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HeartBeats



Kamran Riaz, MD.

Heart of the Matter

Congestive Heart Failure

This is the third of our ongoing series on different cardiovascular diseases.

By Dr. Kamran Riaz, MD

If you have Congestive Heart Failure (CHF), you aren't alone. In the United States, 5.7 million people have CHF and it afflicts 10 in every 1,000 people over the age of 65. In fact, it's one of the most common reasons people over 65 go to the hospital.

The CHF death rate has increased by 35% in the last 25 years; the disease is now the main cause or a contributor in nearly 53,000 U.S. deaths each year, according to the American Heart Association.

So what exactly is heart failure? Does it mean that your heart stops? Well, a simple way to view the heart is as a pump that moves blood around the body. This action delivers oxygen and necessary nutrients to different parts of the body. Simply put, CHF is a condition in which the heart is unable to

deliver enough blood to the body's other organs.

Symptoms of CHF include shortness of breath, especially when lying down, limited exercise tolerance, fatigue, swelling in the feet, ankles and legs and weight gain due to fluid retention. Patients with heart failure can feel lousy and become severely limited in their activities. If heart failure is severe then patients are often unable to do the simplest of everyday activities, such as cooking, cleaning or walking up steps. Some even become bedridden.

There are a number of causes for CHF; most frequently the cause is coronary heart disease. This is the same disease that causes heart attacks. Following a first or subsequent heart attack, because of the damage to the heart muscle, the heart pumping function can decline, leading eventually to heart failure. Other causes of CHF include long-standing high blood pressure, leaking or narrowed heart valves, congenital heart defects, unexplained diseases of the heart muscle (cardiomyopa-

thies), and possible previous viral infections of the heart muscle.

The heart failure can be due to problems with the pumping function of the heart (systolic heart failure) or due to a problem with relaxation of the heart (diastolic heart failure). In either case the "failing" heart keeps working but not as efficiently as it should. People with heart failure can't exert themselves because they become short of breath and tired. Normally when the heart

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Roundup of Recent Heart Studies

Researchers are constantly looking for ways to improve heart health by both testing older theories about heart health and developing new ideas. The following is a roundup of some of the latest studies from the Journal of the American Heart Association.

Coffee vs. Tea

If you have developed a serious coffee or tea habit – no need to worry. Both moderate and high tea consumption as well as moderate coffee consumption have been linked to reducing heart disease according to a new study. If tea is your drink of choice, researchers concluded that drinking more than six cups per day was associated with a 36% lower risk of heart disease compared with those who are non-tea drinkers. Moderate drinkers fared even better: drinking three to six cups per day was

associated with a 45% reduced risk of death.

There is good news for coffee drinkers as well. Folks who indulged in two to four cups per day had a 20% lower risk of heart disease compared with those who drank less than two or more than four cups.

Postpone non-cardiac surgery after stenting

Patients who can postpone non-cardiac surgery for at least six weeks after receiving a coronary stent are less likely to suffer from reduced blood flow to the heart, heart attack and death than those having surgery sooner. Coronary stents are small tubes of wire-metal mesh that doctors insert into constricted arteries to increase blood flow by permanently holding the arteries open.

In this study, researchers found that 42% of patients undergoing non-cardiac surgery

within six weeks were more likely to suffer heart complications, including decreased blood flow to the heart (ischemia), heart attack and death. These complications only occurred in 13% of patients who postponed surgery. The risk of these problems was even greater among patients whose stents were inserted to treat a recent heart attack versus those who received stents for a stable but chronic disease. Whether the stents are coated with medicine or are bare metal was found to have no effect.

Great News for Chocolate Lovers!

Eating a small amount of high-quality dark chocolate one to three times a month may help stave off heart failure in women, a new Harvard study suggests. But if you eat too much “good” chocolate that protective effect goes away the researchers reported. The study showed that if more than one serving per day was eaten then the protective effect goes away and it could



potentially have a detrimental effect. And the higher the cocoa content, the better the protective benefits.

This is not the first time that researchers have proven the redeeming value of chocolate. Past studies have shown modest amounts of chocolate can lower blood pressure – but this is the first study that specifically looked at heart failure.

While this study was confined to women, there is no reason to believe that these benefits won't extend to men – the findings just have not been confirmed yet.

Omega -3 Fats Don't Benefit Heart Attack Survivors

Consuming more heart-healthy omega-3 fats provided no additional benefit in a study of heart attack survivors who were already get-

ting good care according to a recent Dutch report. After nearly 3 ½ years, there was no difference in deaths, heart attacks and other heart problems between those who ate margarine with added omega-3 fatty acids and those who didn't. The results don't mean that getting more omega -3 is of no value, however. Several studies have offered evidence that omega-3 fats, mostly from fish oil, reduce heart disease. But for heart patients who are carefully treated, adding this nutrient does not seem to make a difference.

It is generally recommended by health officials that people eat one to two servings of fish a week. The results of this trial don't change that, particularly since there are no harmful side effects to eating fish.



Cholesterol and Children



Evidence shows that the buildup of fatty plaque in arteries begins in childhood and progresses slowly into adulthood. This lifelong buildup of plaque often leads to heart disease. The American Academy of Pediatrics recommends

screening children earlier and more frequently for plaque buildup. Children with a family history of heart disease or high cholesterol should be screened. In addition, children who are overweight, have high blood pressure, diabetes or other risk factors

of heart disease should be screened. Fasting lipid profiles are recommended starting at age 2 for patients with a high risk profile and should be repeated every three to five years.

Children with high cholesterol are those with total cholesterol

over 200 mg/dL. Borderline is 170 to 200 and normal is under 170. Looking at LDL (low-density lipoprotein), high cholesterol is 130 and above, borderline is 110 to 129 and normal is under 110. It is important to look at the child's whole profile, including HDL (high-density lipoprotein), triglycerides, risk factors and family history.

The first line of treatment for high cholesterol in children is improving diet. It is important to normalize weight and have the child follow diet and exercise practices that will increase HDL. If the patient has high LDL, it is very important to reduce saturated fat in the child's diet. Trans-

saturated fats should be avoided by everyone.

Diet and exercise should be tried for at least six months. Most children will improve with these changes. If lifestyle changes do not bring about changes in cholesterol, then medication can be considered.



What you need to know about aspirin therapy

Good old aspirin, the common pain reliever, also has a talent for prevention. Aspirin can help prevent a heart attack or a stroke in people who have never had a heart attack or stroke. Aspirin has been proven to prevent a first and second heart attack in people who have coronary artery disease.

Who should take low-dose aspirin?

- You can take aspirin to help you during a heart attack. After you call 911, chew 1 adult-strength (325 mg) or 2 to 4 low-dose (81 mg) aspirin if you are not allergic to aspirin and if there is no other reason that you can't take aspirin.
- Healthy men over 45 and healthy women

over 55 may also take low-dose aspirin (81 mg) every day to help lower the risk of a heart attack or stroke.

Who should avoid aspirin therapy?

- People who have stomach ulcers, a history of gastrointestinal bleeding, blood-clotting disorders, uncontrolled high blood pressure, and liver or kidney

disease may need to avoid aspirin.

- People who are at risk for or who have had a hemorrhagic stroke, which is a type of stroke that is not caused by a blood clot but rather by bleeding into and around the brain.
- Don't take aspirin without first talking to your doctor if you're already

taking prescribed blood thinners, such as Coumadin. The combined effect could cause bleeding problems.

The bottom line is that although the benefits of aspirin therapy are promising it is not right for everyone. Ask your doctor if it is the right course of action for you.

Source: WebMD

NEWS You Can Use

A word about appointments

It is important for you to keep your scheduled appointments if at all possible for both your own health and for our ability to take care of all of our patients.



As you can imagine, we have a busy schedule most days and we want to be fair to all patients who need to see one of our doctors. Therefore, we have to maintain as many openings in our schedule as possible. We all appreciate being able to get an appointment very quickly, and that only works when we have a valid schedule.

One way to keep openings in our schedule is by not accepting appointment requests from any patient who has missed three appointments. So, please remember to call ahead and cancel or reschedule your appointment if you are not going to be able to keep your appointment for any reason.

Thank you for helping us to take care of your heart health by keeping your appointments up to date and on schedule.

Photo ID needed for appointments

You may have noticed if you have been to our office recently that we are requesting patients to show us a photo ID when they register. We have adopted this practice to comply with the Federal Government's "Red Flag Rules". These rules were put into place to avoid identity theft.



Every year millions of people are victims of identity theft – and this does not just affect bank accounts. The Federal Trade Commission (FTC) found that almost 5% of identity theft victims have experienced medical identity theft. Medical identity theft can have serious consequences – victims may find their benefits exhausted or face potentially life-threatening consequences due to inaccuracies in their medical records.

Help us to keep you and your records safe – please be prepared to show your ID.

Drew Carey's Healthy Heart

You have probably seen some of the amazing pictures of comedian and game show host Drew Carey lately. He has received a lot of recent press regarding his amazing weight loss of 70 pounds. According to *People* magazine, Carey went from a size 44 pants to a 33-34. And he did it the old fashioned way by diet and exercise.



"My father died of a heart attack in his 40s. I'm not an idiot. The writing was on the wall."

Diagnosed with heart disease in 2001 (he has a family history of the disease), Carey's first wakeup call came with angioplasty surgery and a stent in one of his arteries. Prior to his surgery one of his arteries was about 95% blocked. According to his cardiologist, Dr. Daniel Eisenberg, "Drew was clearly a heart attack waiting to happen." He made an attempt to get healthy, but when his mother became terminally ill in 2002 he reverted to his old

for at least 45 minutes a day, cutting back on simple carbohydrates, snacking on fruit and drinking a lot of water. Not only was he able to lose the weight, but he lost his need for type-2 diabetes medication.

The diet, while difficult at first according to Carey, became easy once he began to see results. The comedian noted that he feels like he is in his 20's again.

habits and ballooned to a record 262 pounds.

His second wakeup call came when he realized he couldn't keep up with his fiancée's 5-year old son and worried that he would not be able to see him graduate from high school. "I always thought I was going to die before I was 60. My father died of a heart attack in his 40s. I'm not an idiot. The writing was on the wall," Carey, age 52, told *Parade*.

Carey's regimen involved hitting the gym

If you are overweight or have a family history of heart disease you can help reverse this like Drew Carey did. Begin by exercising daily at a pace that works for you. Eliminate bad dietary habits and control your portions. Remember that you are not on a "diet" but developing a new way of eating for life. If you need assistance you can contact a nutritionist or your doctor can refer you to one.

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pumps out blood, it pumps out at least half the blood in it. When the heart becomes very weak, several things happen. First the heart has a hard time pumping blood forward and it backs up into the lungs. This is sometimes referred to as “fluid on the lungs”. As blood flow out of the heart slows, blood returning to the heart through the veins backs up, causing swelling (edema) in the legs and ankles, but it can happen in other parts of the body, too. Heart failure also affects the kidneys’ ability to get rid of sodium and water. The retained water increases the edema.

Patients with CHF will need to work closely with their doctors to develop a

treatment plan. Treatment begins by taking measures to prevent the development of Coronary Artery Disease (CAD) and maintaining adequate blood pressure control to decrease the chances of developing CHF. Treatment of the established CHF involves salt and in some cases fluid restriction, lifestyle changes, medications, and in some cases patients may require the insertion of a special pacemaker (Biventricular pacemaker) or an implantable cardioverter defibrillator (ICD) or surgery.

As with other cardiac problems, changing your lifestyle can have a positive effect in improving your condition and diminishing further damage to your heart. These changes include a proper diet, managing your weight, getting

regular exercise, and quitting smoking. If you have high blood pressure or diabetes it is important that you control these diseases. Most people living with CHF take one or more medications. These medicines perform different functions and have different effects. ACE inhibitors and vasodilators expand blood vessels and decrease resistance to the heart’s pumping function. Beta blockers can improve how well the heart’s left lower chamber (left ventricle) pumps. Digitalis increases the pumping action of the heart; while diuretics help the body to eliminate excess salt and water. A group of medicines called aldosterone antagonists have been shown to decrease mortality and prevent hospitalization.

Other medications may be used to treat arrhythmias, high blood pressure and coexisting medical conditions. It is important that you take your medications at the same time every day. Do not stop taking your medications or begin taking over-the-counter or herbal medications without consulting your physician.

Damage to the heart muscle can cause changes in the electrical system of the heart and as a result change how the heart contracts. This abnormal contraction of the heart can be corrected through device therapy. A patient can get a pacemaker, a biventricular pacemaker or an internal cardioverter defibrillator, later preventing the sudden cardiac death in certain patients with CHF who are high risk for these

events. Patients can be treated with all three devices or just one or two depending upon their individual condition.

If medications, lifestyle revisions and a pacemaker or other devices are not enough, surgery may be necessary to prevent further damage to the heart. Possible procedures include coronary artery bypass, valve repair, and in some cases, ventricular surgery or heart transplantation.

Most people with congestive heart failure can be treated. Proper medical supervision can allow patients to lead an active life and prevent recurrent hospitalizations. When you make healthy changes, you can feel much better, enjoy life much more and live longer.

Heart at Work

The following people have joined our team at The Dayton Heart Center since our last issue:

Ashley Stone - Ashley has joined our Needmore Road team as a Checkout Representative. In addition to her duties assisting patients with the checkout process, Ashley will be answering the phone, scheduling appointments and tests and working with referring

physicians. Additionally she will be collecting copayments and posting those payments to patients’ accounts.

Jaimee Herr - Jaimee works at our Needmore Road office as a Checkout Representative. Like Ashley, Jaimee will be

assisting patients with the checkout process, answering the phone, scheduling appointments and tests, and working with referring physicians. Jaimee’s other duties include collecting copayments and posting those payments to patients’ accounts.

Lindsey Guess - Lindsey was formerly a Checkout Representative who has accepted a position in the Electrophysiology Department. She will be working with Dr. Kravitz’s and Dr. Khouzam’s teams with scheduling and clerical duties.



1530 Needmore Road
Dayton, Ohio 45414
937-277-4274
www.daytonheart.com

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Heart
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RECIPE

**Nutritional Analysis
(per serving)**

Per serving (379.77g-wt.):
140 calories (50 from fat),
6g total fat, 1g saturated fat,
6g protein, 20g total car-
bohydrate (5g dietary fiber,
4g sugar), 0mg cholesterol,
180mg sodium

Recipe source: Whole Foods
Market

Butternut Squash Soup

Serves 6

2 tablespoons olive oil
2/3 cup diced carrot
(about 1 (8-inch) large carrot)
1/2 cup diced celery
(about 1 (11-inch) large stalk)
2/3 cup diced onion
(about 1 medium onion)
4 cups cubed butternut squash
(about 1 medium squash)

1/2 teaspoon chopped
fresh thyme
4 to 6 cups low-sodium
chicken broth
Sea salt and ground
black pepper, to taste



Heat olive oil in a large soup pot. Add carrot, celery and onion. Cook until vegetables have begun to soften and onion turns translucent, 3 to 4 minutes. Add butternut squash and thyme. Stir to combine with vegetables. Stir in chicken broth and season with salt and pepper.

Bring to a boil, reduce heat and simmer until squash is fork-tender, about 30 minutes. Use an immersion blender to puree soup. Alternatively, let the soup cool slightly and carefully puree in batches in a traditional blender.