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Decoding Fenugreek's Cholesterol-Lowering Mechanism: A Critical Review of its Therapeutic Potential

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Authors' contributions

This work was carried out in collaboration among all authors. All authors read and approved the final manuscript.

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Review Article

ABSTRACT

Background: Dyslipidemia is a major modifiable risk factor for cardiovascular diseases, the leading cause of mortality worldwide. The consolidation of interest in plant-based interventions has Spurred further examination of traditional medicinal herbs for their effect on lipid levels. Fenugreek (Trigonella foenum-graecum), an herb found in the traditional Ayurvedic and Chinese matrix, has emerged as a promising functional food. This is based on its phytochemical profile, in addition to its cardioprotective and health-promoting functions.

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Objective: This review sought to evaluate the lipid-lowering effects of fenugreek, describe potential biochemical and pharmacological mechanisms, and evaluate the clinical relevance of fenugreek is dyslipidemia and other metabolic states

Methods: A comprehensive literature search was conducted using PubMed, Scopus, and Google Scholar, to identify relevant preclinical studies, clinical trials, and imaging and mechanistic studies published in the past 20 years. The key inclusion model was studies examining the effects of fenugreek seed, extract, or derived compounds on lipid profiles and cardiovascular characteristics in human and non-human subjects.

Results: The chemical analysis revealed that fenugreek seeds are high in soluble dietary fiber (galactomannan), and abundant bioactive constituents, such as, steroidal saponins (e.g., diosgenin), flavonoids, polyphenols, alkaloids (e.g., trigonelline), and amino acids. Such constituents exert numerous lipid-modulating properties, such as: inhibit cholesterol absorption in the intestine; increase bile acid secretion; increase lipolytic enzymes; and downregulate the hepatic HMG-CoA reductase, which is the rate-limiting enzyme in cholesterol biosynthesis. Animal studies show that supplementation with fenugreek has significantly lowered total cholesterol, low density lipoprotein- cholesterol (LDL-C) and triglycerides, while simultaneously raising high density lipoprotein-cholesterol (HDL-C). The relatively few human clinical trials have also shown some encouraging data but sample sizes are too small and the studies too short in duration for any statistically valid claims. However, some literature exists documenting favourable changes in lipid profiles associated with fenugreek in patients diagnosed with hyperlipidemia, type 2 diabetes and metabolic syndrome. Fenugreek was also found to be highly palatable and offer multiple forms of consumption i.e. whole seeds, defatted powder (flour), aqueous extracts and nutraceutical formulations; thus, supporting potential for promotion, uptake and long-term consumption as dietary therapy.

Conclusion: Fenugreek shows significant potential as an affordable, natural tool for the prevention and treatment of dyslipidemia and cardiovascular disease risk. Its diverse lipid-lowering mechanisms, benign safety profile, and straightforward incorporation into the diet classify it as a candidate for both pharmacological and dietary components of cardiovascular care. However, the present evidence base is limited by methodologic challenges, differences in primary extract type, and a lack of large and well-designed randomized controlled trials. Future research should focus on developing standard doses of fenugreek combined with safety and effectiveness studies designed and executed in large clinical trials to enable evidence-based recommendations for its inclusion in evidence-based treatment protocols.

Keywords: Saponins; flavonoids; fiber; lipid metabolism; hypercholesterolemia; fenugreek; cholesterol-lowering; dyslipidemia; cardiovascular health; HMG-CoA reductase; hyperlipidemia.

1. INTRODUCTION

Cardiovascular diseases (CVDs) are the leading cause of morbidity and mortality worldwide, with dyslipidemia (particularly, hypercholesterolemia) as a major contributing risk factor (Chehregosha et al., 2024, Amit et al., 2023, Wang et al., 2023). Increased total cholesterol, especially lowdensity lipoprotein cholesterol (LDL-C) plays a major role in the development of atherosclerosis, which can lead to myocardial infarction and stroke. Although statins are now commonly first-line regarded as therapy management of dyslipidemia, and are generally prescribed without thought to long-term side some of which mav hepatotoxicity, the development of myopathy, increased risk of type 2 diabetes, and/or

financial costs associated with long-term pharmacotherapy, the exploration of another lipid strategy lowering that is both safe and inexpensive warranted (Mt., 2022. is Mohammad-Sadeghipour et al., 2020, Askarpour et al., 2020).

Complementary and adjunct strategies utilizing plant-based therapies and functional foods have garnered attention in the past few years as methods to assist in achieving and maintaining lipid homeostasis (Badiee Gavarti et al., 2024, Vajdi et al., 2024, Heshmat Ghahdarihani et al., 2020, Baset et al., 2020). Trigonella foenum-graecum (fenugreek) is emerging as a promising candidate due to its documented use in historical traditional systems of medicine, as well as its phytochemical complexity (Chehregosha et al.,

2024, Mansourian et al., 2023). Fenugreek seeds are a unique source of soluble fiber (primarily galactomannan), steroidal saponins, flavonoids, alkaloids, and other bioactive value. These compounds possess lipid lowering, hypoglycemic, and anti-inflammatory properties (Hosseini et al., 2022, Shahin and Jafari, 2023, Bakhtiar et al., 2024, Skrzypiec Spring et al., 2025, Lee Ødegård et al., 2024).

Several scientific studies have clarified how fenugreek reduces lipid metabolism (Sivakumar et al., 2024). Fenugreek modulates lipid metabolism by reducing intestinal cholesterol absorption, increasing bile acids excreted in stools, and inhibiting hepatic HMG-CoA reductase activity, the rate-limiting enzyme in cholesterol synthesis (Berhe et al., 2025, Sarker et al., 2024, N. and T., 2025). Moreover, the potential role of fenugreek in improving glycemic control and insulin sensitivity assists us in understanding how fenugreek can disturb integrated and additive pharmacological effects which transcend its lipid-lowering properties in the management of cardiometabolic conditions (Boutaj, 2024, Kumar et al., 2025, Matthewman et al., 2024, Lee et al., 2025).

Hypercholesterolemia is an important risk factor for cardiovascular diseases, which remain the leading cause of morbidity and mortality worldwide (Hareem et al., 2024, Bakhtiar et al., 2024, Sousa et al., 2024, Morshedi, 2024, Manivannan et al., 2024). Increases in cholesterol, particularly low-density lipoprotein cholesterol, may lead to atherosclerosis-one of the prime causes of heart attacks or strokes. While statins and other pharmacological agents remain established strategies. side effects complement high prices in the search for alternatives. In plant-based diets and lifestyle interventions, several mechanisms have been proposed that incorporate efficient methods of cholesterol homeostasis reinstituting ameliorating the high cholesterol condition in the majority of animals (Vadivel et al., 2024, Kumar 2024, Gaikwad et al., Gupta et al., 2024, Mushannavar and Nadiger, 2025).

These include fenugreek (Trigonella foenum-graecum), which has emerged in recent times as a natural remedy for both medicinal and nutritional purposes (Kao et al., 2025, Qu et al., 2025, Rezazadehfar et al., 2024, Sakhai et al., 2025, Hu et al., 2025). A high lipid-modulating potential of fenugreek usually depends upon

developing fenugreek seeds as food and animal nutrition (Ali et al., 2025, Azizi et al., 2025, Rewers et al., 2024, Ghareeb et al., 2024, Tayel et al., 2024). Fenugreek has a long history of use in traditional medicine and agricultural contexts, treated as a remedy for a wide variety of diseases, from digestive disorders to diabetes. Scientific studies indicate the presence of diverse bioactive constituents in fenugreek, including soluble fiber, saponins, and flavonoids (Benitto et al., 2025, Chang et al., 2024). These active components are responsible for medicine effects of fenugreek (Vishwakarma et al., 2024). Its ability to modify lipids together with its potential for assisting in glycemic control points out fenugreek as a multifunctional candidate in the prevention and management of cardiovascular disease (Aldholmi et al., 2024).

Dyslipidemia is one of the most important risk factors for cardiovascular diseases (CVD) that account for a significant share in the mortality count around the world (Garg and Debnath, 2025, Pagano et al., 2025). Some of the currently available therapies have been shown to achieve very good control over cholesterol levels; nevertheless, statins in particular seem to be related to various harmful side effects in some patients (Kavaliunaite et al., 2025). Therefore natural, herbal alternatives are being investigated (Pande, 2025). This medicinal herb used by various cultures has been found to possess significant lipid-lowering property (Wang et al., 2024). The present review hereby thrown to the light of fenugreek involvement in raising the blood cholesterol through status of mechanism of action, efficacy, and clinical applications which will further promote this natural remedy for clinical use (Lindi et al., 2024, Razon et al., 2024, Naaz et al., 2024, Sethi et al., 2024).

This review highlights the growing body of evidence around the biochemical components. mechanisms pharmacological and clinical effectiveness of fenugreek in the treatment of hypercholesterolemia (Al-Subaiyel and Abdellatif, 2024, Pooja et al., 2024). A synthesis of in vitro, animal and human clinical study evidence is provided, to bring forth its efficacy and safety as a natural product, as well as, the implications for development of functional foods nutraceuticals through the incorporation of fenugreek as one option in combined and multitargeted systems (Corbetta et al., 2024, Han et al., 2025, Morshidi et al., 2025). This review places fenugreek's lipid lowering impact in a potential clinical rationale and help contextualize fenugreek, from a traditional remedy to a usable evidence-based rational (Singh et al., 2025, Danish et al., 2024).

2. METHODOLOGY

This review is grounded in an extensive search of scientific literature, utilizing databases such as PubMed, Scopus, and Google Scholar (Siddiqui et al., 2024, Chen et al., 2025, Khamkar et al., 2025). The keywords used in the search included "fenugreek," "cholesterol-lowering," "dyslipidemia," and "lipid metabolism." Emphasis was placed on studies published between 2000 and 2023, concentrating on preclinical, clinical, and mechanistic research (Hafeez et al., 2024, Sasirekabai et al., 2025, Shakil et al., 2024, Rizzo et al., 2025).

3. LITERATURE REVIEW

Fenugreek is extensively researched for its antilipidemic properties. A reduction in serum total cholesterol, LDL, and triglycerides has been reported in both animal research and in human studies, with a corresponding increase in HDL (Shahid et al., 2024, Liaqat et al., 2025, Omran and Ghani, 2024, Sekhar et al., 2024). Its peculiar phytochemical composition is described as attributing to these effects (Faturoti and Ogidi, 2025, Erten et al., 2025).

3.1 Biochemical Composition of Fenugreek

Fenugreek seeds comprise certain bioactive compounds that drive their health benefits: Soluble fiber: It is rich in galactomannan soluble fiber, which plays an important role in cholesterol depletion. Saponins:

These are the substances that bind with cholesterol and bile acids-it reduces their absorption and increases excretions. Flavonoids and polyphenols: Acting as scavengers of reactive oxygen species, antioxidants mitigate oxidative stress and aid lipid metabolism. There are other components too: Proteins, amino acids, and alkaloids also add to the therapeutic potential of fenugreek (De and Mishra, 2024).

3.2 Mechanism of Action

 Lowering absorption of cholesterol: The soluble fibres present in Fenugreek form with in the gastrointestinal tract a gel-like mass which traps cholesterol and bile

- acids hence inhibiting absorption (Sadan et al., 2024).
- 2. Increase bile-acid excretion: The saponins in Fenugreek bind bile acids and assist in their excretion. This causes liver cholesterol to be utilized by the liver for synthesizing new bile acids (Sharma et al., 2025).
- 3. Modulation of lipid metabolism: Fenugreek influences the enzymes in lipid synthesis and degradation whereby HMG-CoA reductase is known to reduce the production of LDL-cholesterol (Subbuvel et al., 2025, Kemper et al., 2025).
- 4. Antioxidant: The flavonoids contained in fenugreek exert beneficial effects via combating oxidative stress-a known contributor in the pathogenesis of dyslipidemia and atherosclerosis (Shahzad et al., 2024).

3.3 Preclinical and Clinical Evidence

In vitro and in vivo studies have provided reasonable evidence that fenugreek has a lipidlowering property. Fenugreek supplementation has been shown in hypercholesterolemic rats and rabbits to markedly reduce total and lowdensity lipoprotein plus triglycerides while raising high-density cholesterol (Dahab et al., 2024). This mechanism appears to be increased bile acid excretion and improved lipid metabolism (Hachouf et al., 2025). Several human trials corroborated findings from animal studies. Key highlights include: Clinical study, for example, demonstrated significant lowering of total and LDL cholesterol in fenugreek-supplemented Fenugreek-treated hyperlipidemics. diabetic patients have shown improved lipid profiles and glycemic control, thus indicating dual benefits of fenugreek (Khalil et al., 2024, Jambor et al., 2025).

3.4 Dosage and Safety

The working dose for cholesterol management might range anywhere between 5-25 grams each day, either taken in the form of seed powder or as extracts or capsules (Babaei et al., 2025). In general, fenugreek is well-tolerated, with some reports of mild gastrointestinal side effects-such as bloating and diarrhea (Naaz et al., 2024, Mate et al., 2024). It has been considered safe in long-term studies as well as an effective one. Uses that can be applicative in Functional Foods

Presenting Functional Foods with fenugreek holds the simplest method of leveraging its cholesterol-lowering application. Fenugreek-enriched bread, teas, or supplements are desired by increasingly health-conscious consumers (Prosad Banik et al., 2024) Fig. 1.

4. CHALLENGES AND FUTURE DIRECTIONS

Challenges and Future Directions Further largescale and long-term clinical studies will be required to better define the standard treatment dose for its clinical use, and properly to study fenugreek against various groups of patients. Investigating the synergistic effects of fenugreek along with other natural products or drugs could lead to further insights into fenugreek's therapeutic potential (Khorrami et al., 2024, Rath et al., 2024) Fig 2. Table 1.

5. DISCUSSION

Fenugreek is a potent natural alternative for managing dyslipidemia, with a strong evidence base stemming from clinical studies (Muluve et al., 2024, Shaaban et al., 2024). There is no uniformity regarding the dosage and preparations available in applications. Further, combinational prowess with any existing drug needs further studies to establish this palette (Kumar and Singh, 2024, Almuzaini et al., 2024, Ashour et al., 2024). Fig. 1 shows the doseassociation between fenugreek response supplementation (in grams per day) and the % reduction in LDL cholesterol.

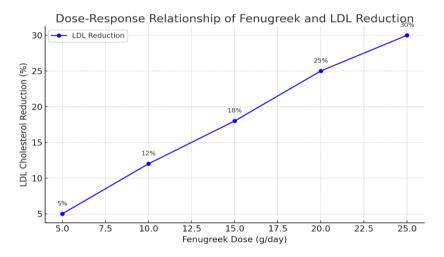


Fig. 1. Dose-response relationship between fenugreek supplementation (in grams per day) and the percentage reduction in LDL cholesterol

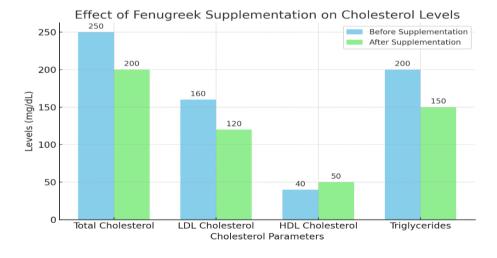


Fig. 2. Effect of fenugreek supplementation on cholesterol levels. It compares total cholesterol, LDL cholesterol, HDL cholesterol, and triglycerides before and after supplementation

Table 1. Clinical and preclinical effects of fenugreek on blood cholesterol lowering activity

Study type	Population	Dose	Duration	Total cholesterol reduction (%)	LDL reduction (%)	HDL increase (%)	Triglyceride reduction (%)
Clinical trail	Hyperlipidemic patients	10 g/day	8 weeks	15%	20%	5%	18%
Clinical trail	Diabetic patients	25 g/day	12 weeks	10%	15%	10%	12%
Preclinical study	Hypercholesterolemic rats	5% of diet	6 weeks	25%	30%	15%	20%

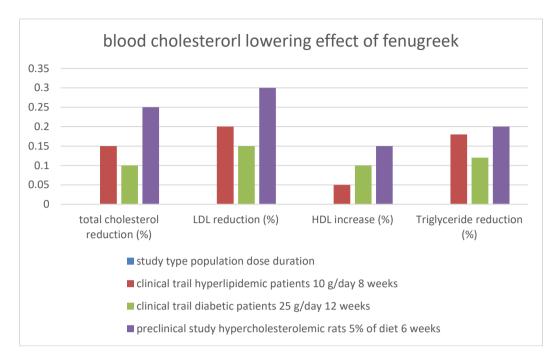


Fig. 3. Graphical representation of clinical and preclinical effects of fenugreek on blood cholesterol lowering activity

As the dose increases, the reduction in total LDL in the blood decreases, and Fig. 2 depicts the effect of fenugreek on LDL, HDL, and triglycerides. It will compare the level of LDL reduced before and after supplementation, and Fig. 3 will explain clinical and preclinical data on the effect of fenugreek supplementation in hyperlipidemia, diabetic patients, and a preclinical study on hypercholesterolemic rats, concluding that fenugreek is effective in LDL reduction.

6. CONCLUSION

Inhibition of cholesterol absorption, induction of bile acid excretion, and hepatic lipid synthesis regulation are different mechanisms of action. The evidence to support the use of fenugreek for hyperlipidemia reduction is found in clinical and preclinical studies. The widespread formulation of fenugreek already provides an alternative dietary intervention that could replace the introducing of hyperlipidemia treatment. Recommendations for future research include dosage standardization, long-term safety and effectiveness, and acceptability in various Therefore, it appears populations. to he economical. widely acceptable, and more promising in the present milieu to provide an answer to modifications in lipid profiles against cardiovascular risk.

DISCLAIMER (ARTIFICIAL INTELLIGENCE)

Author(s) hereby declare that NO generative Al technologies such as Large Language Models (ChatGPT, COPILOT, etc) and text-to-image generators have been used during writing or editing of this manuscript.

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COMPETING INTERESTS

Authors have declared that no competing interests exist.

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