



Emory Healthcare Heart Disease Prevention Live Chat – (2/21/2011) Transcript

[admin] We want to thank Dr. Sperling for joining us for an interactive online Q & A web chat on the topic of heart disease prevention. Dr. Sperling is available to answer questions and discuss various topics about heart disease including prevention, detection, healthy nutrition tips, cardiac rehabilitation and innovative new cardiovascular research on the horizon. Ask away!

[Kate] What are the symptoms of heart disease in women?

[Dr. Sperling] Great question, Kate. Women have atypical heart disease symptoms. Both men and women can experience crushing, squeezing, or burning pain in the chest or pain that radiates down the arms or shoulders or chest discomfort that does not go away. Women more often experience atypical symptoms, such as shortness of breath, jaw pain, fatigue, nausea and headaches.

=== NOTE: a portion of the transcript was lost here due to a technical glitch ===

[mary] what about fatigue after a heart attack

[Dr. Sperling] Good question, I'll cover that one now

[Dr. Sperling] Fatigue is a frequent symptom after heart attack, it can be a signal of a number of different problems or issues. It could be a sign that the heart muscle has been damaged, it is not infrequent for people to feel depressed after a heart attack...

[Dr. Sperling] and lastly, some of the new medications can result in symptoms of fatigue. It would be important for somebody with fatigue following a heart attack to review these symptoms with their doctor for further advice and direction.

[Libby] How do these cardiovascular scans compare to more invasive tests to determine cardiovascular disease?

[Dr. Sperling] Good question, Libby. I'll answer that question now.

[Dr. Sperling] We have many noninvasive imaging modalities to assess the state of the heart.

[Dr. Sperling] Some of these include ultrasound or echo, CT, MRI, and nuclear and PET scanning.

[Dr. Sperling] When your doctor determines which of these tests to use vs. an invasive approach, the specific question that needs to be answered helps direct us in what technology to use.

[Dr. Sperling] Our best noninvasive tests can predict significantly blocked arteries with an accuracy of 90-93%.

[Jennifer J.] I am a 37 yr old woman with a family history of heart problems. I check my cholesterol and BP in my yearly physical but am wondering at what point I should have further tests. I see ads for tests that check your arterial age and other heart screenings that cost money and are not covered by insurance. Any thoughts?

[Dr. Sperling] Some of the decisions that doctors make have to do with an individual patient's symptoms, risk, factors, and whether they have prior established heart disease.

[Dr. Sperling] While this online chat is not the best place for me to address your specific and unique patient circumstances.

[Dr. Sperling] However, in general, family history of heart disease is something to pay close attention to and cardiovascular centers of excellence, like Emory, have unique programs for heart disease prevention that can help individuals like you assess their total heart disease risk.

[Dr. Sperling] These centers can help create individualized treatment plans based off your unique circumstances, history, and risk factors.

[mary] Thanks a lot I got my questions answered

[Dr. Sperling] Great Mary, glad to hear I was able to answer your question.

[Libby] Is it really helpful to take All natural Enteric Fish Oil - 900mg Total Omega-3 for cardiovascular health?

[mary] one more if your family history of heart disease I should be very careful

[Dr. Sperling] Libby, the use of omega-3 fatty acids is an interesting area in cardiovascular prevention.

[Dr. Sperling] Omega-3 fatty acids can be plant-based, such as flax seed, or fish based, such as the omega-3 fatty acid capsules that can be obtained over the counter.

[Dr. Sperling] For individuals without known heart disease, we recommend eating at least 2 meals a week that contain fish with high contents of omega-3 fatty acids, such as tuna, mackerel, etc.

[Dr. Sperling] In individuals with known vascular disease, we recommend a total dose of 1 gram of DHA/EPA per day.

[Dr. Sperling] Another indication for omega-3 fatty acids, is in patients with very high levels of triglycerides. Here we often recommend doses of 3 to as high as 8 grams a day of omega-3 fatty acids.

[mary] tuna mackerel sound very fat

[JitenG] Are plant-based omega-3 fatty acids also recommended in any cases?

[Dr. Sperling] We'll touch on risk factors next, including family history, Mary.

[Dr. Sperling] It is true that fatty fish tend to contain higher quantities of omega-3s. In general, with the appropriate portion size of fish, the fat content itself would not tend to promote risk for heart disease.

[Dr. Sperling] Fish or marine-based fatty acids are a more efficient way of delivering the omega-3s. Your body converts plant-based omega-3s through an enzyme to the fish-based fatty acid structure.

[mary] all right

[Libby] So Tiliapia is not considered to be high in Omega-3's, Have weaned from a lot of tuna bc of mercury concerns

[Jeff] What roles do tobacco use and alcohol consumption play in the potential risk for developing heart disease?

[Dr. Sperling] Perfect timing Jeff, we're about to cover risk factors for heart disease.

[Dr. Sperling] Family history of cardiovascular disease, smoking, alcohol consumption, high cholesterol, high blood pressure, low good cholesterol, obesity, and diabetes are the typical known risk factors for heart disease.

[Dr. Sperling] Libby, in general, farm raised fish, (including tilapia) as opposed to free swimming fish tend to have less of the favorable fatty acids.

[Dr. Sperling] Some larger fish, including tuna, mackerel, swordfish and shark have higher levels of mercury, but when consumed in moderation, the levels are likely relatively safe unless you were pregnant or breastfeeding.

[Dr. Sperling] Great question!

[Shannon] Dr. Sperling, Does a low activity level play a role in heart disease?

[Dr. Sperling] Good question, Shannon. In a population, your activity level and fitness level are important predictors of your risk for heart disease, as well as the development of many other chronic illnesses.

[Dr. Sperling] A low activity level will often put you at increased risk for some of the heart disease risk factors, such as diabetes, a low good cholesterol level, and possibly high blood pressure.

[Dr. Sperling] Who's got the next question for me?

[Jeff] Do you guys offer any events or education resources for us to use after this chat?

[Dr. Sperling] The Emory Heart & Vascular Center website offers lots of information and resources on our areas of practice. It includes a lot of good resources on heart disease prevention as well.

[mary] can you lead a normal life following these steps

[Dr. Sperling] Specifically, in the month of February (Heart Month) we have a series of HeartWise Heart Disease Prevention events

[Dr. Sperling] <http://www.emoryhealthcare.org/heart>

[Dr. Sperling] Mary, I think part of your question may have been cut off. Do you mind repeating it?

[Dr. Sperling] Here's a to upcoming events listed in our recent newsletter, Jeff -
<http://www.emoryhealthcare.org/emory-health-source/index.html>

[mary] can you lead a normal lifesyle following these things you have menyioned

[Dr. Sperling] Mary, I'm not sure exactly what your question was. But many patients can live a normal and active life with a diagnosis of heart disease.

[mary] thats what I was trying to say

[Dr. Sperling] It would be important, under the care of your doctor, to develop a program that combines optimal medical therapy, lifestyle and behavioral changes, and scheduled follow-up visits to track your progress.

[Dr. Sperling] Does that answer your question, Mary?

[mary] yes that does

[Dr. Sperling] We have a few HeartWise program events coming up

[Dr. Sperling] Keeping Active with Healthy Feet takes place on February 25th

[Dr. Sperling] Great, glad to hear it, Mary.

[mary] why do some people get a pace maker

[Dr. Sperling] There are a number of indications for the placement of a pacemaker. A common one is that the heart slows down significantly and begins to pause or stop for a few seconds.

[Dr. Sperling] There are special types of pacemakers, which are used to help the heart pump better in individuals with weak heart muscles.

[Dr. Sperling] Especially if the individual has had symptoms like passing out or almost passing out.

[mary] Oh i see

[Libby] How does Lipitor help my cardiovascular health? Bc of cost, I have stopped taking it in the last yr. What risk am I running?

[Dr. Sperling] Libby, we can't address your specific health benefits from Lipitor, but I can tell you that in general, the statins like Lipitor, are medications that affect the rate-limiting step of cholesterol synthesis. Many of these agents have been found to reduce the risk of heart attack, stroke, death, and need for intervention, such as heart surgery.

[Dr. Sperling] There are presently 7 statins on the market, these agents tend to differ by cost, strength, and how long they stay in your blood (half life)

[Dr. Sperling] It would be important for you to review the indications with your doctor.

[Jeff] At what age does heart disease become a more realistic risk for men?

[Dr. Sperling] Male gender alone is a recognized risk factor for heart disease, although not one we can change.

[Dr. Sperling] Typically, we begin to see an increase in heart disease for men in their 50s and 60s as opposed to women, who's risk tends to lag a decade behind men.

[Dr. Sperling] Importantly, men or women with a strong family history of early heart disease, might be at increased risk to develop problems sooner.

[Dr. Sperling] We've got about 15 minutes left, time for a few more questions.

[Shannon] I would like a women physician. Do you have any women cardiologists?

[Libby] How does increased stress and elevated cortisol levels affect our heart health?

[Dr. Sperling] Shannon, your question is well-timed. We are in the steps of creating one of the top women's heart programs in the country. Currently, we have two female cardiologists in our center for heart disease prevention and our third will be joining in July.

[Dr. Sperling] Emory also has several other outstanding female cardiologists in subspecialty areas such as electrophysiology, interventional cardiology, and adult congenital cardiology.

[Dr. Sperling] The two female cardiologists at Emory are Dr. Isiadinso & Dr. Bhalla

[Dr. Sperling] Good question, Libby.

[Dr. Sperling] Stress, anxiety and depression, are often unrecognized heart risk factors. An important study known as the Inter-Heart study, found that these factors might be as important for heart risk as the presence of diabetes.

[Dr. Sperling] You are correct, in that one of the mechanisms related to stress and increased heart risk, is increased cortisol levels.

[Jennifer] When should you start seeing a cardiologist? Should it be after a cardiac event or is it best to start sooner to try and prevent one?

[Dr. Sperling] Stress also increases the stickiness of our platelets, and affects how our blood vessels relax.

[Dr. Sperling] Of course as a preventive cardiologist, I feel strongly that the right time to seek the advice of an expert is prior to having a problem.

[Dr. Sperling] More and more we can identify individuals at risk and prevent problems like heart attacks, strokes, and need for heart surgeries.

[Dr. Sperling] Did that answer your question, Jennifer?

[Jennifer] Yes, thanks.

[Dr. Sperling] We are proud at Emory that we developed one of the first heart disease prevention programs in the country, which is now going into its 14th year.

[Dr. Sperling] We are fortunate that we have 7 highly qualified physicians and two outstanding nurse practitioners who are specifically trained in the field of heart disease prevention.

[Shannon] After a heart attack, what is the best way to get back to everyday life and exercise level?

[Dr. Sperling] Following a heart attack, it would be considered standard of care to be referred to a comprehensive cardiac rehabilitation program. There are many of these in the state of Georgia.

[Dr. Sperling] At Emory, our HeartWise Risk Reduction Program, with a team of experts, including nurses, exercise specialists, nutritionists, and physicians will help you individualize a program for your recovery

[Dr. Sperling] Here's a link to our heart disease prevention website for more information - www.emoryhealthcare.org/cardiac-rehabilitation/index.html

[Dr. Sperling] We have time for one final question.

[Jeff] What's a single change I can make to my normal diet to lower my risk for heart disease?

[mary] this has been ver good to talk to you for we could not have thought of this in the office on a visit

[Dr. Sperling] For most Americans, it is important to think about limiting portion size. Unfortunately as a society we are becoming more and more obese, often at a younger age.

[Dr. Sperling] The best diet to prevent heart disease is a mediterranean type of diet, which is also sustainable for a lifetime.

[Libby] Thank you for sharing Dr. Sperling!

[Dr. Sperling] Did that answer your question, Jeff?

[Jeff] Yes, thank you!

[Dr. Sperling] You're very welcome Libby and Mary and everyone else who joined us today!

[Dr. Sperling] Thanks for a great chat!

[mary] thank you too

[admin] Thank you everyone, Dr Sperling, for joining in our first-ever live chat here at Emory Healthcare! I'm going to close down the chat room now.

[Dr. Sperling] You're very welcome! Great to talk with you all. Looking forward to the next one!

[mary] very good

[admin] Registered participants will receive a short survey asking about the experience--we appreciate your feedback.

[admin] A transcript of the chat will be available on our blog. Registered participants will receive an emailed transcript as well.