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New Tips for Women's Heart Health
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Heart disease is the number 1 killer of women. It claims the lives of nearly half a million women each year. On Tuesday, 2/20/2007 the new American Heart Association guidelines were issued. These guidelines which are more far-reaching than those released in 2004, stress prevention before aging. They focus not on a woman's immediate risk but what is likely to happen as she ages. The AHA says, most women carry higher long-term risk of heart disease than they realize and should act now to prevent heart attacks and stroke.

First, let us examine the circulatory system, which has a two-fold role: it delivers oxygen and nutrients to all parts of the body while picking up toxins and waste materials that need to be eliminated. It accomplishes this monumental task through a network of nearly 60,000 miles of blood vessels and a fist sized organ known as the heart. The heart is the strongest organ in our body. A normal adult heart beats 60-90 times per minute, more than 85,000 beats per day. Resting only briefly between beats the normal heart performs non-stop for a lifetime! The heart is divided into four chambers. The right and left sides of the heart have two chambers each that are connected by valves. The right side receives the blood from the body and pumps it to the lungs, where it takes on oxygen and gives up carbon dioxide it was carrying. The blood returns to the left side of the heart where it is pumped to the rest of the body. The blood gives each cell in the body oxygen and other vital materials, takes away carbon dioxide and other wastes, and then travels back to the right side of the heart. The heart pumps and propels the blood through all the blood vessels. Truly, such a miraculous organ deserves the best of care!

To date we have been told and taught that heredity is the biggest culprit and then identifying risk factors is the next line of attack. Many women found they can be at low short-term risk, but in the course of a woman's lifetime, she has a nearly 1-in-3 chance of dying of heart disease. Lori Mosca, the Director of preventive cardiology at NY Presbyterian Hospital and the chairwoman of the heart association's guidelines committee state "it's misguided to think you have a low risk of a condition you have a 1-in-3 chance of dying of" Mosca goes on to state that "Right now 34% of American women (38 million) are living with heart disease"... "When you have something that common, it's important we all take action to control our risk."

There are different theories on why women are less likely to have heart attacks or strokes as early in life as men do. Some experts say young women's estrogen levels may be protective. Others say the male hormone testosterone is harmful. Jay Cohen of the University of Minnesota says he welcomes the new guidelines because as many women die of heart disease as men, just at a later age. "Really, we should be worried at 30 and 40 not about what's going to happen in the next five years but what's going to happen later on."

The guidelines committee based these newest recommendations published in *Circulation*, on the latest research. Along with reaffirming lifestyle risk factors that account for 90% of the heart disease in our population and genetics 10% of the remaining risk guidelines attempt to dispel confusion bred by conflicting studies. Let's examine these nine known risk factors aren't new, we've heard them before: smoking, high blood pressure, diabetes, obesity, stress, a desk-bound job and a diet that is rich in processed foods, low in fruit and fiber and missing a daily thimbleful of alcohol.

*Smoking – Smokers are two to three times more likely to have a heart attack than people who don't smoke. Cigarette smoke damages the artery wall, paving the way for inflammation and cholesterol build-up. It narrows arteries. It also activates platelets, sticky cells that cling together and promote clotting. When cholesterol deposits burst inside arteries, clots form. If a clot tears loose, Milani says, "boom" you're going to have a heart attack.

*High Blood Pressure – High Blood Pressure nearly triples a man's risk of having a heart attack and more than doubles a woman's risk. Narrowed blood vessels force the heart to work harder, slowly wearing it out. The blood's friction against artery walls also can promote the rupture of plaques, which can lead to heart attacks.

*Diabetes – Diabetes is especially deadly for women, quadrupling their risk of having a heart attack. Men aren't much better off; diabetes doubles their risk. Like smoking, diabetes causes platelets to stick together, resulting in scores of tiny clots. These clots clog the microscopic blood vessels that feed nerves and arteries, which are a key reason diabetes destroys circulation. Diabetes also raises the level of harmful fats in the blood.

*Stress – Psychosocial stress, stressful life events, behavioral disorders and depression nearly triple heart attack risk. Depressed people with heart disease are four times more likely to have a heart attack or die, and depression is prevalent among 20% of people with heart disease in the USA.

*Exercise – Moderate exercise reduces a man's heart risk by 23% and women by twice that amount. "We're not talking about marathons", Milani says. "Even just a nice walk in the park." Exercise improves cholesterol, staves off diabetes by improving blood sugar and promotes blood vessel growth.

*Bad Cholesterol/Good Cholesterol – High cholesterol (LDL) carries fats into the artery wall; good cholesterol (HDL) carts it away. A sedentary lifestyle and fatty diet increase LDL and lower HDL. Exercise and healthy diet switch that ratio and keep arteries clear.

*Diet – Eating fruits and vegetables daily cuts heart risk by 30% to 40%. They lower bad cholesterol, improve blood sugar and replace foods that might not be as healthy.

*Alcohol – Another platelet blocker. Modest amounts of alcohol reduce a man's heart attack risk by 12% and a woman's 60%. All forms of alcohol help in small amounts. Too much beer or hard liquor, more than a drink a day, can promote heart disease, cancer and alcoholism.

The new aspect of these lifestyle risk factors is the powerful evidence of the toll they take. Salim Yusuf a global heart specialist at McMaster University in Toronto did an inter-heart study, a worldwide examination of heart-risk factors involving more than

26,000 volunteers in 52 countries. Slightly more than half the volunteers had heart disease. Based on the study, Yusuf says, “we know virtually all of the risk factors in every population.” It was the result of this study that Yusuf concluded clogged arteries are a “social disease”, brought on by cities built for automobiles and ease featuring urban sprawl, high-pressure sedentary work, passive entertainment and lots of cheap, tasty processed foods. Richard Milani, Director of preventive cardiology at Oschner Institute in New Orleans was a fan of the interheart study because it focuses on things we can do something about, “it reflects risk factors for all of us, and heart disease is a leading killer no matter where we live”.

The AHA new guidelines also contained some don'ts:

*Don't count on folic acid or use vitamins E, C and beta-carotene for heart disease prevention. A seven-year of 36,282 participants in the Women's Health Study published in Circulation found no significant benefit from vitamin D.

*Don't use hormone therapy or selective estrogen modulators to prevent heart attacks after menopause. Research shows estrogen-progestin drugs and the modulator drugs such as raloxifene can promote clotting. Evidence on the safety of trans dermal estrogen patches is still sketchy, Mosca says.

*Don't take aspirin for heart attack prevention until you're 65, unless your doctor tells you otherwise. The Women's Health Study showed a benefit for women over 65 reducing both stroke and heart attack risks. Women under 65 may consider aspirin under a doctor's supervision if their stroke risk is so high that aspirin's benefit outweighs risk of bleeding.

In addition to the above-mentioned studies, there is a new program that aims to improve cardiac-arrest survival rates. It's a grass-roots effort being launched in Austin, Texas. Doctors believe it could double survival from sudden cardiac arrest.

This new pilot program is called “Take Heart America” and is designed to combine simple steps that improve cardiac-arrest survival and apply them as a cohesive effort involving citizens, rescuers made doctors. Those responsible for launching the program, mainly doctors and researchers feel it prepares communities to improve their responses and to better use all the tools at their disposal, including cardio-pulmonary resuscitation (CPR), automated external defibrillators (AEDs) and brain-cooling measures. In isolation they all make a difference but taken together they make a bigger difference says Keith Lurie, an electrophysiologist at the Central Minnesota Heart Center at St. Cloud Hospital who was instrumental in helping develop the “Take Heart America” program. “We're putting simple technology in a package and delivering it to a community.” If it dramatically increases survival rates, the team will deliver a blueprint to any city that wants it, Lurie says.

Sudden cardiac arrest claims 900 lives a day, says the American Heart Association. When people suffer cardiac arrest, or “clinical death”, the heart stops beating. They may grasp for air initially, but they soon stop breathing. Life and death are defined in six minutes. EMS rarely can reach a victim's side within six minutes of collapse. But this kind of sudden clinical death can be reversible especially in the young and otherwise

healthy with immediate CPR, a fast shock for and AED, advanced care from swift-moving paramedics and aggressive hospital care.

In light of all the studies, programs new technologies it is indeed up to each and every one of us to find that program that ultimately fits our personal lifestyle. Yes, we can arm ourselves with all the new information that is out there and strive for optimal health despite the odds of this killer disease.

In the past 20 years a growing body of research has emerged showing that a brisk, 30-minute walk several days of the week can dramatically cut ones risk of heart attack and stroke, decrease chances of developing diabetes, osteoporosis, and some forms of cancer, and reduce one body weight significantly.

Walking is a little like breathing. You do it without much thought however; there are those people who continue to ignore the warning signs. Those are the people who realize too late that when they can't do it as easily they're faced with health or weight issues. Unfortunately today due to our increasing reliance on technology (e-mail, elevators, even automobiles) much of the natural physical activity has been taken out of our lives and people have turned a deaf ear to all the warning signs.

The following are strategies recommended by Mark Fenton, former member and coach of the U.S. national race walking team and host of PBS's America's Walking series. You'll need a good pair of shoes and a comfortable pair of socks. The shoes should have a rounded or beveled heel, be flexible through the ball of the foot, and be fairly firm through the arch. The shoes should fit well and that gives you toes some wiggle room. The shoes should be made of a synthetic, "breathable" material such as polypropylene to prevent blisters. Mark also suggests using a step counter for a week to see how many steps you're taking on average each day. After a week, he suggests multiplying those steps by 1.2, and each week shot for a higher number. By doing it incrementally, by break down a lot of the barriers people have about exercise, says Fenton. Walking poles may be added for older people who need more stability or anyone who want to develop more arm strength. It is also recommended that you use two poles so that the body workout is balanced. Also, if you're interested in walking for fitness and weight loss you're want to pick up your walking pace. The recommended walking stance is that you stand tall and keep your eyes on the horizon so you don't drop your chin. In other words, walk with purpose and don't just stroll. Focus on quicker steps and gradually increase the beginning number of steps. Bend your arms, holding your elbows at a right angle so they can swing naturally with each step you take. Finally, push off your toes by pretending that with each stride you're showing someone behind you the bottom of your shoe. Lastly, walk with a buddy. It will make the exercise seem like less of a chore and more of a social experience. A little healthy competition never hurts where goals are concerned!

Healthy eating too comes down to a few basic recommendations:

*Less is more – as we age, we simply can't eat as much as we did in our younger days. The basal metabolism begins to slow down as the energy cost of heartbeats, breathing, and other bodily functions at rest declines, as does the number of calories expended

during physical activity. An average woman in her 30's needs about 2400 calories per day, but only 2100 at age 50 and as few as 1500 per day when she reaches her 70's. The experts suggest "moderate" decrease in consuming calories not starvation or giving up everything we enjoy eating.

*Antioxidants – including vitamins, some proteins, amino acids, enzymes, minerals, and compounds call flavenoids. They are found in fruits, vegetables, herbs, grains, and many other food products; they also occur naturally in your own body. Eating a wide variety of fruits and vegetables is an excellent way to obtain a natural supply of antioxidants. Fruits particularly high in antioxidants include citrus fruits, apricots, melons, mangles, peaches and papayas. Vegetables rich in antioxidants include carrots, tomatoes, leafy greens such as kale, cruciferous vegetable such as broccoli and cauliflower, squash, and red and green peppers. Soybeans, nuts, seeds, wheat germ, and green or black tea are also good sources. Always lead toward foods in the most natural forms. Shopping the outer perimeter of the supermarket is a good rule of thumb. If fresh fruits and vegetables are out of season or too expensive, you can select frozen ones. They're almost as nutritious, since they're picked and flash-frozen at harvest, which locks in their nutrients. When choosing breads, select those made with 100% whole grains (and that includes in the first ingredient the word whole, rather than enriched). By eating whole-grain foods you'll be getting natural vitamins because they haven't been removed during processing.

*Avoid empty calories – in other words, junk food (soft drinks, candy and many sugary, salty snacks). A hint would be if a food was to have a long ingredient list then, it is very likely that the food is highly processed.

*Multivitamins – the latest AHA guidelines warned us about certain particular vitamins however; everyone over 50 should consider taking a daily multivitamin. The ability to digest, absorb, and metabolizes some nutrients declines with age. The risk of certain vitamin deficiencies can be alleviated by taking a multivitamin specifically designed for people over 50 and that contains 100% of the Daily Value (DV) of vitamin B12 and at least 10% of the DV for calcium.

*Water, water, water – thirst help most adults regulate the amount of fluid they need; yet this ability sometimes declines with age. So, it's important to drink often, even if you're not thirsty. Coffee, tea and milk all count toward your daily fluid intake. Fruit drinks are only nutrient-free sugar water. A 20 oz. fruit smoothie could contain as much as 500 calories!

In conclusion, knowledge is power especially when it comes to learning about our wonderfully well-made bodies. Moderation and balance rule especially in making lifestyle changes. Once made, these changes begin to change attitudes and behaviors in others as more of us become models for healthy heart lifestyles.

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1. T/F The new guidelines stress immediate risk rather than what is likely to happen long-term.

2. What are the 2 roles of the circulatory system?

3. T/F 38% of American women are living with hear disease.

4. T/F Heredity is the only culprit at 90% and risk factors are minor 10%.

5. T/F Estrogen may be a reason women are less likely to have heart attacks as early in life as men.

6. List the 9 risk factors.

7.T/F Yusuf concluded that clogged arteries are a “social disease”

8. What are the 3 don'ts of the new guidelines?

9. How many lives a day does cardiac arrest claim?

10.How many minutes does a person have who is suffering cardiac arrest when help must arrive?

11.How many minutes must you walk briskly several days a week to cut your risk dramatically?

12. After a week of initiating a walking plan, by how much should you increase your steps?

13.T/F a stroll or a brisk walk brings about the same results so you don't need to focus on the speed.

14.What are the 5 healthy eating recommendations?

15. T/F The number of calories a woman consumes cannot decrease with age because the basal metabolism is set.

16. T/F Fruit drinks are a great way to get nutrients.