Why These 7 Foods Move LDL More Than People Realize Transcript

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Introduction to the cholesterol food framework

Oatmeal. Walnuts. New Orleans style smothered okra. Now when most people see that, they think, solid choices. The 2026 ACC AHA cholesterol guideline, it has a more specific name for it.

So in this video, the seven food categories that actually move cholesterol. And the one bonus food that may affect plaque that's already forming in your arteries.

I'm Dr. Columbus Batiste. An interventional cardiologist still in practice. When prevention fails, I am one of the people in the cath lab trying to open blocked arteries in the middle of the night.

So today I'm translating the 2026 cholesterol guidelines that I want to take you from the cath lab to the kitchen. Now the most evidence-based food framework we have for lowering LDL, it's a portfolio diet consists of seven categories each one with a specific mechanism.

Number one, viscous fiber It traps bile acid in the gut and your liver pulls cholesterol from the blood to replace them. That lowers LDL. Now, when you take this fiber from your cath lab to the kitchen, I want you to start thinking about okra, eggplant, and guava.

Portfolio diet overview and evidence

Number two, plant protein. This replaces animal protein packaged with saturated fat. I wanted you think of something you haven't thought of before. Lupin.

3. Nuts They improve the fat profile of the diet. In real food, that means walnuts, almonds, and pistachios. Next, you have plant sterols. They compete for cholesterol absorption.

What does that look like on a plate? Tofu and and lentils. Next, you have unsaturated fats. They replace the butter, the cheese and fatty meats to saturated fats, translate into your kitchen.

I want you to think avocado, olives and tahini. Whole grains, they add fiber and metabolic support. And once you think about barley, next legumes, fiber implant protein in one move.

Now lupin is a legume and that's why it earns two spots. When the seven categories are combined in a portfolio style pattern, LDL drops by around 26 mg per deciliter.

Not one food, multiple mechanisms pulling in the same direction. And here's a data point the 2026 guidelines they cite directly. There was a study that looked at the 62 people, same study, they compare vegan versus the Mediterranean diet.

The vegan diet, it resulted in a 14.8 mg-per-dl LDR reduction. Mediterranean diet, no significant decrease. That's not an influencer opinion, that is a randomized crossover trial cited at the highest recommendation level in the guideline.

Now, before we go deeper into each of those foods, I need you to pause and don't scroll away, because after this, i'm going to tell you the four markers your doctor should order beyond an LDL.

Because knowing what to eat is only half the equation, knowing whether it's working Now that's the other half, because I've seen the version of this story.

Okra, eggplant, avocado, and guava

A person who says, doc, my cholesterol was only a little high and I felt fine. Then comes the scan, then comes awareness that there's plaque, and then the conversation changes.

So don't hear this as a food list. I want you to hear it as an early coronary intervention and early artery protection. Are you ready to get into this?

Let's make this real. Ok, what's your first food? Okra. No, don' look at me like that. If you don't like okra, it just means you haven't had it cooked right.

That slimy texture people joke around? That's part of the mechanism. Okra's mucilage. It's viscous polysaccharide. it sequesters bowel acids in the gut and it forces your liver to pull cholesterol from the blood to replace it.

So it's not just a side dish, It is a functional food. Okay, number two. Eggplant. This is fiber plus a specific antioxidant compound called nasunin. Now nasuinin, it chelates iron, which means that it binds the metal that initiates LDL oxidation.

So eggplant is not primarily lowering your LDl number. It's actually protecting the LDO you already have from becoming dangerous. All right, quick note.

I know you're thinking this. For most people, the evidence does not support avoiding nightshades. Yes, eggplant stays on the plate. Okay, number three, avocado.

This one is mechanistically distinct. It has oleic acid. This is avocado's primary fat. It upregulates hepatic LDL receptor activity. The more receptors, means faster clearance of the LDO from the bloodstream.

And specifically, reduction of small dense LDl and oxidized LDo, the most atherogenic lipoprotein subtypes. So avocado is a particle quality food. Okay, number four is going to surprise you, especially if you love the tropics, guava.

It's rich in pectin. As high pektin, which is the soluble fiber and it has amongst the highest amongst any of the tropical fruit. So pectorin it forms a viscous gel that traps bile acids in as well as cholesterol in the gut.

So, bile acid binding and lycopene-based antioxidant activity, it layers the mechanism. Alright, number five, our superstar, lupin. I told you about that one.

Now, most people don't even know what lopin is. It's a legume eaten primarily in the Mediterranean, South America, and Australia. And here's why it belongs on the list.

Lupin actually is pretty high in protein, about 42 percent. In its protein fractions, they bind bile acids in a gut. Some studies that binding exceeded the effect of cholestyramine.

This is a prescription bile acid sequestrant drug, a food, outperforming a drug in bile-acid binding. That's the, wait, what was that food?

Lupin, soy, and barley

All right, number six, soy, tofu, tempeh, edamame. Now most people know soy lowers cholesterol, but most don't know why. So, soy is a natural source of a plant sterol called stigmasterol.

Now, stig masterol, it does something the other plantsterols do not. Yes, It competes with cholesterol for gut absorption, but it also goes to the liver, where it inhibits key lipogenic enzymes, fatty acid synthase, acetyl-CoA carboxylase and promotes fatty-acid oxidation.

That's not just blocking absorption. that's reprogramming your hepatic lipid metabolism. Tofu, tempeh, and umami, that same soybean, Same stick master all different plates.

Okay, number seven and last barley This is the food of the gladiators, right? And it means barley men and they ate it for strength and endurance now We know why it belongs in a cholesterol conversation because Barley's beta-glucan It doesn't just trap bile acids.

It actually drives the liver to synthesize new bile assets from cholesterol. Now that's a dominant mechanism. Upregulating the hepatic bile acid production and the LDL reduction correlates directly with the beta-glucan viscosity.

The thicker the gel, the greater the effect. Okay, this NYX bonus one, it's one that you've heard before. I actually mentioned it. And so you've heard about walnuts and you might be wondering, okay, why are you listing walnuts amongst all these other foods that most people haven't heard of?

Here's why. Walnuts contain alpha-linolenic acid. Now this is a polyunsaturated fatty acid that upregulates hepatic LDL receptor expression, the same receptor pathway as avocado, different fat, and different food.

And they are one of the most sustainable swaps in the portfolio diet. You can put them on anything and the best plan is always the one that you can repeat.

So yeah, you've heard of walnuts. That does not make them any less worth repeating. All right, two more additions that go beyond the plate. Green tea.

Now I say green tea, it's beyond a plate, green it contains catechin and caticchins, they appear to inhibit hepatic cholesterol synthesis as well as upregulate LDL receptors at the liver.

that is two mechanisms, less production, faster clearance. another lever in a multi-lever strategy. All right, this one's important. Everything we just covered, it works mainly on your cholesterol number.

This one, It has been studied in different way. Your coronary calcium score. Small randomized controlled trials have shown a consistent signal.

Walnuts, green tea, and aged garlic extract

Age, garlic, extract. may slow progression of coronary calcification compared to placebo, often in patients who are already on statins. So there was a 2023 systematic review in the Journal of American Heart Association, and they found that aged garlic extract had the most consistent calceification slowing signal amongst all nutritional intervention study.

It also showed regression of soft vulnerable plaque, at least in metabolic syndrome and diabetes. And this is important because it's the kind more prone to rupture that leads to a heart attack.

Now let me be clear, the studies are relatively small, and we know this is not a replacement for lifestyle, blood pressure, sugar control, or maybe even medications.

But among nutritional studies, especially those in calcium space, this belongs in the conversation. And I want to be precise about something. The 2026 guideline does not recommend garlic for lowering LDL.

As a matter of fact, The Sport Trial tested it and it did not outperform placebo on LDl. That's not the claim here, that's what I'm talking about. The calcium data is a completely separate lane.

So it tells us that aged garlic extract, it is an adjunct, not a substitute, and that is the big difference. Now here is why all of this matters. Foods like the portfolio, the green tea, garlic, because every one of those interventions is working on a number.

And most people, they're watching the wrong number, so here are four markers your doctor should consider ordering beyond LDL. Now first we have to understand why.

Well LDL-C is the amount of cholesterol inside LDO particles. It does not tell you how many particles are in your arteries. And particles matter because particles, that's what enters the artery wall.

So the number one test your doc should consider, April B. Now the 2026 guidelines, they formally recognize Able B as providing superior risk stratification, especially compared to LDLC alone.

Why? Because your LDL can look controlled while your ABLE B remains elevated, which means your atherogenic particles are still circulating. Now, so many people have heard of individuals who have said, I was fine.

I just was given a clean bill of health. My cholesterol was perfect. And then the heart attack hit.

Beyond LDL: ApoB, Lp(a), hs-CRP, and particle number

Well, the heart attack hit because perhaps we weren't looking at all of these other markers, which are equally, or excuse me, more predictive than the LDLC.

The National Lipid Association, they call this discordance. And that's when discordants exists when April B is the stronger predictor of risk. This is especially relevant in patients with diabetes, metabolic syndrome or elevated triglycerides.

Okay, what's up number two, LPLA. Now, 2026 guidelines, state elevated LPA testing to a class one recommendation for all adults. So an LPA level of 180, it increases your cardiovascular risk by fourfold.

And this is equivalent to an inherited form of familial hypercholesterolemia. Diet doesn't usually move it. Exercise doesn' usually moves it, and that is exactly why we want to know it because if it's high, you need to be more aggressive with every other risk factor you control.

I'll never forget a patient came in and their LP low A was extremely high, over 180, it was to 188. So we began the process of working to drive down the LDL particle, drive their high sensitivity C-reactive protein, Drive down their April B with the use of the portfolio dietary pattern.

And I'm so happy to say that they were actually able to lower those to the level in which it reduced their risk exponentially. Alright, number three, high sensitivity C-reactor protein.

The 2026 guideline now recommends this high-sensitivity C reactor protein measurement for universal screening in both primary and secondary prevention.

Now the C Reactor Protein is indeed a metric of inflammation. And so there was a large study called the Jupiter trial, and it enrolled patients with an LDL below 130, where most guidelines would not have flagged them.

But they did have a high sensitivity C-reactor protein above two. So in addition to lifestyle, they instituted certain medication statins and found that they were able to reduce cardiovascular events by 47%. Normal LDl elevated markers of inflammation, significant residual risk.

And that's what high-sensitivity C-reactive protein catches that LDLC alone misses. Okay, number four, LDL particle number. Another lens on a particle burden.

When it disagrees with your LDLS, trust the particles. mass, particles, inflammation, inherited risk. That's the complete picture. All right. A calcium score is going to show you whether the plaque has already left a footprint and meaning has the cholesterol elevation already led to damage inside of your vasculature.

score of zero is great. It means lifestyle of first approach is supported in the right person. A score 100 or higher, the urgency of treatment begins to shift.

And if your score is moving year over year, you want to consider aged garlic extract in addition to the other

therapies that you discussed with your care provider.

Cholesterol is not just a lab value. It's just a story your arteries are telling. And the earlier you learn to read that story, the more likely you are to change the ending.

Calcium score and closing advice

You have to build the pattern. Oats and beans and nuts and olive oil, plant protein, whole grains. I want you to layer in the okra, avocado, eggplant, guava, lupin beans, soy, barley, walnuts, and green tea.

Now, if calcium is in the conversation, once you ask about age garlic extract and begin to take that, I want you to inspect what you expect, which I mean by that is know your numbers.

Your apolipoprotein B, your LDL particle size, Your high sensitivity C-reactor protein, you're lipoprotin A, and maybe your calcium score. Now if you need medication, it's all about lowering the risk by any means necessary.

Food is always going to be the foundation. food is medicine and we have to use it effectively. All right, remember, If you wanna go fast, go alone. If wanna far, together.

Let's go far together by building healthier hearts and stronger communities. So I need you to like it, share it send it. Save a life. I'll see you next time.