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General article

# Personal and mediated health counseling for sustained dietary reduction of hypercholesterolemia

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## Abstract

Methods of effective cardiovascular risk reduction that are suitable for use in clinical settings are needed. Several behavioral interventions were designed to be compatible with office-based medical practice, to be delivered by paraprofessional counselors, and to be of low intensity and low cost. Eighty-three hypercholesterolemic volunteers were assigned to one of three experimental conditions (face-to-face counseling, mail and telephone counseling, initial session only). Twenty-six nonrandomized subjects served as a no-contact group and were followed for 1 year. Participants in the first three groups received risk factor education, behavioral recommendations, and a packet of materials, while those in the face-to-face and mail/telephone counseling groups were contacted for five brief follow-up sessions over a 4-month period. At the 1-year follow-up

evaluation, subjects in the face-to-face and mail/telephone counseling conditions showed decreases in plasma cholesterol of 6.2 and 4.6%, respectively ( $P < 0.01$ ), while the other two groups evidenced small increases. There were no differences by condition for plasma triglycerides, systolic or diastolic blood pressure, or weight. Low-intensity, low-cost behavioral interventions delivered by paraprofessionals can produce long-term decreases in a major cardiovascular risk factor. Physicians are encouraged to incorporate similar interventions into their practices.



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