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Abstract

Background: The prevalence of atherosclerotic cardiovascular disease appears to be reduced, according to a large body of research, by lowering blood levels of the ratio of low-density lipoprotein cholesterol (LDL-C)/ high-density lipoprotein cholesterol (HDL-C), triglyceride (TG)/HDL-C, and LDL-C.

Objective: The objective of the investigation was to determine the safety and endurance of policosanol (20 mg/d), as well as its efficacy in healthy individuals. Two parallel groups in this randomized, double-blind, placebo-controlled human experiment received either a policosanol (20 mg/d) or a placebo for eight weeks. 80 people were randomly assigned, with a mean (SD) age (years) of 42.61 (13.51), a mean (SD) BMI (kg/m^2) of 24.53 (3.57), a mean (SD) weight (kg) of 66.71 (14.30), and a mean (SD) height (cm) of 164.21. (7.99).

Results: At 8 weeks, when compared to the baseline group, the policosanol (20 mg/d) batch displayed considerably greater LDL-C (-4.87 ± 11.30 mg/dL; p = 0.014), total cholesterol (-6.82 ± 14.32 mg/dL; p = 0.007), triglyceride (-9.37 ± 19.27 mg/dL; p = 0.008), non HDL-C reductions (-10.32 ± 13.75 mg/dL; p = 0.0001), and significantly greater augmentation of HDL-C (3.50 ± 4.55 mg/dL; p = 0.010). Policosanol (20 mg/d) treatment also significantly reducing the serum levels of TC/HDL-C (p =0.0001) and LDL-C/HDL-C (p =0.0002), triglyceride/HDL-C (p =0.001), and T-cholesterol-HDL-C/HDL-C (p =0.0001) ratios.

Conclusion: In humans, policosanol delivery resulted in a lowering of LDL-C levels and an improvement in other lipid markers, demonstrating the product potential to regulate hypercholesterolemia.

Keywords: Policosanol, Low-density lipoprotein cholesterol, Triglyceride, Hypercholesterolemia, Cardiovascular disease