Summary

Researchers use a cholestyramine treatment and a diet plan to reduce cholesterol levels in a treatment group. They show that reduced levels of cholesterol reduce LDL levels and reduce risk of a MI or heart disease related death. They put much emphasis on the fact that the treatment and control groups are very similar, implying that the effect is likely to come solely from the treatment of lower cholesterol levels.

My Reaction:

The ideas taken away from this paper seem straight forward: lower cholesterol -> less heart attack / heart related problems. I thought it was interesting how they used a drug to achieve lower cholesterol as a way around the gold standard dietary study (which was not feasible due to monetary constraints). Something I took away was the amount of emphasis they put on making sure the two groups were very similar.

Questions:

Something I found confusion was when they adjusted for LDL. I thought the idea was that the higher LDL was associated with greater risk of CHD. So I would have expected this to account for a lot of the variation in the outcome. However, they ran this analysis and found the treatment vs control group to be even more significant. So, my questions are:

1. Why did they think/want to adjust for LDL, it doesn’t make too much sense to me – I must be misunderstanding something
2. Why were their results still significant after accounting for LDL levels in patients