

GOOD HEALTH ■

Ask Sarah



Dr Sarah Jarvis answers your health questions this month

- Natural ways to lower cholesterol
- Return your screening test
- A better night's sleep

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Q MY DOCTOR HAS SAID MY RISK FACTORS for heart disease make me a borderline case to take statins. I'd really like to avoid drugs if I can – so how else can I lower my cholesterol?

A Firstly, let me say that statins do work. However, the greatest benefits are seen in people at highest risk. In one of the biggest studies, among people who had a history of heart attack, stroke or diabetes, death rates from heart problems were reduced by 18% just by taking a statin.

That's why doctors recommend that pretty much everyone in these groups takes them.

However, for people at lower risk of heart attack, such as you, the absolute benefits may be smaller, and lifestyle changes to reduce cholesterol can certainly make a significant difference. If you're overweight, losing around a stone and a half can cut your 'bad' LDL cholesterol by 15% and raise your 'good' HDL cholesterol (which protects against heart attack and stroke) by 8%. Regular exercise also raises your HDL cholesterol. And a recent study has shown that switching to a Mediterranean diet (lower in animal fat and higher in fish, fruit and vegetables, pulses and olive oil or nuts) also translates into a lower risk.

Foods fortified with sterols, such as spreads, drinks and milk, can lower cholesterol by up to 10%. Plant sterols are found naturally in foods like nuts, seeds and avocados – but you'd need several avocados a day to get the same effect. A newcomer to the natural cholesterol-lowering field is bergamot (see bergamet.co.uk). The oil from the skin of the bitter bergamot orange fruit gives Earl Grey tea its flavour and was the key ingredient for the first ever eau de Cologne. But the juice has been used for decades by southern Italians to 'increase the fluidity of the blood' and has been found to be very high in antioxidants. Although no studies have been done specifically to see if it reduces heart attack, early scientific research suggests it might reduce LDL cholesterol by 30%.

PHOTOGRAPH OF SARAH: NICKY JOHNSTON

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Good Housekeeping HEALTH WATCH

OUR HEALTH PROMISE

No fluff, no crackpot theories or bad medicine. Health articles in Good Housekeeping are always double-checked for accuracy by a leading expert from the GH Health Watch team.

Sarah's tips for...

Calming restless legs

Patients use all sorts of different terms – toothache in the legs, fidgety, crawling or tingling under the skin. They're all describing restless leg syndrome, which affects one in 10 people and can make night-times a misery. Symptoms tend to come on at night or if you're sitting cramped up, and usually affect both legs. It may be hereditary.

- 1 Stay chilled. Cooling your legs down can both prevent and relieve symptoms. Try a 5-10 minute foot soak in cold water before bed.
- 2 Try cutting out caffeine and alcohol, especially in the evenings. Tea contains caffeine, too, and so do some cola drinks and chocolate.
- 3 Could your symptoms be caused by your medicines? Several tablets, ranging from antihistamines and antidepressants to blood pressure treatments can cause restless legs.
- 4 Restless legs can be caused by other conditions, like iron deficiency or kidney problems. See your GP for a blood test if symptoms persist.
- 5 Up to one in five women gets restless legs during pregnancy. Don't panic – the symptoms usually go away after you've had the baby.

Q SADLY, I'VE BEEN DIAGNOSED WITH BOWEL CANCER after a screening test, even though I'd had no symptoms. My consultant said less than half of people sent these tests do them. Is this right?

A I'm sorry to hear your news, but you've almost certainly improved your prospects by going for screening. Everyone in the UK is invited for bowel screening every two years – in England from age 60-69 (60-74 from 2014, as already offered in Wales), in Scotland from 50-74, and in Northern Ireland from 60-71. Patients often don't send back their screening tests, and usually tell me they'd rather not know. This head-in-the-sand attitude makes no sense where cancer is concerned – it's not going to go away. The whole point of screening is to increase the number of people diagnosed at an early stage, when survival rates are over 90%. At present, only one in seven people with bowel cancer is diagnosed at this stage. Of those screened, 98% get the all-clear – the rest are invited for a further telescopic examination and nine in 10 of them are found not to have cancer. So if a bowel-screening letter comes in the post, don't ignore it! □