



Heart Health

Controlling Cholesterol

Most Heart Disease Is Preventable

Exercise: Plan Or No Plan?

Taking Control Of Blood Pressure

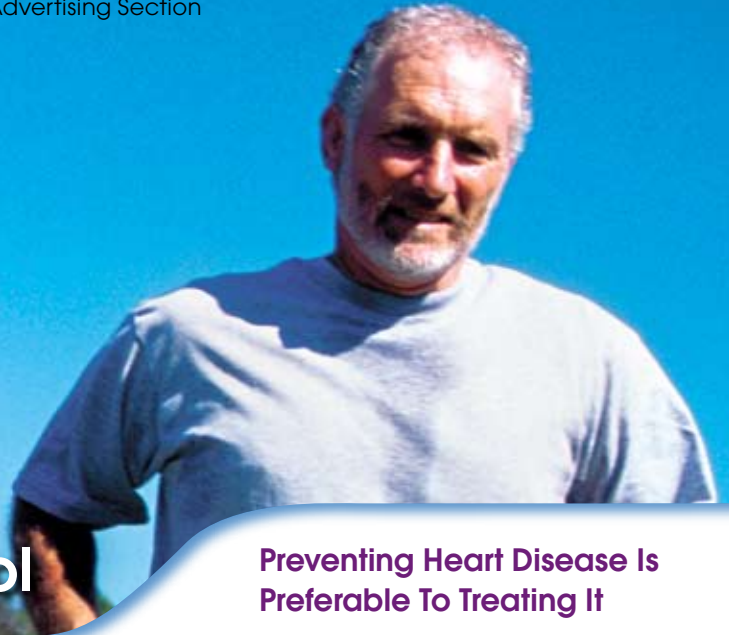
Caring For The Caregiver

Diabetes And Heart Disease

Eating With Your Heart In Mind

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This special section was created in conjunction with the American Heart Association, the largest voluntary health organization fighting heart disease, stroke and other cardiovascular diseases, which annually kill nearly 910,600 Americans. For more information, call 1-800-AHA-USA1 or visit the American Heart Association's Web site at www.americanheart.org. The sponsors in this section were not selected by the American Heart Association and the placement of sponsor ads in this section does not mean that the American Heart Association endorses or recommends these products or services.



Controlling Cholesterol

By Raymond Gibbons, M.D.

We know that it would be much better to prevent heart disease than to treat it after a heart attack or stroke has occurred. That's why results of a recent study came as such good news.

Here's The Welcome News

Between 1980 and 2000, the age-adjusted death rate for heart disease in our country fell by approximately half, resulting in nearly 342,000 fewer deaths in 2000. The researchers found that 24 percent of this decrease was due to reductions in cholesterol levels. So that's 85,000 lives saved because Americans became more physically active and limited their consumption of saturated fats, trans fats and cholesterol. Another 68,000 lives were saved because Americans managed to bring their blood pressure to where it should be. These two measures alone accounted for about half the reduction in deaths.

There's More

That's not the whole story, however. An additional group of people survived because their cholesterol and high blood pressure were treated with medication. So if you add all the numbers, it turns out that approximately two-thirds of the lives

that were saved were due to better control and treatment of cholesterol and high blood pressure.

Ironically, we spend a large number of health care dollars treating people who have a disease that need not have developed in the first place.

Listen Up

Sometimes people become confused by all the different health advice they hear, and they throw up their hands saying that the advice will be different tomorrow. But the scientific basis for recommending sufficient physical activity and a healthy diet rich in fruits and vegetables with limited saturated fat and cholesterol is not theoretical. It won't be different tomorrow. This advice has proven benefits.

Dealing With Extra Weight

Carrying around too much weight makes controlling cholesterol more difficult and can set you up for developing diabetes. Shedding the 40 or 50 or 60 pounds that will bring you to an ideal weight is daunting. However, losing 10 pounds is far easier; this will help reduce cholesterol levels and reduce your risk for developing diabetes by as much as half.

Sometimes diet and lifestyle aren't enough. You may have to take a statin drug to bring down

Preventing Heart Disease Is Preferable To Treating It

your cholesterol even more. Even so, a healthy diet and weight loss will still have many benefits.

A Final Word

Controlling cholesterol is one part of a much broader health picture. Just as your hip bone's connected to your thigh bone, cholesterol, blood pressure, weight and physical activity all work together to keep you healthy and protect you from heart disease and stroke.

Cholesterol Myths

Myth: All fats raise LDL (bad) cholesterol.

Fact: Only saturated fats and trans fats raise LDL cholesterol.

Myth: Olive oil, canola oil and avocados contain large amounts of saturated fats.

Fact: All are rich in monounsaturated fat, the kind that may help lower cholesterol. But all fat is high in calories, so go easy.

Myth: Margarine has fewer calories than butter.

Fact: A tablespoon of butter and a tablespoon of stick margarine both contain approximately 100 calories.

Raymond Gibbons, M.D., is the immediate Past President of the American Heart Association and Professor of Medicine at the Mayo Clinic, Rochester, Minnesota.

To find out more about cholesterol and your heart, visit www.americanheart.org/cholesterol.



Help Yourself To A Healthy Heart

You Can Dramatically Reduce Your Chances Of Developing Heart Disease By Making A Few Simple Changes

By **Sidney C. Smith Jr., M.D.**

Fortunately, most heart disease is preventable. It's never too late to start taking care of your heart by providing it with sufficient exercise, feeding it well and giving tobacco the cold shoulder.

Step Out

With age, artery walls tend to become rigid and thickened with buildups of cholesterol-laden plaques, a process called atherosclerosis. We've come to understand that daily physical activity counters this trend and helps keep arteries supple, relaxed and healthy.

Aim for half an hour of physical activity at least five, but ideally seven, days a week. You don't need a gym. Add more steps to your daily routine by leaving the car at home or taking a brisk walk with a friend. You can catch up on news as well as benefit your heart.

Eat Smart

You know the drill: Cut down on saturated and trans fats, cholesterol and sodium, and increase the number of servings of fruits, vegetables and whole-grain, high-fiber foods; use fat-free and low-fat dairy products and serve small portions (about four to six ounces) of poultry or lean meat; and eat fish twice a week. A trick I've found

useful is to make a fist and use that to gauge a serving size of meat.

Also, cast an eye on how much you eat. No matter how healthy the food, if you eat too much you'll gain weight. Push away from the table when you're still a little hungry.

Smoking

Don't!

Promising New Approaches

Two out of three heart attacks occur as a result of plaque formations that don't cause pain and cannot be identified with an exercise electrocardiogram. These dangerous plaques can split open unexpectedly, form a clot and block an artery without warning. Along with fat and cholesterol, calcium is a component of plaque. An imaging technology called a coronary calcium scan may provide advanced notice by showing the amount of calcium present in the arteries.

There's also interest in a blood test that measures C-reactive protein (CRP), a marker for inflammation. High CRP levels may be associated with an increased risk of heart attack.

Currently, we don't recommend either test for routine screening, although they may be useful in cases where additional information would help us make better-informed treatment decisions.

There's also been growing interest in how inflammation in other parts of the body contributes to heart disease. We know, for example, that people who have periodontal gum disease have a higher incidence of heart problems. Will good dental hygiene cut the risk of heart disease? We'll have to wait for research to provide the answers.

A Final Word

Make it a point to be physically active, eat wisely and don't smoke. Keep your blood pressure and cholesterol levels within normal limits and maintain a healthy weight. Not only will you reduce your chances of developing heart disease, you'll feel terrific!

Sidney C. Smith Jr., M.D., is a Past President of the American Heart Association and Professor of Medicine at the University of North Carolina School of Medicine in Chapel Hill.

Now I Know My ABCs

The best defense against heart disease is in your hands. Although you can't control your age, your family history or your sex, the risk factors you can modify outnumber those you can't.

To learn the ABCs of keeping your heart healthy, log on to www.americanheart.org.



Gary Buss/Jupiter Images

Get Moving

Living A Sedentary Life Is Hazardous To Your Heart

By **Barry A. Franklin, Ph.D.**

Physical activity is good for your heart. Simply put, if you exercise regularly, you cut your risk of heart disease or stroke in half; if you're inactive, you double your risk.

Day By Day

You need at least 30 minutes of moderate-intensity exercise five days each week or 20 minutes of vigorous physical activity three days each week. Brisk walking is considered moderate, jogging vigorous. You can also combine the two by walking briskly two days a week and jogging two days. (Of course, the exercise police won't come after you if you want to do more.)

If you can't carve a 30-minute chunk from your day, set aside three 10-minute exercise bouts. Surprisingly, recent research suggests that three shorter sessions may be better than one longer one when it comes to weight control.

Walking Counts

The majority of previously sedentary people who walk briskly for as little as a mile at a time generally achieve a heart rate sufficient to improve aerobic fitness. If you already walk for exercise, you're probably attaining the same

intensity levels you would in an aerobics class.

Walking can be done at little or no cost, it's readily available, it's associated with fewer muscle or joint injuries than other types of physical activity and, if you walk with a friend or neighbor, it's companionable.

Plan Or No Plan?

For many years we said that a structured exercise plan was the only way to benefit your heart. Some studies published a few years ago proved us wrong. The results clearly showed that simply becoming more active as you went about your day conferred similar benefits on aerobic fitness, body composition and heart health as a regimented workout that lasted 45 to 60 minutes. Recent reports have confirmed these findings.

Collectively, these data support a wider range of choices that make it easier to fit exercise into your life. I now tell patients that the best way to go about getting fit is to combine a formal program of walking or working out at the gym with finding ways to get more physical activity each day (take the stairs, make time for walking breaks).

If you're just starting out, set realistic goals for yourself. Ten minutes a day? Twenty? That's fine. You'll soon find you've

worked your way up to half an hour a day and possibly more. And make sure you enjoy the activity you've chosen!

Rev Up Your Resistance Training

Weight training gives your heart a lot of bang for your exercise buck. It reduces blood pressure and counteracts the age-related loss of muscle mass and strength. As you become stronger, your heart rate and blood pressure go up less when lifting or carrying any load, so it also decreases the demands on your heart.

A Final Word

Whatever you choose to do to become more active—just start today.

Barry A. Franklin, Ph.D., F.A.H.A., is Vice Chair of the American Heart Association's Council on Nutrition, Physical Activity and Metabolism and Director of the Cardiac Rehabilitation Program and Exercise Laboratories at William Beaumont Hospital in Royal Oak, Michigan.

Start! Moving

Start! is the American Heart Association's national movement that encourages individuals and employers to include walking and other healthy habits as part of their daily routine.

Visit www.americanheart.org/start to learn about Start! resources and to sign up for a free tracking tool for physical activity and nutrition.



Keep It Under Control

Don't Be Blindsided By High Blood Pressure

By Daniel W. Jones, M.D.

High blood pressure makes your heart work harder than it should as it pumps oxygen-rich blood through your arteries to nourish every cell in your body. Silently and stealthily, it puts a strain on both your heart and blood vessels. High blood pressure, also called hypertension, is the leading cause of heart disease and stroke. In the presence of other risk factors such as smoking, high cholesterol, obesity or diabetes, it becomes even more dangerous.

Pencil It In

To control this silent killer, have your blood pressure checked regularly. The optimal reading for heart health is 120/80 mmHg or lower. If that's where you are, you can probably prevent high blood pressure from developing in the future if you maintain a healthy weight, remain physically active, eat well and watch the amount of salt in your diet.

Take Control

If your blood pressure is higher than it should be, the same lifestyle measures that prevent high blood pressure can also help manage it. Work with your doctor to develop a suitable exercise program and an appropriate eating plan.

In addition, stop smoking, as this substantially raises your risk. If you've

tried to quit and can't, ask your doctor about medications that may make it easier to avoid the temptation to light up. Also, keep an eye on the amount of alcohol you drink. Although there's evidence that moderate amounts of alcohol might help reduce the risk of heart disease, if you already have high blood pressure, drinking more than a moderate amount can raise it even more and make it difficult to control. If you choose to drink, limit your consumption to one drink each day if you're a woman, and one or at most two drinks each day if you're a man.

Good News On The Medication Front

If you do have high blood pressure, safe, effective, inexpensive medications can help control it. The medicines we use today have fewer dangerous and annoying side effects than did some of those we used in the past. More good news: Taking medications that control high blood pressure dramatically lowers the risk for having a heart attack or stroke.

Cut Back On Salt

For years, scientists disagreed about whether consuming less salt helps to reduce high blood pressure. Results from recent studies have shown that it definitely does in some people.

Now researchers have started asking if salt restriction benefits everyone or only those who are sensitive to salt's effects.

We don't have any solid answers yet, but we're getting closer. We do know that most people consume much more salt than they need and cutting back would likely help to reduce the terrible toll that heart disease takes.

A Final Word

We know more today about controlling high blood pressure than we did even 10 years ago. Work with your doctor now for a healthy future.

There's How Much Salt In That?

Guidelines recommend consuming no more than 2,300 mg of sodium a day (1,500 mg a day if you have high blood pressure, are middle-aged or older or are African-American), but you'll get more than you bargained for if you eat:

A cup of canned pasta with meatballs in tomato sauce	1,053 mg
A fast food fish sandwich	1,120 mg
Three potato pancakes	1,743 mg
One fast food smoked ham and Swiss sandwich	2,350 mg

Daniel W. Jones, M.D., President of the American Heart Association, is Vice Chancellor for Health Affairs and Dean of the School of Medicine at the University of Mississippi Medical Center in Jackson.

Get the facts on high blood pressure from the American Heart Association —visit www.BeatYourRisk.com.



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Caring For The Caregiver

Heart Attacks And Stroke Suddenly Alter The Way A Family Works

By Barry J. Jacobs, Psy.D.

Unlike in a progressively slow illness such as dementia, there's no time to become accustomed to the role of caregiver when someone close to you has a heart attack or stroke. If this kind of an emergency occurs, you set aside other responsibilities and pitch in to help. When the immediate crisis is over, however, you face a period of adjustment where you must find a balance between playing the role of caregiver and getting back to the rest of your life.

All Alone

Many caregivers willingly provide care and find that it can be gratifying, but they often feel isolated and unappreciated. Although they generally do the best they can, they may develop ambivalent feelings about their role and resent it. They find themselves in a state of emotional conflict that makes caregiving even more difficult. Here are some tips to help you cope.

□ Accept help

Caregivers should realize that caregiving is a marathon, not a sprint. Marathon runners know they'll face uphill and downhill and understand that the better they can pace themselves, the more likely they'll finish the race. They never run past the

water station at Mile Five and say, "No, thanks, I don't need any water."

Caregivers, too, must take the long-term view and permit themselves to use every resource available. Unfortunately, many have a hard time allowing themselves to accept help. They put themselves into the position where they're holding on for dear life. The caregivers who reach out to others are the ones who manage the race better over time.

□ Plan ahead

Caregivers and their families need to reassess their plan periodically. Have a family meeting every few months to talk about what's happening. Take into account the changing needs of everyone involved so that when one person begins to falter others will step up.

□ Take time for yourself

With any job, particularly such a hard job as caregiving, people need to replenish themselves. If taking a couple of hours to go to a movie makes them feel better so they can go back to the job of caregiving with a lighter spirit, they can fulfill their commitment in a more effective way.

□ The intimate details

When I talk to a couple about heart attack and stroke, the issue of sexual relations often comes up. Many caregivers fear that if they approach their spouse

sexually the physical strain will have disastrous results.

Although cardiologists have gotten better about encouraging people to resume sexual relations, some never bring up the subject. The couple, in turn, hesitates to mention the topic to the cardiologist, so they never go back to having sex again. That's a tremendous loss.

A Final Word

As a caregiver, be as realistic as possible, seek help as early as possible and use every resource available to make your life easier.

Barry J. Jacobs, Psy.D., American Heart Association national spokesperson on family caregiving, is Director of Behavioral Sciences for the Crozer-Keystone Family Medicine Residency in Springfield, Pennsylvania, and author of *The Emotional Survival Guide for Caregivers*.

Heart Of Caregiving

You may not feel prepared to take on the responsibility of caring for a spouse or parent who has had a heart attack or stroke. The American Heart Association's award-winning Caregiver site can help. It provides information, a free monthly e-newsletter, links to resources and much more.

Log on to www.americanheart.org/caregivers.



The Dangerous Duo Of Diabetes And Heart Disease

Heart Disease Is The Most Common—And Most Serious—Complication Of Diabetes

By **Robert H. Eckel, M.D.**

In the past, dealing with diabetes generally meant controlling blood sugar. Today it also means keeping an eye on what's happening to your heart and blood vessels.

In addition to such commonsense measures as regular physical activity, a healthy weight and an appropriate diet, your doctor will advise you to control cholesterol and triglycerides, keep an eagle eye on your blood pressure and maintain your blood sugar level at your target range.

These time-tested methods certainly work, but as researchers learn more about the link between diabetes and heart disease, we're using additional measures to keep your cardiovascular system in good working order.

Does Your Blood Contain Inflammatory Markers?

Short-term inflammation, the response to injury or infection, protects the body by mounting an immune-system attack against invading bacteria and viruses. Chronic inflammation is a different story. This kind of low-grade tissue inflammation, related to obesity,

is associated with insulin resistance, a condition in which cells don't respond to insulin normally. Insulin resistance contributes to the development of Type 2 diabetes.

We believe that chronic inflammation may link obesity, insulin resistance and diabetes to heart disease. We're currently uncertain about the exact mechanisms, but we do know that a blood marker for chronic inflammation called C-reactive protein, or CRP, is related to an increased risk of heart attack.

Beyond Daily Glucose Levels

As hemoglobin in red blood cells moves through the bloodstream, it picks up a sticky glucose coating. A blood test called A1C measures the amount of glucose coating red blood cells have picked up over the past two or three months (the average life of a red blood cell). High A1C levels are associated with narrowing of the arteries and likely reflect the blood vessel damage that results from the excessive glucose that sticks to blood vessel proteins.

Damage Control

As with the rest of life, basics count. If you have diabetes, it's important to maintain a healthy weight, remain

physically active and eat a high-quality diet rich in fruits, vegetables, fat-free and low-fat dairy, whole-grain, high-fiber foods and two servings of fish each week. If you're taking insulin, talk to your doctor about the importance of carbohydrate counting in determining your insulin dosage.

It's essential to control your blood pressure. Aim for at least 130/85 mmHg, or lower if your doctor advises it. Keep your A1C level less than 7 percent, and your low-density cholesterol (LDL) under 100 mg/dL. Ask your doctor about desirable levels for high-density cholesterol (HDL) and triglycerides. These measures relate to control of diabetes and cardiac risk.

A Final Word

The evidence is sufficient that better glucose control is related to fewer cardiovascular complications, so work with your doctor to manage diabetes successfully today and for the long run.

Robert H. Eckel, M.D., is a Past President of the American Heart Association and a Professor of Medicine at the University of Colorado Denver.

Visit www.IKnowDiabetes.org to learn about The Heart of Diabetes, a program to help those living with Type 2 diabetes manage their disease.



Eating With Your Heart In Mind

What You Eat—And Choose Not To Eat—Can Cut Your Risk For Heart Disease

By Linda Van Horn, Ph.D., R.D.

When it comes to recommending what to eat to prevent heart disease, the emphasis has shifted away from what you shouldn't eat to what you should. Start by eating whole-grain, high-fiber foods and fruits and vegetables every day. They contribute nutrients and phytochemicals that often aren't available anywhere else. Include nonfat milk or other low-fat and fat-free dairy products, fish, vegetable oils and legumes like beans to provide protein and healthy fatty acids. If you deny your body the benefits of these foods, you're automatically disabling one of your strongest weapons against illness.

Back To Basics

Some people like to know exactly how many servings from each food group they should consume each day. Others find that approach difficult to translate from government guidelines to plate. If you belong to the latter group, you might find it easier to follow the 80-20 rule.

People often admit that they grab what-

ever is available when they're hungry. When they say that, they generally mean a doughnut, ice cream or the like. You can quiet that seemingly irresistible urge to eat empty-calorie foods if you make it a habit to eat meals rich in nutrient-dense, high-fiber foods instead.

Lean people who never seem to have a weight problem are generally selective about their indulgences. They routinely follow a nutrient-dense diet rather than give in to a spur-of-the-moment craving. If dark chocolate or ice cream makes life worth living, they'll savor these treats—as treats.

Portion Inflation

These days it's easy to eat more than you should. Indeed, the challenge is to eat less than the typical serving.

What was once officially considered an average serving now seems small enough to be laughable. For example, the standard bagel today has more than doubled in size and often has more than twice as many calories as one served 20 years ago.

The 80/20 Food Rule

When you look at the food on your plate or what you eat for snacks, if 80 percent is fruits, vegetables or whole-grain, high-fiber foods and the other 20 percent is meat, chicken or eggs, or an occasional sweet or snack, you're on the right track.

Even if you routinely eat nutritious foods, consuming more calories than you work off will put on unwanted pounds.

Be A Role Model

Every time you decide to cook dinner instead of buying fast food takeout, you're making a choice that has an impact on your children's health. You're teaching them what a meal should be. Conversely, if they enter adulthood overweight after years of unhealthy eating they are at a health disadvantage for life. Set them on the appropriate nutritional path early in life and they're more likely to stay there when they are older.

Linda Van Horn, Ph.D., R.D., is the Co-Chair of the American Heart Association's Nutrition Committee and Professor of Preventive Medicine and a Research Nutritionist at Northwestern University's Feinberg School of Medicine in Chicago.

This special advertising section was produced in conjunction with the American Heart Association by TIME Marketing: Liza Greene, Creative Services Director; Ray Ruolo, Art Director; Cindy Murphy, Production; Shanna Yehlen, Coordinator.

Log on to www.heartcheckmark.org to create a free, heart-healthy grocery list you can print and take with you to the store.