

**Fall
2019**



Mended Hearts™

of Boise Chapter 380

"It's great to be alive - and to help others!"

SAVE THE DATE

- MH Visitor & Caller Re-Accreditation, Tuesday, 10/1/19, 1:30-3:30 PM
- MH Chapter Meeting Wednesday, 10/16/19 1:30-3:00 PM

Guest Speaker: Lauren M. Boyd, BSN, RN-BC, CMSRN: Gratitude & Mindfulness

- MH Chapter Meeting Wednesday, 11/20/19 1:30-3:00 PM

Guest Speaker: Justin Baines, RN, MSN. St. Luke's Heart Failure Program Coordinator: Recognizing symptoms and how to manage

- No MH Chapter Meeting for December, Christmas Party scheduled for Friday, 12/13/19, 5:30 – 8:30 PM (See page 2 for details)

Cardiac Rehab Dates:

- ♥ Tuesday, 9/24/19
- ♥ Wednesday, 10/30/19
- ♥ Tuesday, 11/26/19
- ♥ Wednesday, 12/11/19



To New Heart Patients

We hope that your recovery is progressing well and would like to invite you and your family to visit our monthly meetings. We have speakers and programs designed to be of interest to heart patients. As heart patients we know what you are experiencing and are available to answer non-medical questions.

For more information
check out our web site:
www.MHBoise.org
(208) 706-7056

President's Message

The change in seasons brings upon us changes in our routine, eating and social activities. Now is the time to focus on getting out with people. Don't stay isolated and alone, it is important to keep our social networks on track during the cold weather. Those who are socially isolated have a two to three-fold increased risk of death from both heart disease and from all other causes when compared to those who felt most connected to others. These results were independent of other cardiac risk factors such as cholesterol level, blood pressure, genetics and so on. The greatest mortality was found in older people with few social ties. Studies have shown that people who live alone have more heart disease than those who live with someone or even something — a pet or plant. The quality of social support is more important than the number of people involved with the support. Interviews with 2,320 male survivors of heart attacks by the New England Journal of Medicine revealed that patients who were classified as being socially isolated and having a high degree of life stress had more than four times the risk of death from heart disease and from all other causes when compared with men who had low levels of both stress and isolation. We are all going to die sometime, but don't we really enjoy living? Chronic emotional stress can lead to heart disease and other illnesses. Stress comes not only from what we do but how we react to the external world. How we react is how we perceive ourselves and anything that leads to the perception of isolation causes chronic stress and can lead to heart disease or other illnesses. Therefore, get out and keep active, volunteer at a school or with an organization. Allow yourself to become involved with others. Anything that leads to the perception of



**Mended Hearts President
Ray Trapp**

giving and support allows our lives and hearts to become more joyful.

Exercise is another key element in your daily regiment during the changing seasons when it becomes difficult to keep your outdoor workout due to time constraints or inclement weather. Stay active when you have to be indoors with these five suggestions.

Exercise at home to a DVD or television program.

Log some miles by walking at your local mall.

Enroll in a dance class at a community center or YMCA. Try something new at your gym. The options are endless, kickboxing, Pilates, weight training, yoga and more.

Take advantage of indoor facilities. Swim laps in the pool. Log some miles on the treadmill or find a partner and play a game or racquetball or pickleball.

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Mended Hearts is the largest heart patient support network in the world, with 20,000 members and 300 chapters. Recognized for its role in facilitating a positive patient-care experience,

Mended Hearts partners with hospitals and cardiac rehab clinics to offer support through visiting programs, group meetings, and educational forums.

Mended Hearts of Boise Chapter was awarded the 2017 **Mended Hearts National President's Award** for the outstanding medium sized chapter out of 300 chapters nationwide, as measured in number of patients visited, membership growth, hospital recognition, and contribution to the community."



Mended Hearts

Topic: "Better Balance"

July 17, 2019 MH Chapter 380 Monthly Meeting

Dr Jim Trapp has had his chiropractic practice in Boise for the past 20 years. He also is a professor at the College of Western Idaho. He invited his audience to participate in his talk in an interactive way.

If you are having balance issues, the simplest motions like emptying the dishwasher or picking clothes up off the floor, may cause you to over-correct and throw yourself out of alignment. It's helpful to perform stability checks with certain motions, such as bending, stooping, squatting to help improve balance. Our society sees postural imbalance to the spine especially, with men sitting on the wallet in their back pocket and women sitting with legs crossed, rather than feet flat on the floor.



For feelings of dizziness there is the Epley Maneuver that has been developed to treat benign paroxysmal positional vertigo. The procedure involves movements of the head that help to reposition crystals found in the labyrinth of the inner ear.

Proprio-reception acts as the eyes of the body that help the body to understand its position in relation to the space or environment around it. This sense can be developed through standing on a wobble board to help train the nervous system to react to balance changes.

Another reason that balance may be challenged is due to postural hypotension, or a sudden drop in blood pressure, we may all have experienced this at one time or another as in getting up too quickly from a supine position. Dr Trapp listed a number of causes, including dehydration, neural inflammation, post-prandial (after-eating) hypotension when blood flow is diverted to digestive organs, age, medication, and also heart problems, such as bradycardia, heart valve issues, and

heart failure.

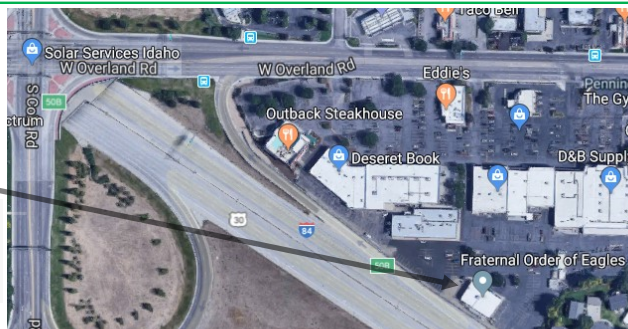
The most important aspect is to have a plan for restoring and/or maintaining good balance – check your home for safety and be aware of the changing environment around you when you are not at home.

Submitted by Becky Newberry

Note: Chris Catherman offered a suggestion that the Central District Health Department is a good resource for healthy exercises for balance protection. Their website has information on Fit and Fall Proof Classes for Seniors. More information can be found at this link: <https://www.cdhd.idaho.gov/hl-fitandfallproof.php>

Christmas Party

Our Chapter's Christmas Party will be at 5:30 to 8:30 on Friday, December 13, 2019 at the Eagles Lodge, 7025 Overland Rd, Boise, ID 83709. There will be a catered dinner and no-host bar. The cost will be \$10 per person; please sign up at one of the regular meetings or call (or text) Cindy Baxter-Guarino at (208) 860-6353. Anyone who has not paid can pay at the door. We do need an accurate account of who will attend!



Reminder: Re-Accreditation for Mended Hearts

Chapter 380 Accredited Visitors & Callers

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As a reminder, all of our Chapter 380 Accredited Visitors and Callers must be re-accredited each year. This year the training is scheduled for **October 1st at 1:30** and will take place at **Saint Alphonsus in the Coughlin Conference Room #1**. The training should take about two hours.

For review by our members, the following were taken from the MH Visitor Training Resources found online at: <https://mendedhearts.org/visitor-training-resources/>

ACCREDITED VISITOR JOB DESCRIPTION

An Accredited Visitor is a heart patient or family member of a heart patient and in good standing with Mended Hearts. Accredited Visitors must follow the visiting protocol.

VISITING PROTOCOL:

- ♥ Accredited Visitors are members who have recovered from their surgery, procedure or episode and have taken the Mended Hearts Visitor Accreditation training course and any required local hospital training.
- ♥ Accredited Visitors may also be members who do not have heart disease, but were caregivers of a cardiovascular disease patient. When visiting a patient, they should be accompanied by an Accredited Visitor who has been a heart patient.
- ♥ Visits will be made to patients and/or families of patients who have cardiovascular disease.
- ♥ All Visitors must be fully trained and accredited annually, unless the Visitor is a newly Accredited Visitor in training and accompanied by a fully qualified Visitor.
- ♥ Accredited Visitors may visit surgical or non-surgical patients.
- ♥ Visiting permission must be obtained from the hospital administration. Such permission is usually granted for all patients, and not on an individual basis.
- ♥ Accredited Visitors must wear their Mended Hearts Accredited Visitor badge at all times during patient and family visits.
- ♥ Some chapters have their Accredited Visitors wear a high visibility item such as a patch, vest or coat. This provides instant recognition as well as increased visibility for the chapter.
- ♥ Accredited Visitors must distribute only approved Mended Hearts information packets to patients.
- ♥ The **only** information an Accredited Visitor shall take from the hospital visit is the patient's name, address, telephone number and e-mail address. Even this information is only with the patient's permission.
- ♥ Accredited Visitors must fill out the patient record information sheet used for recording visits.
- ♥ Accredited Visitors may not solicit money or membership for Mended Hearts or any other organization from patients during a Mended Hearts visit in the hospital.

RULES OF CONDUCT

As an Accredited Visitor, I will follow these rules of conduct in my visits with patients, parents, families and caregivers.

I will:

- ♥ Dress appropriately, according to the custom of the area. Some Accredited Visiting Programs have vests and badges that Accredited Visitors can, and should, wear to let the hospital staff and families recognize you as a Mended Hearts or Mended *Little* Hearts Accredited Visitor.
- ♥ Visit for the benefit of the patient, family or caregiver, not for personal reasons.
- ♥ Visit when I am feeling well physically and emotionally.
- ♥ Respect the privacy, individuality and dignity of the patient and family.
- ♥ Be positive, supportive, tactful, cheerful, considerate and responsive.
- ♥ Be interested in the progress of the patient, child and family in the hospital and at home
- ♥ Be enthusiastic about hospital and medical care before, during and after treatment or surgery.
- ♥ Be a good listener.

Topic: "Nicotine: Not Just Tobacco Anymore"

August 21, 2019, MH Chapter 380 Monthly Meeting

Highlights from Gabrielle talk:

Addiction: Nicotine is an addictive substance. It is more addicting than heroin. It is the number one cause of preventable deaths. It causes a slower death than opioids. Chew has 80 milligrams of nicotine which is four times more than a pack of cigarettes. Vaping doses are higher than chew.

Nicotine interfaces (or delivery systems): Smoking; electronic nicotine delivery system (ENDS); chewing tobacco or SNUS; hookah; pipe; miscellaneous such as IQOS (I Quit Ordinary Smoking).

E-cigs are electronic cigarettes that are battery operated and people use these devices to inhale aerosol. The product being inhaled typically contains nicotine, flavoring and other chemicals. Many e-cigs have battery-powered heating devices which turns the liquid into vapor. Then the person can inhale the vapors, which is where the word "vaping" comes from. There are several types of e-cigarettes on the market but one popular brand is JUUL. JUUL is becoming more prevalent with teens because of its small size, and it looks like a USB device. Flavors are being added to e-cigarettes to attract young users.

SNUS is a moist powder smokeless product originating from a variant of dry snuff. It is placed under the upper lip for extended periods of time. Although similarly to dipping tobacco, SNUS does not typically result in the need for spitting.

Hookah is a single or multi-stemmed instrument for vaporizing and smoking cannabis, flavored tobacco or sometimes opium. Its vapor or smoke is passed through a water basin – often glass-base – before inhalation. Health risks of smoking through a hookah include exposure to toxic chemicals that are not filtered out of the water and rise of lung infections when the hookah is shared.

The **IQOS** is a cigarette-like device into which tobacco heat sticks are inserted. One of the big things about the IQOS is that it needs a charging dock that doubles as a carrying case because it must be recharged after each use.

The above four paragraphs were from Gabrielle's talk but supplemented with facts from Wikipedia and <https://thevape.guide/>

Further facts regarding the use of nicotine: The nicotine from smoking a cigarette reaches the brain in ten seconds or less and the pleasure center is activated. The effects of pleasure last for two hours before wearing off. 90% of lung cancer is attributed to smoking. There are one to two milligrams of nicotine per cigarette (depending on the brand and domestic versus international import). There are approximately twenty to forty milligrams of nicotine per pack.

With **ENDS**, the amount of nicotine varies. There is no scholarly evidence that the use of this leads to nicotine cessation (as is so falsely advertised). The use of e-cigs shows an increase in oral infections. It causes a condition called 'popcorn' lung in users and this is from the chemicals used to flavor the product. ENDS is marketed predominately to youth.

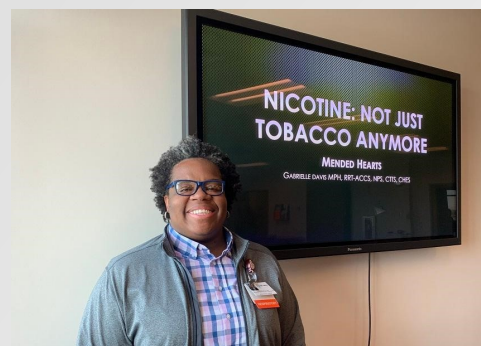
Chewing tobacco and SNUS has eighty milligrams of nicotine per can. Users show high instances of head and neck cancers and an increase in oral infections. It is popular among farmers in Idaho. Chew contains fiberglass which nicks the gums and allows for quick entry into the body.

Hookahs are not regulated so the nicotine levels will vary. They are often used without filters.

Effects of nicotine: Vasoconstriction, tachycardia, hypertension, dry mouth, vomiting, high likelihood of cancer when ingested or inhaled.

Withdrawal: Shaking, insomnia, increased appetite, irritability, decreased alertness, social anxiety.

Treatment options: Nicotine Replacement Therapy: 1. Nicotine patches at 21,14 or 7 milligrams. (Can get these for free for eight weeks per year through Project Filter. Contact is projectfilter.org or call 1-800-QuitNow.



Chapter 380 Wins 4 Awards for 2019

Presented by Mended Hearts, Rocky Mountain Region

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All the Awards were signed by Ronald Manriquez, President , on June 27, 2019



2019 Rocky Mountain Region Accredited Visitor Excellence Award

Awarded to: Becky Newberry

In grateful recognition of her outstanding service to Mended Hearts Chapter 380 in Boise, Idaho, to heart disease patients, and to the local community.

Pictured: Becky Newberry, and Ray Trapp, President

2019 Rocky Mountain Region Newsletter of the Year

Awarded to Chapter 380

In grateful recognition of the outstanding newsletter which serves the Mended Hearts Chapter 380 in Boise, Idaho, as well as local heart disease patients and their caregivers

Pictured: Bruce Parks, Editor, and Ray Trapp, President



2019 Rocky Mountain Region Mended Heart of the Year

Awarded to Dennis and Adrienne Shiedlak

In grateful recognition of your outstanding dedication and service to Mended Hearts, heart disease patients, the community, and medical personnel. You have gone above and beyond to enhance our programs, and our motto:

“It’s great to be alive – and to help others

Pictured: Ray Trapp, President, and Adrienne & Dennis Shiedlak



2019 Rocky Mountain Region Chapter Excellence Award

Awarded to Chapter 380

In grateful recognition of Chapter 380 in Boise, Idaho, for their outstanding service to heart disease patients in the hospital and the local community



Pictured (left to right) Board members: Wini Trapp, Jack Marr, Becky Newberry, Fred Bernier, Bruce Parks, Cyndi Baxter Guarino, Ray Trapp, Pat Toshcoff, Chris Catherman, Adrienne, Shiedlak, and Dennis Shiedlak

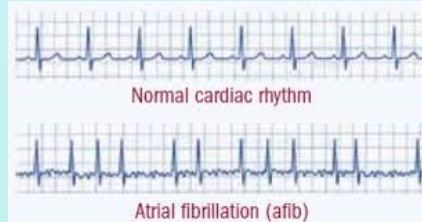
AFib Awareness Month: Preventing AFib strokes

Atrial Fibrillation, or AFib, is a leading risk factor for stroke.

According to the National Stroke Association, the irregular or rapid heartbeat is often caused when the two upper chambers of the heart beat unpredictably and sometimes rapidly; these irregular heartbeats cause blood to collect in the heart and potentially form a clot, which can travel to the brain and cause a stroke.

The bad news: about 15 percent of people who have strokes also have AFib, and folks with AFib have a five times greater chance of stroke. The really good news: up to 80 percent of strokes in people can be prevented.

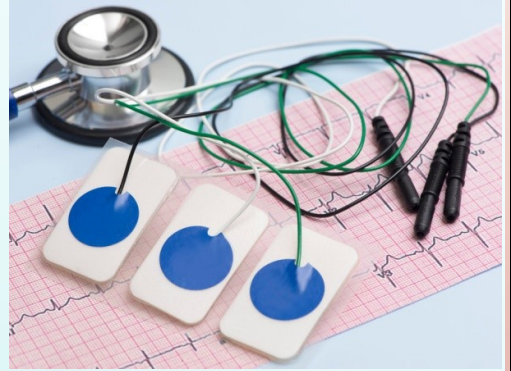
The National Stroke Association offers tips for people to manage their anxiety and tips for stroke prevention. These include:



- * The use of proper medication to manage AFib. These are used to restore the regular rhythms of the heart.
- * Treatment aimed at preventing blood clots may also include blood thinners, or anticoagulants. This can be tricky and of course involves discussion with a health care provider.

* Schedule relaxation time. Stress and fatigue increase the risk for AFib, and downtime is a good idea for anybody.

* Exercise -- if allowed by your doctor.



Quotes

Your motivation determines how much you are willing to do. Your attitude determines how well you do it. - *Lou Holtz*

When someone tells me 'no,' it doesn't mean I can't do it, it simply means I can't do it with them.—*Karen Quinones Miller*

Never give up on a dream just because of the time it will take to accomplish it. The time will pass anyway.—*Earl Nightingale*

Never allow a person to tell you no who doesn't have the power to say yes.—*Eleanor Roosevelt*

A year from now, you may wish you had started today.—*Karen Lamb*

Fred Meyer Donation Reward Program

You can help Mended Hearts Chapter 380 earn donations just by shopping with your Fred Meyer Rewards Card!

Is your Fred Meyer Rewards Card linked to Mended Hearts? The re-enrollment period for customers who did not relink their card with a nonprofit ended in June and they were dropped from the Community Rewards System. Please visit the [Fred Meyer Community Rewards](#) website to link your Rewards Card with Mended Hearts Chapter 380!

Fred Meyer is donating \$2.5 million per year to non-profits in Alaska, Idaho, Oregon and Washington based on where their customers tell them to give. Here's how the program works:

Sign up for the Community Rewards Program by linking your Fred Meyer Rewards Card to Mended Hearts Chapter 380 on the Fred Meyer Community Rewards website You can search for us by name or our non-profit number, MJ804.

Then, every time you shop and use your Rewards Card, you are helping Mended Hearts earn a donation!

You still earn your Rewards Points, Fuel Points and Rebates, just as you do today.

If you do not have a Rewards Card, they are available at the Customer Service desk of any Fred Meyer store.



Ready for anything: What goes in an emergency preparedness kit?

September is typically a mild weather month, but unfortunately it's also a time when hurricanes and other extreme weather conditions can pop up. With that in mind, it's a good time to review the items you should keep in your emergency kit.

Some of the items the Red Cross says you absolutely need include:

- ♥ A plan for your pet. Evacuate early with your pets. Have food, pet carriers, leashes, and water.
- ♥ Water, one gallon per day per person; three days worth for an evacuation.
- ♥ Non-perishable food items, same guidelines as for water. Take a can opener.
- ♥ Flashlight
- ♥ Battery-powered or hand-crank radio, preferably a NOAA weather radio
- ♥ Extra batteries
- ♥ First aid kit that includes prescription medicines
- ♥ Cell phones with chargers
- ♥ Extra cash (remember that ATMs and other machines often don't work) and credit cards
- ♥ Documents, including insurance papers, ID, deed or lease to the home, proof of address, medication list
- ♥ Emergency contact info
- ♥ Emergency blankets



Uncontrolled high blood pressure is cutting into heart disease progress

An uptick in deaths due to uncontrolled high blood pressure is slowing the progress in the fight against heart disease, according to a study published in the Journal of the American Medical Association.

Deaths from heart disease overall have decreased in the past two decades, but the rate of that decline has slowed since 2010, the study found.

In addition to rising rates of deaths related to high blood pressure, rates of heart disease deaths linked to obesity and Type 2 diabetes — once declining — have leveled off.

The findings are worrying, especially given the recent medical and surgical advances in treating heart disease.

"The fact that we are not seeing that translate into improvement in death rates is concerning," study author Dr. Sadiya Khan, a cardiologist at Northwestern Medicine in Chicago, said. Khan and her colleagues searched a public Centers for Disease Control and Prevention database for death certificates from 1999 to 2017.

Death certificates don't indicate what led to the ultimate cause of death — for example, a person's cause of death may have been a heart attack, but the heart attack could have been caused in part by high blood pressure.

Uncontrolled high blood pressure, both chronic and acute, can contribute to a person's death in a number of ways. "Hypertension that is really out of control could lead to a tear in a blood vessel," said Dr. Deepak Bhatt, executive director of interventional cardiovascular programs at Brigham and Women's Hospital in Boston.

"It could also lead to swelling in the brain, heart attack, stroke, and contribute to heart failure and kidney failure," Bhatt, who was not involved in the current study, said.

Other factors that could lead to heart disease deaths have also become more widespread in the past two decades, including obesity and Type 2 diabetes, Khan said.

The conditions are strongly linked and both are major risk factors for heart disease.



One of the first things that comes to mind when meeting John Dzwilewski is his enthusiasm, open mindedness, and honesty. Having come through so many cardiac episodes and procedures over the past year, including his current use of an LVAD (Left Ventricular Assist Device) system, John is still upbeat, cheerful, and positive about life. He heard about Mended Hearts about last year while at the Cardiology Center of University of Utah Medical Center in Salt Lake City as well as while attending a Saint Alphonsus Cardiopulmonary Rehabilitation session in Boise. We feel very fortunate that he has recently joined our local chapter where he has trained to become a certified visitor and caller.

John was born in Massachusetts and raised in Connecticut. In his younger life he spent ten years as an altar boy and continues a close relationship with his church and his faith in God. He went to the U.S. Coast Guard Academy followed by a couple years' service as an officer in Hawaii where he learned scuba diving and other water sports. Following his service in the Coast Guard, he worked as a safety engineer at Micron. He eventually met a girl from Idaho which precipitated his move to Boise in 1995. He retired last year due to his health conditions.

Prior to his heart condition, his hobbies included white water kayaking on the Payette River and long-distance walking such as trekking from Boise to Horseshoe Bend. He has a 30-year old truck that he loves driving around. In addition, his family and church are a major part of his life.



Here is the recipe for the **Chile Relleno Casserole** we all enjoyed at the picnic last June

8-10 long green mild chilies, roasted, peeled and seeded **OR** 2 4-oz cans whole green chilis
10 oz jack cheese, grated
5 eggs well beaten
2 Tbsp butter
½ tsp salt
½ tsp pepper
½ tsp cumin



Layer peppers and cheese alternately in a deep buttered ½ qt casserole dish.
Mix eggs, butter, salt, pepper, and cumin powder.
Pour this mixture over the peppers and cheese.
Bake 35-40 minutes at 350.
For potlucks, I double the recipe and bake in a 9 1/2 x 13" pan. I don't quite double the cheese—maybe 1 1/2 times.

Enjoy!

Contributed by Bill Hielscher

Cheddar and Turkey Bacon Deviled Eggs

Ingredients

6 large hard boiled **eggs**
2 slices nitrate-free **turkey bacon**
1/4 cup grated or shredded low-fat **Cheddar cheese**
3 tablespoons light **mayonnaise**
1 teaspoon **white wine vinegar**
1/2 teaspoon chopped **chives**
1/8 teaspoon **salt**
1/8 teaspoon **black pepper**

Directions

In a medium nonstick skillet, cook the bacon over medium-high heat until crisp, turning often. Transfer to a paper towel to drain. When cooled, finely crumble the bacon. Set aside.

Carefully cut the eggs in half lengthwise. Place the egg halves on a work surface.

Transfer the yolks to a medium bowl. Add the remaining ingredients except the bacon. Stir until combined. The mixture should be smooth.

Spoon the yolk mixture back into the egg white halves.

Sprinkle the crumbled bacon on top of the filling.

Recipe modified from: <https://recipes.heart.org/en/recipes>



The 9 Foods Your Heart Loves Most

1. Lean Protein

Choosing leaner cuts of meat can help you manage your cholesterol and weight, which promotes heart health. Health experts and dietitians often recommend skinless chicken, fish, and lean cuts of beef (those without the white marbling of fat). Research suggests that lean pork can also be on the list. Aim for three to six ounces of lean protein daily. The actual portion should be approximately the size of a deck of playing cards.



2. Fruits and Vegetables

For the best heart health, the American Heart Association (AHA) recommends seven to nine total daily servings of fruits and vegetables. Keep in mind that your number of servings may vary depending on your calorie needs. And serving sizes vary with your fruit and vegetable choices. Eating a variety of fruits and vegetables in a variety of colors ensures that you'll get a range of nutrients plus plenty of fiber.

3. Whole Grains

Like fruits and vegetables, whole grains are rich in nutrients as well as dietary fiber. Fiber from whole grains is linked to lower heart disease risk factors—your risk goes down as your fiber consumption goes up. Plan on six servings a day for a 1,600-calorie diet or up to eight servings for a 2,000-calorie diet. A serving can be a slice of whole-grain bread, a ½ cup of brown rice, or one ounce of dry cereal.

4. Healthy Fats

Your body needs some fat to work well. But you want “healthy” fats, such as those found in plant-based oils. This includes monounsaturated canola, olive, peanut and sunflower oils, and polyunsaturated soybean, corn and safflower oils. Remember that you only need a small amount of fat each day, about two to three servings. A serving is only one teaspoon of oil.

5. Fish

People who live in regions where a diet rich in fatty fish is common, such as Scandinavia, seem to have a lower risk of heart disease. You, too, can gain this benefit, which comes from omega-3 fatty acids. Start by eating fish, such as tuna, salmon, sardines and mackerel on a regular basis—two to three times a week.

6. Nuts

Research shows that people who snack on nuts—as little as a quarter-ounce a day—have lower cholesterol levels. However, it's wise to portion out your nut snacks so you don't overdo it, because their calories can add up quickly. Aim for about a ¼ cup to benefit from the fiber and healthy fat without consuming too many calories.

7. Chocolate

Regularly eating small amounts of dark chocolate may help prevent heart disease and other chronic conditions, such as diabetes. Cocoa, the main ingredient in dark chocolate, is the key to its heart-healthy effects. Although researchers are still learning about chocolate's health effects, you can enjoy a nibble here and there. Just remember that too much chocolate adds calories and fat, which can lead to weight gain.



8. Tea

Like chocolate, other specific foods and beverages may also be beneficial because they contain flavonoids. Black tea and green tea, whether hot or cold, are rich with flavonoids, as are darkly colored berries, such as blueberries. Flavonoid-rich foods and beverages may help reduce your heart disease risk. Just be judicious about sweeteners because sugar adds unwanted calories.

9. Spices

National recommendations are to consume 1,500 grams or less of salt a day to guard against high blood pressure. So, rather than salting foods, experiment with a variety of spices to add flavor. A recent study found that capsaicinoids, which give chili peppers their heat, might be especially good for heart health—so pass the cayenne!

Family History and Other Characteristics That Increase Risk for Heart Disease

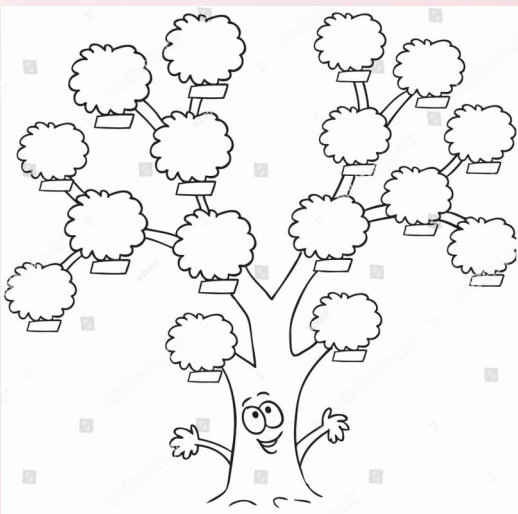
Heart disease can run in your family.

Family members share genes, behaviors, lifestyles, and environments that can influence their health and their risk for disease. Heart disease can run in a family, and your risk for heart disease can increase based on your age, and your race, or ethnicity.

Genetics and Family History

When members of a family pass traits from one generation to another through genes, that process is called heredity.

Genetic factors likely play some role in high blood pressure, heart disease, and other related conditions. However, it is also likely that people with a family history of heart disease share common environments and other potential factors that increase their risk.



The risk for heart disease can increase even more when heredity combines with unhealthy lifestyle choices, such as smoking cigarettes and eating an unhealthy diet.

Find out more about genetics and disease on [CDC's Office of Public Health Genomics web site](#).

Family health history is a record of the diseases and health conditions present in your family. Family health history is a useful tool for understanding health risks and preventing disease. To help people collect and organize their family history information, CDC's Office of Public Health Genomics collaborated with the US Surgeon General and other federal agencies to develop a Web-based tool called [My Family Health Portrait](#).

Other Characteristics

Both men and women can have heart disease. Some other characteristics that you cannot control, like your age, sex, and race or ethnicity, can affect your risk for heart disease.

- **Age.** Your risk for heart disease increases as you get older.
- **Sex.** Heart disease was the number one killer of both men and women in 2013.¹

Race or ethnicity. In 2013 heart disease was the leading cause of death in the United States for non-Hispanic whites, non-Hispanic blacks, and American Indians. For Hispanics, and Asian Americans and Pacific Islanders, heart disease is second only to cancer as a cause of death.¹

Reference

Kochanek KD, Xu JQ, Murphy SL, Miniño AM, Kung HC. [Deaths: final data for 2009 pdf icon\[PDF-500K\]](#). Nat Vital Stat Rep. 2011;60(3).

Continued from Page 1 (President's Message)

Try to build strength by using weight machines or at home by using hand weights, resistance bands or even canned items from your pantry.

The key to it all is that every effort to move more and stay socially involved gets you one step closer to a happier, healthier lifestyle.

Ray Trapp, President

Continued from Page 4 (Meet our Guest Speaker- Gabrielle Davis)

This can be continued past the eight weeks with a prescription from your MD. 2. Nicotine gum at 2 and 4 milligrams. 3. Nicotine lozenges at 2 and 4 milligrams.

Another treatment option includes medication from an MD – Chantix or Zyban. There is also brief cessation intervention available which could include the following steps: 1) Listening to the person seeking help with this addiction; 2) 2As & 1R (Ask, Advise and Refer); 3) Refer to Project Filter, 4) Self disclosure (briefly and with sensitivity share any personal experience you have had with smoking or a smoker which might be of help to the person, 5) Validation, and 6) Encourage them to chat with their physician about cessation. AVOID: stigmatizing, insistence on what worked for you or someone you know is the only way to overcome the addiction, fear-based conversation, guilt.

Legislation: Tobacco 21 is a legislative effort to bring control of nicotine use. Unfortunately, there is not enough research yet to support legislative efforts. Legislative efforts are underway to change the age of nicotine use from eighteen to twenty-one years old. The hope is that this age difference will give more time to educate regarding smoking and allow more time for a person to make the decision whether or not to begin this addiction.

This was a highly educational and very well presented talk, thanks you, Gabrielle!

Continued from Page 7 (Uncontrolled Blood Pressure)

More than 93 million U.S. adults are considered obese, according to the CDC, and almost as many — 84 million — have prediabetes. An additional 30 million Americans have Type 2 diabetes.

We've noticed the leading edge of an emerging re-epidemic.

"Although we have celebrated significant declines in heart disease deaths and stroke over the last several decades, what we've noticed is the leading edge of an emerging re-epidemic," Dr. Laurence Sperling, director of the Emory Heart Disease Prevention Center in Atlanta, said.

Indeed, heart disease remains the nation's No. 1 killer of both men and women — claiming more than 800,000 American lives each year, according to the American Heart Association.

Sperling, who was not involved with this latest study, said the research should serve as a wake-up call.

*Article found <https://www.nbcnews.com/health/heart-health/uncontrolled-high-blood-pressure-cutting-heart-disease-progress-n1046316>



HeartGuides Patient and Family Education The Journey to a Healthy Heart Starts Here

The Mended Hearts *HeartGuides* is an innovative, informative resource for heart patients and their families, friends, and caregivers. The Mended Hearts *HeartGuides* provides comprehensive detail on all aspects of heart disease in an attractive, modern format, and serves as a trusted companion for readers along the journey to heart health. The digital *HeartGuides* can be viewed on a wide range of devices and features integrated search and handy topic dividers to allow quick reference to precise topics of interest.

The Mended Hearts *HeartGuide* is available to view online by following this link. <http://myheartguide.org/>

MENDED HEARTS CHAPTER 380 INFORMATION

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Mended Hearts Web Pages: Local – www.MHBoise.org National
– www.mendedhearts.org

Mended Little Hearts Web Page: www.mendedlittlehearts.org

We welcome new visitors who want to find out more about becoming a Mended Hearts or Mended Little Hearts member. Our volunteers make a difference in providing cardiac patients & caregivers, peer to peer support, education, and most of all hope as we have all experienced a cardiac event.

Have you or someone in your family had a recent heart surgery or another heart event during the last few months? If so, Mended Hearts, a support group for heart patients and their families is available to provide support and encouragement. Mended Hearts members are patients like you who have recovered from a heart event and have chosen to give back. Most of the members in our chapter have had a heart event of some type or are caregivers. If you just want to talk, give us a call on our voice mail, 208-706-7056 and we will get together. If you have a question about Mended Hearts or would like to speak to a member, please leave your name, phone number and a brief message. A member from this chapter will call you as soon as possible.

MENDED HEARTS MONTHLY MEETING

When: Chapter meetings occur on the THIRD WEDNESDAY of each month at 1:30-3:00 PM

Where: St. Luke's Cardiac Rehab Conference room (Meadow Lake Building) 3525 E Louise Dr., Suite 500, Meridian

VISITOR and CALLER'S CORNER

Jun-Aug 2019 Year to Date

Hospital Visits:	401	987
Patients	332	755
Follow-up Calls:	223	545

Welcome our newest Mended Hearts Members:

Robert (Bob) Rudkin,
John Dzwilewski and
Samuel Sharr

We are now serving four (4) hospitals in the Treasure Valley. St. Luke's in Boise, Meridian and Nampa, and Saint Al's in Boise (Saint Al's in Nampa is on hold as their census is low). If you are interested in becoming an accredited visitor or caller, please call or email Jack Marr, the training coordinator of our visiting program, at 229-269-8161 jack_marr@hotmail.com.

Fred Bernier	Becky Newberry
Chris Catherman	Tom & Evalyn Nichols
Kelly Clifton	Bruce Parks
Bob Courval	Jim & Marilyn Pettingill
Odee Gordon	Dennis & Adrienne Shiedlak
Bill Hielscher	Pat Toshcoff
Jack Marr	Ray & Wini Trapp
Wilson "Bill" Miller	

Accredited Visitors:

Cynthia Guarino	Susan Multanen
Ray Heady	Chris Toshcoff
Jewel Magney	Mary Ellen Voshell
Wilson "Bill" Miller	Marcia Warne

Newsletter by email Renewal Policy

Mended Hearts Chapter 380's policy for keeping subscribers on the mailing list will now be two (2) years. If subscribers wish to continue receiving quarterly newsletters for an additional 2 years, they will need to confirm this with an email to mendedheartsofboise@gmail.com. This is a free subscription and subscribers may *unsubscribe* at any time. NO response from a subscriber after the 2-year limit has passed, signifies cancellation.