



To Your Health

Information You Can Use



A New Way to Tell Your Cardiovascular Fortune

When it comes to your heart, it turns out there is a crystal ball, but you don't need a fortune teller! Look into your lab results instead.

In January, 2012, the *New England Journal of Medicine* published the results of a major research study. This report analyzed 50 years of data from 18 population-based studies, collected from over 250,000 black and white men and women between the ages of 45 and 75. The results prove that having certain cardiovascular risk factors in middle age can significantly increase your odds for experiencing a heart attack or stroke later in life. This means leading a consistently healthy lifestyle, beginning in your younger years, has a direct impact on your heart's health as you age. You have more reason than ever to prevent (or control) these risk factors!

Is It In the Cards?

Everyone should be aware of the four major risk factors for cardiovascular disease, identified in the *Cardiovascular Lifetime Risk Pooling Project*:

- ♥ **Smoking status.** It's simply not healthy to use tobacco products, or to expose yourself to second-hand smoke. If you smoke, quit!
- ♥ **High blood pressure.** Your blood pressure should be 120/80 or lower. You may be diagnosed with hypertension, or high blood pressure, if your readings are generally 140/90 or higher.
- ♥ **High cholesterol.** According to the study, the optimal total cholesterol level is no higher than 180 mg/dL. (This is lower than the current recommendation of the American Heart Association, which states that total cholesterol should be less than 200 mg/dL.)
- ♥ **Diabetes.** Diabetes is a chronic disease caused by high levels of sugar in the blood. It can be diagnosed through various blood tests, such as the fasting plasma glucose test. You are considered diabetic if you score 126 or higher on a fasting plasma glucose test, and those results are repeated by testing again on another day.

Type 2 diabetes, the most common form of the disease, usually develops over time and is often the result of an unhealthy lifestyle, especially obesity.

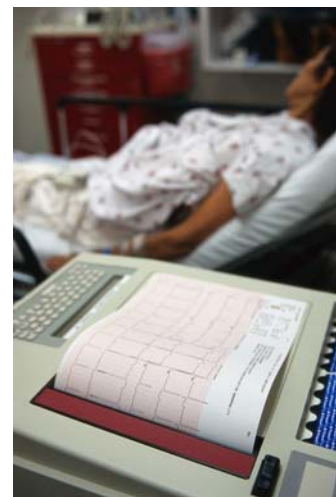
These are not the only factors that may contribute to the development of heart disease. However, you can dramatically reduce your lifetime risk for heart attack and stroke by avoiding them.

Look Into the Future

The report shows you can actually predict a person's lifetime risk for heart disease by looking at certain health markers during his or her 40s and 50s. Race, gender and age alone are not risk factors for heart disease.

It may not seem too bad to have a few of the traditional risk factors before you reach your golden years. You're not likely to develop heart disease in the short term, because this condition mostly affects elderly adults. But consider this example from the National Heart, Lung and Blood Institute—a 55-year-old man with two risk factors has almost a 30% chance of dying of heart disease by age 80. Compare that to the same man with one or no risk factors—his chance is less than 5%. This means a man with more than one risk factor is six times more likely to die from heart disease before age 80!

These risk factors also increase the chances you'll suffer a non-fatal heart attack or stroke. According to the study, a 45-year-old woman with two risk factors has almost a 31% chance of suffering a major cardiovascular disease event by age 80. Compare that to the same woman with no risk factors. Her odds of having a heart attack or stroke by age 80 are only around 4%!



You Control Your Destiny

Don't lose heart—save it! There's a lot you can do to prevent cardiovascular disease at any age, even if you have some of the risk factors today. And don't lose hope if you already have cardiovascular disease—you still control your health destiny. With your physician's help, take steps toward lessening your chance of a heart attack or stroke.

- ☑ **See your doctor for regular preventive care, including lab work to check your cholesterol and blood sugar levels.** It is important to make time for routine medical care, even when you feel healthy. Some conditions, such as high blood pressure or high cholesterol, have no symptoms. The early signs of diabetes can be subtle and easily overlooked. Your doctor will screen you for these and other conditions during a physical.



Blood tests such as the lipid profile (to examine cholesterol and triglyceride levels) and a fasting plasma glucose test (to determine the blood sugar level) are often ordered in conjunction with a routine physical exam. Your blood pressure is usually measured anytime you have a doctor's appointment. These tests can help to diagnose and treat health conditions before they cause serious damage to your body.

How often you have a physical is up to you and your doctor. Some people prefer to see the doctor annually (and these preventive visits may be covered at 100% by your health plan). A younger, healthier person may choose to have physicals less frequently.

However, it's wise to have a routine physical at least once every five years, until you turn age 65. At that point, annual exams are best.

- ☑ **Move your body.** You probably know that regular exercise keeps your bones strong and your muscles flexible, as well as helping to control your weight. But did you know that regular aerobic exercise, like walking, biking and swimming, can raise your HDL ("good") cholesterol level? HDL cholesterol protects your heart, so this is one number that you want to see going up!

At the same time, exercise can lower your LDL ("bad") cholesterol level and blood pressure, and helps to normalize your blood sugar. Every step counts!



- ☑ **Follow your personalized treatment plan.** If you are generally healthy, your doctor may give you the usual advice: Eat a healthy diet, get plenty of exercise and control the stress in your life. But if you have been diagnosed with any of the risk factors, or with actual cardiovascular disease, there may be some additional things you need to do. **To lower your odds for a heart attack or stroke, it is critical that you follow your doctor's treatment plan.**

This could include taking prescription medication, such as statins for high cholesterol, ACE inhibitors or beta-blockers for high blood pressure, and insulin for diabetes. But filling the script is just a start. Always take your medication exactly as directed—don't skip doses or cut pills in half without first checking with your doctor or pharmacist.

If your doctor puts you on a special diet to manage your condition, make sure you know how to stick to it. Consider making an appointment with a registered dietician, who can assist you with meal planning, including recipes and food substitutions. Most hospitals have dieticians on staff.



Remember—your treatment plan can't help you unless you truly commit to it!