Record #1 of 7 ID: CN-00194184 AU: Wana J AU: Lu Z AU: Chi J AU: Wang W AU: Su M AU: Kou W AU: Yu P AU: Yu L AU: Chen L AU: Zhu J-S AU: Chang J TI: Multicenter clinical trial of the serum lipid-lowering effects of a Monascus purpureus (red yeast) rice preparation from traditional Chinese medicine SO: Current Therapeutic Research - Clinical and Experimental YR: 1997 VL: 58 NO: 12 PG: 964-978 XR: EMBASE 1998041151 KY: Chinese Drug --Adverse Drug Reaction --Ae/ Chinese Drug --Clinical Trial --Ct/ Chinese Drug --Drug Therapy --Dt/ Chinese Herb --Clinical Trial --Ct/ Chinese Herb --Drug Therapy --Dt/ Low Density Lipoprotein Cholesterol --Endogenous Compound --Ec/ High Density Lipoprotein Cholesterol -- Endogenous Compound -- Ec/ Cholesterol -- Endogenous Compound --Ec/ Unclassified Drug/ Hyperlipidemia --Drug Therapy --Dt/ Traditional Medicine/ Chinese Medicine/ Cholesterol Blood Level/ Lipoprotein Blood Level/ Drug Efficacy/ Heartburn --Side Effect --Si/ Flatulence --Side Effect --Si/ Vertigo --Side Effect --Si/ Diet Supplementation/ Human/ Male/ Female/ Major Clinical Study/ Clinical Trial/ Single Blind Procedure/ Multicenter Study/ Controlled Study/ Adult/ Oral Drug Administration/ Article/ Priority Journal CC: HS-HANDSRCH: SR-COMPMED: SR-VASC AB: The ability of a natural product Monascus purpureus (red yeast) rice (cholestin3(TM)) preparation to regulate serum lipids was assessed in a multicenter, single-masked clinical trial. A total of 446 patients with hyperlipidemia were randomly assigned to two groups: a group of 324 patients received a M purpureus (red yeast) rice preparation, and a positive control group of 122 patients received another Chinese herbal medicine, Jiaogulan (Gynostemma pentaphylla). After 8 weeks, serum total cholesterol decreased significantly by 22.7% and low-density lipoprotein cholesterol by 30.9% in the patients treated with a M purpureus rice preparation, and patients in the positive control group showed 7.0% and 8.3% reductions, respectively. M purpureus treatment also significantly increased highdensity lipoprotein (HDL) cholesterol by 19.9%, which was a significantly larger increase than the 8.4% increase observed in the positive control group. Notably M purpureus rice preparation significantly lowered serum triglycerides by 34.1% after 8 weeks, which was a significantly greater decrease than the reduction of 12.8% observed in the positive control group. When the overall therapeutic effects of M purpureus rice were scored, with one or more lipid risk factors being reduced and HDL cholesterol being increased, according to criteria established by the Ministry of Public Health of China, 93.2% of patients in the treatment group benefited from M purpureus. This total efficacy rate was significantly better than the rate of 50.8% in the positive control group. Therefore, use of M purpureus rice preparation in conjunction with a proper diet produced a favorable lipid-lowering effect in hyperlipidemic patients. The patients experienced a few mild side effects (heartburn, flatulence, and dizziness) during the 8-week treatment with M purpureus rice preparation. We concluded that this traditional Chinese rice preparation

used as a dietary supplement is extremely effective and well tolerated in reducing elevated serum cholesterol and triglycerides. Copyright © 2011 Elsevier B. V., Amsterdam. All Rights Reserved. US: http://onlinelibrary.wiley.com/o/cochrane/clcentral/articles/184/CN-00194184/

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Record #2 of 7 ID: CN-00803265 AU: Cicero AFG AU: Benvenuti C TI: Efficacy of a red yeast rice based nutraceutical in large subgroups of hypercholesterolemic subjects in every day clinical practice SO: Mediterranean Journal of Nutrition and Metabolism YR: 2010 VL: 3 NO: 3 PG: 239-46 XR: EMBASE 2010658774 KY: Adult; Aged; Article; Cholesterol Blood Level; Clinical Trial; Controlled Clinical Trial; Controlled Study; Diet Therapy; Dosage Schedule Comparison; Drug Efficacy; Evening Dosage; Female; Human; *Hypercholesterolemia; Dt [Drug Therapy]; *Hypercholesterolemia; Th [Therapy]; Ischemic Heart Disease; Pc [Prevention]; Italy; Major Clinical Study; Male; Menopause; Multicenter Study; Priority Journal; Randomized Controlled Trial; Astaxanthin; Cb [Drug Combination]; Folic Acid; Cb [Drug Combination]; High Density Lipoprotein Cholesterol: Ec [Endogenous Compound]; Low Density Lipoprotein Cholesterol; Ec [Endogenous Compound]; *Nutraceutical; Ct [Clinical Trial]; *Nutraceutical; Dt [Drug Therapy]; Policosanol; Cb [Drug Combination]; Ubidecarenone; Cb [Drug Combination]; Xuezhikang; Cb [Drug Combination] AB: To verify the efficacy of a patented proprietary combination of nutraceuticals containing natural hypocholesterolemic and antioxidant agents as red yeast rice extract, policosanols, coenzyme Q10, astaxanthin, and folic acid in the following subgroups of hyperlipidemic subjects: fertile (F) versus menopause (M) women, adults versus elderly (>65 years), lunch versus dinner administration time. A randomised, multicenter study in 411 Italians units compared Armolipid-Rottapharm/Madaus (ARM) one tablet/day plus diet versus diet alone (D) for 16 weeks in hyperlipidemic patients [serum total cholesterol (tot-C) >200 mg/dL or LDL-cholesterol (LDL-C) >150 mg/dL at admission]. Efficacy parameters were measured at baseline and every 4 weeks. In 2,408 eligible subjects, 1,665 adults and 743 elderly, total and LDL-cholesterol were likewise reduced by ARM + D in both age classes and significantly versus D. In 1,246 cases, 302 F and 946 M, tot-C gradually and significantly decreased up to 18.7 and 16.8% in F and M treated groups versus 9% in D group. Similar reduction was observed in LDL-C. In 907 cases, the time of administration of ARM was detailed: 733 received ARM + D at dinner and 174 at lunch. Cholesterolemia improved equally in the two groups. The association of ARM with an appropriate diet is more effective than diet alone in reducing abnormal cholesterolemia, independently from age classes and administration time during the day, supporting its positive use for controlling hypercholesterolemia with a positive impact on CHD prevention in all categories of subjects. 2010 Springer-Verlag. US: http://onlinelibrary.wiley.com/o/cochrane/clcentral/articles/265/CN-00803265/

Record #3 of 7 ID: CN-00791994

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AU: Cui CL AU: Zhou KY AU: Luo M AU: Zhai YH AU: Qi XQ AU: Xiao ZL TI: Clinical study of Compound Fanghongou Capsule in treatment of 45 patients with hyperlipidemia SO: Chinese Traditional Patent Medicine YR: 2002 VL: 24 NO: 2 PG: 107-110 CC: SR-COMPMED US: http://onlinelibrary.wiley.com/o/cochrane/clcentral/articles/994/CN-00791994/ frame.html Record #4 of 7 ID: CN-00793178 AU: Yang SS TI: Effect of Xuezhikang Capsule on treatment of 76 cases hyperlipidemia SO: Zhong cao yao = Chinese traditional and herbal drugs YR: 2002 VL: 24 NO: 10 PG: 815-816 CC: SR-COMPMED US: http://onlinelibrary.wiley.com/o/cochrane/clcentral/articles/178/CN-00793178/ frame.html Record #5 of 7 ID: CN-00306729 AU: Jiang ZA AU: Xue J AU: Zhao WJ AU: Xiao WL AU: Dong SM AU: Zhou JY TI: Clinical observation of single dose of Xue-Zhi-Kang in the treatment of hyperlipidemia. SO: Capital Medicine YR: 1998 VL: 5 NO: 3 PG: 38-39 CC: HS-HANDSRCH AB: single dose; hyperlipidemia; xuezhikang US: http://onlinelibrary.wiley.com/o/cochrane/clcentral/articles/729/CN-00306729/ frame.html

Record #6 of 7

ID: CN-00673475 AU: Yao L AU: Fan Y TI: [Observation on the effective outcome of XUEZHIKANG in the treatment of diabetic nephropathy with hyperlipidemia] S0: Journal of Qilu Nursing YR: 2006 VL: 12 NO: 5 PG: 797-798 CC: SR-COMPMED US: http://onlinelibrary.wiley.com/o/cochrane/clcentral/articles/475/CN-00673475/ frame.html

Record #7 of 7 ID: CN-00794809 AU: Chen H AU: Song Q AU: Tan L TI: Observation on the effect of Xuezhikang and Rosiglitazone on diabetes patients complicated with hyperlipidemia SO: China Tropical Medicine YR: 2007 VL: 7 NO: 2 PG: 238-239 CC: SR-COMPMED US: http://onlinelibrary.wiley.com/o/cochrane/clcentral/articles/809/CN-00794809/ frame.html