your liver to try to break down. And on your liver to try to break down. And they absolutely compromise the body's they absolutely compromise the body's ability to make healthy cholesterol and ability to make healthy cholesterol and also utilize cholesterol well to build also utilize cholesterol well to build up these resilient cell membranes up these resilient cell membranes throughout the body. And it absolutely throughout the body. And it absolutely is a factor in how fast you age and how is a factor in how fast you age and how good you feel. How much inflammation are good you feel. How much inflammation are you feeling in the body? So, you feeling in the body? So, that's one key takeaway from today is that's one key takeaway from today is take a fresh look at your own healing take a fresh look at your own healing fats.

Liver Overload And Fat Sensitivity

fats. fats. We want to remember that um we often get We want to remember that um we often get scared away from fat when, you know, we scared away from fat when, you know, we start to see signs of cardiopulmonary start to see signs of cardiopulmonary stress, um you know, liver overload, a stress, um you know, liver overload, a sensitivity to fats because you might sensitivity to fats because you might have had a gallbladder attack, things have had a gallbladder attack, things like that, or you just don't tolerate like that, or you just don't tolerate heavy meals well anymore. That was me heavy meals well anymore. That was me for a long time. Oh, I just need to eat for a long time. Oh, I just need to eat light. I just want to eat tiny, tiny light. I just want to eat tiny, tiny meals. I guess I just must be delicate.

meals. I guess I just must be delicate. No, it was my overloaded liver. And then No, it was my overloaded liver. And then it just could not keep up. And so, it it just could not keep up. And so, it didn't feel good when I tried to eat didn't feel good when I tried to eat heavy meals, but I didn't realize what I heavy meals, but I didn't realize what I needed to do was build bile faster, thin needed to do was build bile faster, thin out the bile, and excavate out the bile out the bile, and excavate out the bile sludge, and yes, the gallstones that had sludge, and yes, the gallstones that had built up over years and actually built up over years and actually decades. And this started to become a decades. And this started to become a problem for me in my 20s. The bill is problem for me in my 20s. The bill is coming due for us certainly earlier and coming due for us certainly earlier and earlier. I like to think about this as earlier. I like to think about this as um I'd take a gentle step away from um I'd take a gentle step away from genetics because we often go to those genetics because we often go to those first in allopathic medicine. Like, ah, first in allopathic medicine. Like, ah, it's just your genes. Okay, but do you it's just your genes. Okay, but do you have control over your genes? Not have control over your genes? Not really, not last time I checked.

really, not last time I checked. Um but you do have control over your Um but you do have control over your diet. You do have control over your diet. You do have control over your stress levels. You do have control over stress levels.

Why Cholesterol Is Essential

You do have control over your ability to design your own detox to your ability to design your own detox to build bile faster, thin out the blood build bile faster, thin out the blood the bile, and also to um flush out that the bile, and also to um flush out that junky sludge and gallstones stuff that junky sludge and gallstones stuff that we'll take a look at today. All that is we'll take a look at today. All that is a really long way of saying cholesterol a really long way of saying cholesterol is a requirement. It is not optional.

is a requirement. It is not optional. It's not bad. It's a wonderful wonderful It's not bad. It's a wonderful wonderful

tool. We've got to have it for cell tool. We've got to have it for cell membrane structure. We've got to have membrane structure. We've got to have fats to build healthy cholesterol. We fats to build healthy cholesterol. We just need the right fats. And we don't just need the right fats. And we don't want to be scared of fats. Um we also want to be scared of fats. Um we also require absolutely require cholesterol require absolutely require cholesterol for hormone production. So, everybody for hormone production. So, everybody who's feeling the pinch with um you who's feeling the pinch with um you know, hormone dysregulation in this day know, hormone dysregulation in this day and age, want to remember that we we and age, want to remember that we we still need cholesterol for those and to still need cholesterol for those and to not be afraid of them. Cortisol, not be afraid of them. Cortisol, estrogen, testosterone, progesterone, estrogen, testosterone, progesterone, these are essential for us to feel these are essential for us to feel strong enough to function. We also have strong enough to function. We also have to to to D synthesis. And yes, you guessed it D synthesis. And yes, you guessed it because bile is my favorite thing to because bile is my favorite thing to talk about than parasites, I guess.

talk about than parasites, I guess. Well, and mold. Okay, so I have a few Well, and mold. Okay, so I have a few favorites.

Bile Flow And Cholesterol Link

favorites. favorites. But in bile acid production is dependent But in bile acid production is dependent upon having enough cholesterol to build upon having enough cholesterol to build bile salts. So, bile is made in large bile salts. So, bile is made in large part from cholesterol itself. And part from cholesterol itself. And compounding that with key amino acids compounding that with key amino acids and compounds. You can't make bile fast and compounds. You can't make bile fast enough if you don't have enough enough if you don't have enough cholesterol. And conversely, if you have cholesterol. And conversely, if you have too much cholesterol or your doctor's too much cholesterol or your doctor's saying, "Hey, it's too high. I'm saying, "Hey, it's too high. I'm concerned." What we want to do is concerned." What we want to do is actually look first at bile flow because actually look first at bile flow because your liver might just be overloaded and your liver might just be overloaded and reduced in efficiency. And it's not reduced in efficiency. And it's not going to show that on your liver going to show that on your liver enzymes. And I'll show you that chart enzymes. And I'll show you that chart today so that you can unpack that for today so that you can unpack that for yourself. So, if your body is making or yourself. So, if your body is making or holding under cholesterol, holding under cholesterol, it's usually responding to stress, it's usually responding to stress, not malfunctioning because we actually not malfunctioning because we actually need it for these things. Let's consider need it for these things. Let's consider first where cholesterol comes from first where cholesterol comes from before we talk about how to solve this before we talk about how to solve this problem for ourselves, right?

problem for ourselves, right? Cholesterol, you guessed it, is Cholesterol, you guessed it, is primarily made in the liver. Uh primarily made in the liver. Uh cholesterol synthesis occurs mainly in cholesterol synthesis occurs mainly in hepatocytes, in those liver cells, built hepatocytes, in those liver cells, built via the mevalonic pathway.

via the mevalonic pathway. And production increases under stress, And production increases under stress, under inflammation, insulin resistance, under inflammation, insulin resistance, and toxin load. And also, I would add and toxin load.

Liver Production And Stress Signals

And also, I would add infection load. So, if you are somebody infection load. So, if you are somebody who is dealing with silent chronic who is dealing with silent chronic infections anywhere in the body, your infections anywhere in the body, your body will use um as a strategy it has body will use um as a strategy it has the potential to use more cholesterol to the potential to use more cholesterol to try to support and send resources. Isn't try to support and send resources. Isn't that interesting? It can be a sign that that interesting? It can be a sign that your body is actually fighting off high your body is actually fighting off high infection loads.

infection loads. And actually, many of us as adults are And actually, many of us as adults are carrying silent infections in the carrying silent infections in the sinuses, in the lungs, deep in the sinuses, in the lungs, deep in the lymphatics, maybe your armpits are lymphatics, maybe your armpits are little swollen or tender to the touch, little

swollen or tender to the touch, or maybe you're carrying a little bit of or maybe you're carrying a little bit of extra weight on the belly, and it's not extra weight on the belly, and it's not actually all fat. It could be partially actually all fat. It could be partially fat, but might be some extra lymphatic fat, but might be some extra lymphatic fluid stuck there, too, trying to dilute fluid stuck there, too, trying to dilute a stressed-out infected environment. So, a stressed-out infected environment. So, it's just something to remember that it's just something to remember that this is often overlooked until it this is often overlooked until it finally gets to like a really acute finally gets to like a really acute stage. Most of us have like the silent stage. Most of us have like the silent chronic toxin and infection load that chronic toxin and infection load that we're just kind of putting up with. But we're just kind of putting up with. But one of the ways to put up with it is by one of the ways to put up with it is by producing more cholesterol, or producing more cholesterol, or conversely, you might be stuck with a conversely, you might be stuck with a higher cholesterol level because your higher cholesterol level because your body's not able to use enough of it to body's not able to use enough of it to make the bile that it really wants to make the bile that it really wants to out of that cholesterol. So, it's out of that cholesterol.

Liver Signaling And Root Cause

So, it's important to remember. You also have to important to remember. You also have to understand that dietary cholesterol understand that dietary cholesterol plays a much smaller role in deciding plays a much smaller role in deciding what your cholesterol levels are for the what your cholesterol levels are for the body than liver signaling does itself.

body than liver signaling does itself. Liver signaling is the defining factor Liver signaling is the defining factor and your liver is determining hey how and your liver is determining hey how high should my cholesterol be based on high should my cholesterol be based on the infections it's getting told about the infections it's getting told about elsewhere in the body, the stress that elsewhere in the body, the stress that it's getting told about from your it's getting told about from your nervous system, the toxin load that it's nervous system, the toxin load that it's interpreting and trying to filter out interpreting and trying to filter out for you, and yes, absolutely insulin for you, and yes, absolutely insulin resistance.