

**WOODSON C. MERRELL, M.D.**  
**44 EAST 67<sup>th</sup> STREET**  
**NEW YORK, NEW YORK 10065**

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Date: November 23, 2010

Patient: Jeffrey Epstein (Email: [REDACTED] & [jeevacation@gmail.com](mailto:jeevacation@gmail.com))

- Because of very high cholesterol and triglycerides, and abnormal coronary CT angiogram, it is very important for you to be maintained on a cholesterol regimen to keep: LDL below 80, triglycerides below 120, and HDL above 40; none of which is the case now
- To begin with the above, start Niacin. The prescription sustained release SR form is more easily tolerated, but plain is OK if you can tolerate it. Begin with 500 mg twice a day. If well tolerated after one week, double the dose to 1,000 mg twice a day
- Have your pharmacy call if you need sustained release form of the niacin
- Recheck you blood work (cholesterol, triglycerides, CRP, and liver enzymes) one month after being on full dose, and call me to review
- Consider seeing cardiologist, Dr. Rony Shimony 425 East 61<sup>st</sup> Street 4<sup>th</sup> Floor NY NY 10021 - [REDACTED] if you'd like to review your cardiovascular regimen in more detail. You are due for a stress test (stress-echocardiogram) which he can do during a consultation. If you do see him, call us to send a copy of your test results (which we did once before with a note)
- Your folic acid enzyme test (MTHFR) was low. This means you do not utilize folic acid well. To counter this, begin MTHF form of folic acid; FolaPro by Metagenics is excellent, 1 three times a week.
- Your vitamin D is low-normal (35); but do to the hyperparathyroidism, I would keep it at this level so as to not raise your calcium level (which is currently normal at 9.4)
- Contact your parathyroid specialist at Yale to review present blood test
- See attached pdf of your current lab results (only estradiol and testosterone are pending)

All supplements are available at  
Willner Chemists  
100 Park Avenue  
NYC, NY 10017

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