FDA Approves Blood Test to Help Predict Future Risk of Coronary Heart Disease; Especially Valuable for Women

By NATALIE NESS

Heart disease is the leading cause of death among women. Despite that, just 13 percent of women surveyed by the American Heart Association think heart disease is their biggest health risk. The ability to predict the risk of future coronary heart disease is a significant factor in getting patients lifersaving assessment and treatment, which is why a recently FDA-approved blood test is so beneficial, especially for women.

“One of the challenges in medicine is determining which patient is at greatest risk for developing a life-threatening and preventable disease,” says Daniel Eisenberg, M.D., medical director of cardiology at Providence Saint Joseph Medical Center in Burbank. “Traditionally, risk factors such as cholesterol level, age, high blood pressure, diabetes and smoking have been used as markers for future development of cardiovascular disease. The challenge has been to find tests that can identify patients at greater risk with greater sensitivity than those tests we already commonly employ.”

The FDA-approved screening test, called the PLAC Test for Lp-PLA2, can do just that. The test measures the activity of lipoprotein-associated phospholipase A2 (Lp-PLA2) in a patient’s blood. Lp-PLA2 is a biological marker for vascular inflammation, a condition associated with the buildup of plaque in the arteries that supply blood to the heart. Over time, this buildup can result in a narrowing of the arteries and lead to cardiovascular heart disease events, such as a heart attack.

The FDA cleared the test for use in all adults with no history of heart disease, but studies submitted by the company and reviewed by the FDA show that the test is better at discriminating this risk in women, particularly African-American women.

“A blood test that helps better predict future coronary heart disease risk in women can help health care professionals identify these patients before they experience a serious event, such as a heart attack, and end up in the emergency room,” said Nicole Weinberg, M.D., a cardiologist at Providence Saint John’s Health Center in Santa Monica. “Early detection gives doctors and their patients an amazing opportunity to be proactive about preventing heart disease before serious symptoms become life-threatening.”

Providence Medical Centers in Southern California offer clinical trials to be at the forefront of diagnostics and treatment of serious illness including cardiovascular disease and stroke. And physicians affiliated with Providence follow the latest findings – such as this blood test for women – in a quest to provide comprehensive quality and innovative care.

All Providence hospital in the San Fernando Valley – Providence Saint Joseph, Providence Holy Cross and Providence Tarzana – specialize in cardiology for heart patients and neurology for stroke care. The three hospitals’ Emergency Departments are certified STEMI Receiving Centers for patients suffering the most severe type of heart attack, and Primary Stoke Centers, utilizing the latest treatment for stroke patients.

Also in the Los Angeles Areas are Providence Little Company of Mary Medical Centers in San Pedro and Torrance and the newest addition to the organization, Providence Saint John’s Health Center, Santa Monica. All provide specialists in heart and stroke care, with a growing emphasis on women’s health.

Researchers who study the gender differences in cardiovascular disease often focus on the protective role of estrogen, Dr. Weinberg said. While cardiovascular disease is the leading cause of death among women, they develop the disease, on average, about 10 years later than men. Partial protection by a woman’s own hormones appears to be very helpful in woman before menopause, but hormone replacement after menopause is no longer recommended for prevention of heart disease.

Women who find out they are at greater risk for future coronary heart disease should work with their doctors to learn more about how it can be prevented and reversed with lifestyle changes. Women who already exhibit symptoms of heart disease can benefit from treatments ranging from proper medication to reduce heart attacks and control symptoms to lifestyle changes, such as losing weight, eating a low-fat diet and exercising regularly.

“Diet is the cornerstone for prevention and treatment of heart disease,” Dr. Eisenberg said. “Typically, fewer calories and less fat in the diet is recommended. Fewer animal products, such as all meats, cheeses and whole milk products are also recommended. Moderate exercise such as walking and other light exercises are suggested for anyone who can do so safely.”

For information about Providence Southern California, visit California.providence.org, or for a physician referral, call 1-888-HEALING (432-5464).
HEART DISEASE & STROKE AWARENESS

Heavy Drinking May Increase Stroke Risk More than Traditional Factors

D rinking more than two alcoholic beverages daily in middle-age may raise your stroke risk more than traditional factors such as high blood pressure and diabetes, according to a study published in the American Heart Association journal Stroke.

In a study of 11,644 middle-aged Swedish twins who were followed for 43 years, researchers compared the effects of an average of more than two drinks daily (‘heavy drinking’) to less than half a drink daily (‘light drinking’).

The study showed that:

- Heavy drinkers had about a 34 percent higher risk of stroke compared to light drinkers.
- Mid-life heavy drinkers (in their 50s and 60s) were likely to have a stroke five years earlier in life irrespective of genetic and early-life factors.
- Heavy drinkers had increased stroke risk in their mid-life compared to well-known risk factors like high blood pressure and diabetes.
- At age 75, blood pressure and diabetes appeared to take over as one of the main influences on having a stroke.

Past studies have shown that alcohol affects stroke risk, but this is the first study to pinpoint differences with age.

“We now have a clearer picture about these risk factors, how they change with age and how the influence of drinking alcohol shifts as we get older,” said Pavla Kadlecová, M.Sc., a statistician at St. Anne’s University Hospital’s International Clinical Research Center in the Czech Republic.

Researchers analyzed results from the Swedish Twin Registry of same-sex twins who answered questionnaires in 1967-70. All twins were under age 60 at the start. By 2010, the registry yielded 43 years of follow-up, including hospital discharge and cause of death data.

Researchers then sorted the data based on stroke, high blood pressure, diabetes and other cardiovascular incidences.

Almost 30 percent of participants had a stroke. They were categorized as light, moderate, heavy or non-drinkers based on the questionnaires.

Researchers compared the risk from alcohol and health risks like high blood pressure, diabetes and smoking.

Among identical twin pairs, siblings who had a stroke drank more than their siblings who hadn’t had a stroke, suggesting that mid-life drinking raises stroke risks regardless of genetics and early life.

The study is consistent with the American Heart Association’s recommended limit of two drinks a day for men and one for women. That’s about 8 ounces of wine (two drinks) for a man and 4 ounces (one drink) for a woman.

Regular heavy drinking of any kind of alcohol can raise blood pressure and causes heart failure or irregular heartbeats over time with repeated drinking, in addition to stroke and other risks.

For mid-life adults, avoiding more than two drinks a day could be a way to prevent stroke in later productive age (about 60), Kadlecova said.

Information for this article was provided by the American Heart Association.
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Pomona Valley Hospital Medical Center Named Among Nation’s 100 Best for Cardiac Care

For the first time in the 50 years that the American Heart Association/American Stroke Association has released an annual snapshot of heart disease and stroke statistics in the U.S., the new report adds a global view. More than 190 countries show heart disease remains the No. 1 global cause of death with 17.3 million deaths each year, according to “Heart Disease and Stroke Statistics — 2015 Update: A Report From the American Heart Association.” That number is expected to rise to more than 23.6 million by 2030, the report found.

Stroke remains the No. 2 cause of death in the world. The stroke death rate — the number of deaths per 100,000 people — went down between 1990 and 2010. However, the number of people having first and recurrent strokes each year went up, reaching 33 million in 2010.

Here are a few key statistics about heart disease, stroke, other cardiovascular diseases and risk factors, in addition to commonly cited statistics about the association’s research program:

Heart Disease, Stroke and other Cardiovascular Diseases

Cardiovascular disease is the leading global cause of death, accounting for 17.3 million deaths per year, a number that is expected to grow to more than 23.6 million by 2030.

• In 2008, cardiovascular deaths represented 36% of all global deaths, with 80% of those deaths taking place in low- and middle-income countries.

• Nearly 787,000 deaths in the U.S. died from heart disease, stroke and other cardiovascular diseases in 2011. That’s about one of every three deaths in America.

• About 2,150 Americans die each day from these diseases, one every 40 seconds.

• Cardiovascular diseases claim more lives than all forms of cancer combined.

• About 85.6 million Americans are living with some form of cardiovascular disease or the after-effects of stroke.

• Direct and indirect costs of cardiovascular diseases and stroke total about $320.1 billion. That includes health expenditures and lost productivity.

• Nearly half of all African-American adults have some form of cardiovascular disease, 48 percent of women and 46 percent of men.

• Heart disease is the No. 1 cause of death in the world and the leading cause of death in the United States, killing over 375,000 Americans a year.

• Heart disease accounts for 1 in 7 deaths in the U.S.

• Someone in the U.S. dies from heart disease about once every 90 seconds.

Heart Disease

• From 2001 to 2011, the death rate from heart disease has fallen about 39 percent — but the burden and risk factors remain alarmingly high.

• Heart disease strikes someone in the U.S. about once every 43 seconds.

• Heart disease is the No. 1 cause of death in the United States, killing over 375,000 people a year.

• Heart disease is the No. 1 killer of women, taking more lives than all forms of cancer combined.

• Over 39,000 African-Americans died from heart disease in 2011.

• Cardiovascular operations and procedures increased about 28 percent from 2000 to 2010, according to federal data, totaling about 7.6 million in 2010.

• About 735,000 people in the U.S. have heart attacks each year. Of those, about 120,000 die.

• About 65,000 people in the U.S. have a first-time heart attack each year, and about 300,000 have recurrent heart attacks.

Stroke

• In 2010, worldwide prevalence of stroke was 33 million, with 16.9 million people having a first stroke. Stroke was the second-leading global cause of death behind heart disease, accounting for 11.13% of total deaths worldwide.

• Stroke is the No. 4 cause of death in the United States, killing nearly 129,000 people a year.

• Stroke kills someone in the U.S. about once every four minutes.

• African-Americans have nearly twice the risk for a first-ever stroke than white people, and a much higher death rate from stroke.

• Over the past 10 years, the death rate from stroke has fallen about 35 percent and the number of stroke deaths has dropped about 21 percent.

• About 795,000 people have a stroke every year.

• Someone in the U.S. has a stroke about once every 40 seconds.

• Stroke causes 1 of every 20 deaths in the U.S.

• Stroke is a leading cause of disability. Stroke is the leading preventable cause of disability.

Sudden Cardiac Arrest

• In 2011, about 326,200 people experienced out-of-hospital cardiac arrests in the United States. Of those treated by emergency medical services, 10.6 percent survived. Of the 19,300 bystander-witnessed out-of-hospital cardiac arrests in 2011, 31.4 percent survived.

• Each year, about 290,000 people have a cardiac arrest while in the hospital.

Heart Disease, Stroke and Cardiovascular Disease Risk Factors

The American Heart Association gauges the cardiovascular health of the nation by tracking seven key health factors and behaviors that increase risks for heart disease and stroke. We call these “Life’s Simple 7” and we measure them to track progress toward our 2020 Impact Goal: to improve the cardiovascular health of all Americans by 20 percent and reduce deaths from cardiovascular diseases and stroke by 20 percent, by the year 2020. Life’s Simple 7 are: not smoking, physical activity, healthy diet, body weight, and control of cholesterol, blood pressure and blood sugar. Here are key facts related to these factors:

Smoking

• Worldwide, tobacco smoking (including secondhand smoke) was one of the top three leading risk factors for disease and contributed to an estimated 6.2 million deaths in 2010.

• 16 percent of students grades 9-12 report being current smokers. Among adults, 20 percent of men and 16 percent of women smoke.

• Among adults, those most likely to smoke were American Indian or Alaska Native men (26 percent), white men...
Gary Brandt’s life stopped on a dime when his wife found him on the floor of their room, incapable of movement and his speech slurred. Clear signs of a stroke. She called 9-1-1 and Gary was rushed to Pomona Valley Hospital Medical Center where a large clot, blocking blood flow to the right side of his brain, was discovered. A procedure was used to extract the clot, saving Gary from paralysis. Now Gary is back at work and enjoying time with his family and their beautiful black Lab. While our Stead Heart & Vascular Center has earned national recognition, it’s patients like Gary who truly motivate us. Learn more about our award winning care and the patients who inspire it.

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HEART DISEASE & STROKE AWARENESS

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Less than 1 percent of U.S. adults meet Healthy Diet. Among students in grades 9-12, only About one in every three U.S. adults – 31 percent – reports participating in no leisure time physical activity. Among students in grades 9-12, only About one in every three U.S. adults – 31 percent – reports participating in no leisure time physical activity. About 20 percent of Americans have Physical Activity. About one in every three U.S. adults – 31 percent – reports participating in no leisure time physical activity. About one in every three U.S. adults – 31 percent – reports participating in no leisure time physical activity.

Healthy Diet

Less than 1 percent of U.S. adults meet the American Heart Association’s definition for “Ideal Healthy Diet.” Essentially no children meet the definition. Of the 5 components of a healthy diet, reducing sodium and increasing whole grains are the biggest challenges. Eating patterns have changed dramatically in recent decades. Research from 1971 to 2004 showed that women consumed an average of 22 percent more calories in that span and men consumed and average of 10 percent more. The average woman eats about 1,900 calories a day and the average man has nearly 2,700, according to the government figures.

Overweight/Obesity

Most Americans older than 20 are overweight or obese. Over 159 million U.S. adults – or about 69 percent – are overweight or obese. About 32 percent children are overweight or obese. About 24 million are overweight and about 13 million – 17 percent – are obese.

In 2008, an estimated 1.46 billion adults worldwide were overweight or obese. The prevalence of obesity was estimated at 205 million men and 297 million women.

Cholesterol

About 43 percent of Americans have total cholesterol higher of 200 mg/dL or higher. The race and gender breakdown is:

- 46 percent of Hispanic men
- 46 percent of white women
- 43 percent of Hispanic women
- 41 percent of black women
- 40 percent of white men
- 37 percent of black men

About 13 percent of Americans have total cholesterol over 240 mg/dL.

Nearly one of every three Americans has high levels of LDL cholesterol (the “bad” kind).

About 20 percent of Americans have low levels of HDL cholesterol (the “good” kind).

High Blood Pressure

About 80 million U.S. adults have high blood pressure. That’s about 33 percent. About 77 percent of those are using anti-hypertensive medication, but only 54 of those have their condition controlled.

About 69 percent of people who have a first heart attack, 77 percent of people who have a first stroke and 74 percent who have a congestive heart failure have blood pressure higher than 140/90 mm Hg.

Nearly half of people with high blood pressure (46 percent) do not have it under control.

Hypertension is projected to increase about 8 percent between 2013 and 2030.

Rates of high blood pressure among African-Americans is among the highest of any population in the world. Here is the U.S. breakdown by race and gender:

- 46 percent of African-American women have high blood pressure.
- 45 percent of African-American men have high blood pressure.
- 33 percent of white men have high blood pressure.
- 30 percent of white women have high blood pressure.
- 30 percent of Hispanic men have high blood pressure.
- 30 percent of Hispanic women have high blood pressure.

In 2030, it was estimated that 972 million adults worldwide had hypertension.

Blood Sugar/Diabetes

The prevalence of diabetes for adults worldwide was estimated to be 6.4 percent in 2010 and is projected to be 7.7 percent in 2030. The total number of people with diabetes is projected to rise from 285 million in 2010 to 439 million in 2030.

About 21 million Americans have diagnosed diabetes, almost 9 percent of the adult population, but diabetes rates are growing. In fact, about 35 percent of Americans have pre-diabetes.

African-Americans, Hispanics/Latinos and other ethnic minorities bear a disproportionate burden of diabetes in the U.S.

American Heart Association Research

The American Heart Association does not conduct research. Rather, the organization uses donations to fund research projects. Research applications are carefully weighed and selected by teams of scientists and healthcare professionals who volunteer for the association.

The American Heart Association has funded 13 Nobel Prize winners and several important medical breakthroughs, including techniques and standards for CPR, the first artificial heart valve, implantable pacemakers, cholesterol inhibitor, microsurgery and drug-coated stents.

The American Heart Association funds more research into cardiovascular diseases and stroke than any other organization except for the federal government.

The American Heart Association has funded more than $3.7 billion in research since 1949.

Information provided by the American Heart Association.

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Heart Disease - It’s No Joke!

Heart disease is the leading cause of death for both men and women. Yet when Mike Lacey started feeling chest pain, it was easy to ignore. Mike maintained a healthy diet and weight, never smoked and had normal blood pressure and cholesterol. His wife, a nurse practitioner, urged him to get checked anyway. It saved his life.

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