President’s Message

Why Does Cold Weather Increase Your Risk for Heart Attack?

A study from the Swedish Nationwide Coronary Care Unit was able to link an increased incidence of heart attacks to lower air temperature, lower atmospheric pressure, higher wind velocity and shorter duration of sunshine. Although they found all were associated with a statistically meaningful increase risk of a heart attack, the data supported the most pronounced effect was from lower temperatures. Cold also increases arterial resistance (ability of blood to flow) and can trigger cardio complications, such as stroke and heart failure. Cold temperatures appear to increase the activity of the sympathetic nervous system, which then initiates cold-induced hypertension and suppresses the formation of nitric oxide. This combination of events increases arterial resistance and blood pressure.

An increase in heart attacks during the winter months is also related to an increased load on the heart. Therefore, wrap up well before going outside. The morning hours seem create a greater risk and those who combine cold temperature with physical exercise push this risk to a higher level. Snow shoveling is particularly strenuous on the cardio system as it uses upper body work, which is more challenging than leg work. Also, many hold their breath while lifting, placing an additional strain on the heart.

Cold weather also increases your risk of frostbite, falling and dehydration. If you must go out do the following.

DRESS IN LAYERS: Avoid heavy cotton material as it absorbs sweat and traps wetness, increasing your risk of hypothermia. Add a second layer of wool or fleece for insulation and an outer layer of lightweight, water-repellent, wind-resistant material.

COVER YOUR HEAD AND EXTREMITIES: You lose 50 percent of your body heat from an uncovered head. Cover your face when the temperature is below freezing which may help warm the air before entering your lungs.

WEAR PROPER FOOTWEAR: Sturdy shoes with aggressive grips to help prevent slips and falls.

STAY HYDRATED: Drink before and after being outside, even if you don’t feel thirsty. Do not drink coffee. The study warns adding caffeine to an already at-risk situation may only increase your potential for experiencing a heart attack or stroke.

STAY DRY: Dressing too warmly when shoveling snow or exercising is cold weather is a common mistake. Once sweat begins to accumulate it may freeze and contribute to lowering your body temperature.

Take a break from outdoor activities when the temperature dips below zero degrees Fahrenheit. If you must go out, tell someone what route your taking when walking and when to expect your return, just in case something goes wrong. Stay safe and warm in cold weather.

-Ray Trapp
Ruth McGough, a beloved member of Mended Hearts of Boise, passed away on November 1, 2018. At 91 years young, she was an inspiration to us all. Ruth had been a member of Mended Hearts in California before moving to Boise. Because of her experience in California, she was a huge asset to our chapter as we started our visiting program about 6 years ago. When Ruth could no longer make visits because of physical restrictions, she became a dedicated caller and made hundreds of follow-up calls to heart patients. Earlier this spring she was awarded the 2018 Regional Accredited Visitor Excellence Award.

Ruth’s Approach to Life (excerpts from her notes in the Story of Lifetime book).

What gives you the greatest joy? To serve God – to help another human being – to feel the love of family – of a child, of an animal

How do you deal with things you can’t change/handle stress? I realize that none of us live a “perfect” life – one without ups & downs, but it is those hard times in life that give us the most opportunity for growth. I do a lot of praying and learn to “let go” of whatever is stressful. Each day is a new beginning and we can accomplish whatever we want to despite our past.

What philosophy do you live? Each day is a gift from God, and we can choose the way in which we decide to live it.

How do you hope to be remembered? As someone who loved others and to be forgiven for the mistakes I’ve made along the way.

Mended Hearts members, dressed in their red apparel, honored Ruth at a Celebration of Life service held on Saturday, Nov 10th. Ruth, you will be greatly missed and, in our hearts, forever.

Thank you for loving and sharing,
For giving and for caring.
God bless you and keep you
Until we meet again
Meet our Guest Speaker- Dee Hartman

Patient and Spokesperson with VAD
(Ventricular Assistance Device or Heart Pump)

**Topic: “Heart Pump: Bridge to Heart Transplant, or Destination”**

Dee is a gracious and courageous lady who had experienced years of cardiac problems. She has survived sudden cardiac death, has had a defibrillator/pacemaker placed, an ablation which did not work. After many in-and-outs to and from the emergency room and multiple hospitalizations, Dee was air flighted to the University of Utah where she learned from a nurse about VAD.

To qualify for placement of a VAD, a team of specialists had to meet and discuss her medical background. Dee was a perfect candidate for the procedure. She underwent open heart surgery to get the pump placed in her heart. She mentioned that there were three types of pumps available: 1.) HeartWare, 2.) HeartMate and 3.) Jarvik Pump. Dee has the HeartMate Number Two. These devices are artificial hearts. They are used for a weakened heart or heart failure, such as cardiomyopathy, congestive heart failure, cardiac arrhythmias. Pump placement can be in the right or the left ventricle but placement in the left ventricle is most common. Currently there are 20 patients in the Treasure Valley with heart pumps.

Following surgery, Dee was placed in CCU, then off to Rehabilitation Unit and finally a Care Facility. She had to stay for three months in Utah to be close to the hospital in case of an emergency and for frequent follow up appointments. The surgery was in April and Dee finally came home in June.

There are frequent trips for check-ups in Utah, a phone ‘life-line’ to address immediate concerns or questions and an annual check-up which in heart catheterization.

Dee is on Coumadin. She wears a five-pound shoulder bag holding the batteries. She has a tube into the abdominal wall which requires daily inspection, cleaning and dressing change to prevent infections. In addition, there is a six-pound bag which always remains with her. This holds the oxygen tank and tubing, extra batteries and an extra controller. She hooks up to electricity at night to allow the batteries to recharge. Every bag has a tag with an emergency number. The equipment is constantly transmitting daily data-equipment status, blood pressure, weight, etc.

This talk was a ‘WOW’ moment for all of us. How far the medical world has come in treating cardiac conditions and what a relief for those of us who are cardiac patients (and loved ones of cardiac patients).

**Additional information on the LVAD…** Like the heart, the LVAD is a pump. One end hooks up to the left ventricle -- that's the chamber of the heart that pumps blood out of the lungs and into the body. The other end hooks up to the aorta, the body's main artery. A tube passes from the device through the skin. The outside of the tube is covered with a special material to aid in healing and allow the skin to regrow.

The pump and its connections are implanted during open-heart surgery. A computer controller, a power pack, and a reserve power pack remain outside the body. Some models let a person wear these external units on a belt or harness outside. 

-Submitted by Pat Toshcoff
Kelly Clifton became active in our Mended Hearts chapter a few months ago, but he has a lifelong history with cardiac events. He was born with a Ventricular Septal Defect (VSD) which was repaired in open-heart surgery when he was just four months old. He had further repair with another open-heart surgery when he was four years old.

Numerous heart surgeries have occurred since that time, including the insertion of a pacemaker/defibrillator due to a third-degree heart block (disorganized heartbeats). He has also dealt with stage 2 congestive heart failure and an ejection fraction of 32. Normal ejection fractions, referring to the amount of blood pumped out of the ventricles to the rest of the body, range from 55 to 70 and are measured by an EKG. Patients with stage 2 congestive heart failure, like Kelly, have symptoms with physical exertion and often run out of breath when walking quickly or climbing stairs. Stage 3 congestive heart failure patients run out of breath with minimal activity and may be candidates for heart transplants.

Besides this challenging cardiac history, Kelly also deals with chronic COPD, due to a lifetime of parental second-hand smoke. Yet his attitude is amazingly positive and inspiring. He says he is most thankful for his health, because after he was born, his parents were told that he wouldn’t survive, “so every day is good!”

Kelly learned about Mended Hearts ten months ago when he was in Cardiac Rehab. He began to attend meetings four or five months ago, and he has assisted our Vice President, Dennis Shiedlak, in doing educational presentations at Cardiac Rehab for the past three months. Kelly is in the process of becoming an Accredited Mended Hearts Visitor for both the St. Luke’s and Saint Al’s.

Kelly moved to Boise from southern California about a year and a half ago, when his wife retired. Their grandsons live here, and Kelly did research on medical professionals and found that he could receive excellent care here. He has been medically disabled for fourteen years, but he has worked as a youth pastor and he is an ordained Baptist minister. He managed a plastics company for 13 to 14 years and was a professional bowler for two years.

Kelly describes himself as “punctual, reliable and faithful.” One might also add “positive and energetic.” He is happy when he can “make kids smile,” and an interesting hobby is that he uses a loom to weave awareness bracelets for such causes as children’s cancer, breast cancer and heart health.

Most people don’t know that Kelly has bowled 17 perfect 300 games, and that he used to sing at retirement homes and call bingo numbers. He is most proud of his 15-year-old son, Steven, who is a sophomore at Mountain View High School where he plays baseball and sings in a Capella choir.

Kelly is motivated by opportunities to inspire other people, and he believes that every day is a blessing. His philosophy of life is “to make today better than yesterday.”

His message to our members of Mended Hearts Chapter 380 is “I am grateful for the opportunity to be a member, and I look forward too many years of friendship.”

-Submitted by: Mary Ellen Voshell
Importance of Self-Care When Dealing with Health Challenges, Yours and Theirs

Sidrah introduced herself as having grown up in Boise, she moved to New York as a young adult and graduated from NYC. She returned to Boise about a year ago and opened a practice as a psychotherapist. She plans to return to New York in the future because a new opportunity has come up.

When asked to give a definition or examples of self-care, some people will reply with a bubble bath, a massage, a little drink with an umbrella, as descriptions. Sidrah stated that self-care goes deeper than these superficial treats. Self-care is about knowing yourself, after all, the greatest relationship you have should be with yourself. In our everyday lives we encounter stress which is the reason that self-care becomes necessary. Stress can take either a positive or negative form, and be either manageable or overwhelming.

The portion of the brain called the amygdala is involved with experiencing emotions. It acts like a smoke detector for detecting stress in the body. When it reacts, it sends signals to the hypothalamus, which regulates autonomic body functions, such as breathing, the heartbeat and digestive processes. When our body experiences stress the autonomic nervous system goes on alert. You may have heard of the fight or flight response. If the body is in a constant state of stress over time, then burnout can occur. It will feel like a state of utter exhaustion. Sidrah shared her own story of exhaustion while an intern with her course work and how she had ignored her need for self-care then.

So once one is aware of the need for self-care, what are some effective ways to practice it and to incorporate it into our daily routine? We all want to aspire to be at our best for ourselves and for others. Think about what makes you feel good—whether physically, emotionally or spiritually. What makes you feel grounded?

According to Sidrah, there are four pillars of self-care. The first pillar is REST in the form of restorative sleep, disconnect from technology, make your bedroom inviting and relaxing for both body and mind. DIET is the second pillar, know how to nourish yourself and enjoy the act of eating mindfully. The third pillar of self-care is MOVEMENT in whatever form makes you comfortable and safe. Choose enjoyable activities, walking, stretching, gentle activities. CONNECTION is the fourth pillar, through friends, family, pets, organizations (such as Mended Hearts!), nature, or faith-based communities.

*Take time for self-care daily so you can show up as the ‘best you’ for others.*
The innovative collaboration, known as The Hill, involves the YMCA, St. Luke’s Health System, the Meridian Library District, the City of Meridian and the West Ada School District.

St. Luke’s Department of Lifestyle Medicine utilize 8,000 square feet within the Y. The space includes classrooms, a teaching kitchen, consultation rooms and a transitional gym to serve patients in a medically supervised setting.

Factors such as depression, food choices and activity levels have been linked to conditions that include cancer, dementia, heart disease and diabetes. The Department of Lifestyle Medicine introduces people to tools that can help them take control of their health.

“Medication is a bandage that is treating the symptoms, but you can manage these conditions,” said Jeff Wagner, Department of Lifestyle Medicine clinical supervisor. It is all about replacing unhealthy behaviors with healthy ones.

Doctors can mop up the mess of chronic illness, but what would happen if you turn off the faucet? Get in front of the illness with new lifestyle choices?

The new location at The Hill is the first time St. Luke’s is offering lifestyle medicine in a stand-alone space. It is open to a broader scope of patients than just heart patients. Lifestyle medicine services continue to be offered at St. Luke’s Cardiac Rehab in Meridian, where similar programs have been in place for several years. Although the Hill is appropriate for Phase 3 heart patients, all Phase 2 Cardiac Rehab will still take place at the Meridian location.

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**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.

For more information, please visit the Fred Meyer Community Rewards
Guest Speaker: Dr. Matthew Nelson-Invasive Cardiologist, SARMC

Nine Things Your Doctor Wants to Tell You but Doesn’t Have Time

Mended Hearts welcomed Dr. Nelson’s second presentation to the group, delivered with his characteristic wisdom and humor. It was alternatively titled “Nine Things You Can Do to Prevent a Heart Attack,” with useful information, new insights and reinforcement of prior knowledge.

Dr. Nelson mentioned Tim Russert, a 58-year-old television journalist who died of a sudden blood clot in his left anterior descending artery, often called the “Widowmaker.” There was plaque in the artery that ruptured and caused the blood clot. Rapid placement of a stent could have restored blood flow in this situation. “If you feel something is wrong, get it checked out,” Dr. Nelson warned.

Atherosclerosis or hardening of the arteries is an additional problem. Heart disease is the #1 killer in the U.S., and prevention is key. Attempting to treat these issues with vitamins and supplements (i.e. fish oil) simply does not work, and drains money from your budget, a “walletectomy,” according to Dr. Nelson. There are nine things we can do to eliminate 98% of heart attacks.

1. **Cholesterol** is the most powerful cause of heart disease. The average U.S. measure of LDL is 130. However, people in some areas of the world have an LDL of 50. Our goal for LDL should be to reduce it to 70 or lower.

One way to address cholesterol is to take a statin drug. This is especially important if you have already had a heart attack, are diabetic, have a genetic history of heart disease or are at high risk for a heart attack. Dietary adjustments, such as eating an avocado a day, consuming oatmeal and eating more fibrous beans can also reduce your LDL significantly.

2. **Smoking** contributes to heart disease. This includes second-hand smoke, marijuana and chewing tobacco. One cigar is equivalent to 10 cigarettes. If you quit smoking, after three years your risk for heart disease is the same as that of a non-smoker.

3. **Blood Pressure** can be lowered by reducing salt, losing weight, eating more fruits and vegetables, reducing alcohol consumption and lowering stress. Try meditation. Aerobic exercise of 90 minutes total per week is enough to positively affect blood pressure. There is no additional benefit to blood pressure from exercising more than 130 minutes per week.

4. **Diabetes** has become the epidemic of the 21st century. One out of every six or seven people or 15% of adults will develop diabetes. It is important to make lifestyle changes, including regular exercise and a healthy diet. Your glucose level should be less than 100, and your A1c should measure less than 7.0.

5. **Belly Fat** contributes to heart disease. Men’s waists should measure less than 37” and females should measure less than 34”. Obesity is increasing in our country. Serving sizes are huge, and it’s important that we scale back. We should also make better food choices and change how we think about food. Is one diet better than another? Both Jenny Craig and Weight Watchers have been studied and have been found to be effective. Be careful with fruit juices! OJ has 36 grams of sugar, nearly as much as a Coke, which has 39 grams. “Lose It!” is a smart phone app that is recommended.

6. **Diet** is another factor. The Lyon (France) Heart Study showed that participants on the Mediterranean Diet had 14 heart attacks, while a similar group on a Western diet had 44 heart attacks. The lesson to be learned is that we should eat plants, seafood, fruits and vegetables. We should avoid processed foods. Eat brown rice!

(Continued on Page 9)
Vegetarian Sweet Potato Chili

*Although this recipe was included in our November 2015 newsletter, it is one of our all-time favorites so decided it was worth sharing again.*

<table>
<thead>
<tr>
<th>Ingredient</th>
<th>Quantity</th>
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<tbody>
<tr>
<td>Olive oil (be generous with this oil)</td>
<td></td>
</tr>
<tr>
<td>2-3 celery hearts and leaves</td>
<td></td>
</tr>
<tr>
<td>1 medium onion</td>
<td></td>
</tr>
<tr>
<td>1-2 red or green peppers</td>
<td></td>
</tr>
<tr>
<td>6 garlic cloves, coarsely crushed</td>
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</tr>
<tr>
<td>1 Tbsp. turmeric plus dash of black pepper</td>
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</tr>
<tr>
<td>2 tsp oregano</td>
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<tr>
<td>2-4 Tbsp. chili powder (depending on taste)</td>
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</tbody>
</table>

Sauté celery, sweet potatoes, onions and peppers in generous amount of olive oil (about ¼ cup) until just browned. Add crushed garlic and turmeric and other spices and the secret ingredient, sauté until aromatic. Add the rest of the ingredients and bring to a boil. Simmer on low for at least 1 hour to allow flavors to intensify. Serve warm.

This makes a lot of chili, probably enough to serve 8 people. You can cut the amounts about in half to make less for a family of four. You can also add all ingredients into a Crockpot and cook on low for 8 hours as an alternate way to prepare.

-From Betty Trounson, Dietician for St Luke’s Cardiac Rehab

Know Diabetes by Heart

The American Diabetes Association and the American Heart Association have launched a campaign called *Know Diabetes by Heart* in an effort to raise awareness of the link between diabetes and cardiovascular disease, as well as empower people to better manage their risk of cardiovascular disease, heart attack and stroke.

In addition to hosting free Q&A sessions with expert health care professionals, they have created additional resources to help patients learn more. If you are interested in taking a free quiz to help you better understand your risk, go to [https://knowdiabetesbyheart.org/](https://knowdiabetesbyheart.org/).

If you would like to attend one of the Q&A sessions, you can register at KnowDiabetesbyHeart.org or call 1-855-565-0595. The following events will be held at Noon MT:

Dec 18, 2018- Stress, Diabetes and Heart Health
Jan 15, 2019- Physical Activity – Getting Started and Staying on Track
Feb 12, 2019- Nutrition Basics for Diabetes & Heart Health
March 19, 2019- Medication Management for Diabetes & Heart Disease

--CardioSmart
15 Active Minutes a Day for Longer Life

Doctors recommend at least 150 minutes of physical activity each week to promote good health. Regular physical activity has been shown to have numerous health benefits, including reduced risk for heart disease and heart attack. So, whether you’re cleaning your house or going for a run, engaging in at least 150 minutes of any type of physical activity has been proven to be beneficial to your health.

But what about those who exercise less than the recommended 150 minutes each week? Do they achieve any health benefits, or is it all for nothing?

A study published in medical journal The Lancer followed over 416,000 individuals for an average of 8 years to see if engaging in some physical activity (92 minutes/week or 15 minutes/day) was associated with any health benefits. They found that exercising for just 15 minutes each day helps reduce risk of death by 14% and increases life expectancy by 3 years. And for every additional 15 minutes of daily exercise, risk for death decreased by 4%.

Based on these findings, those people exercising less than the recommended 150 minutes each week still benefit from physical activity. Although risk for death, among other health conditions, decreases with increased physical activity, this study helps reinforce the saying that “some is better than none.” Whether you fit 15, 30, or 45 minutes of activity into your daily life, every bit counts and can help improve your cardiovascular and overall health. -CardioSmart

(Nine things...Continued from Page 7)

What about red meat, such as beef, hamburger, lamb, pork and wild game? Eat it less frequently and avoid sausage, hot dogs, salami, lunch meat and processed or cured meats high in sodium and fat. If you eat right 80% of the time, you’re doing fine.

7. **Stress** is a powerful factor in heart disease. Major causes are money problems, losing a job, depression and divorce. In these situations, we feel out-of-control. We can counteract stress by surrounding ourselves with friends and family, attending worship services and working on restoring sound finances.

8. **Exercise** in a variety of ways is helpful in preventing heart disease. If you choose to do vigorous activity, 40 minutes a day is enough. Moderate activity of even 15 minutes a day is helpful. Lifting weights is great, and using a pedometer encourages you to walk further. Your goal should be to exercise three to four days a week for 30 to 40 minutes.

9. **Alcohol** – does it help reduce heart disease (i.e. red wine)? Maybe, but it is one of three major factors for global disease. Keep your alcohol consumption at a low to moderate level.

Add your name to Dr. Nelson’s website, [LUBDUBDOC.COM](http://LUBDUBDOC.COM), and you’ll receive his latest articles full of heart-healthy tips!

-By Mary Ellen Voshell

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**Introducing Survivors Have Heart**

When someone suffers a heart attack, the initial focus is often on healing physically. Yet, the emotional journey can be just as impactful and sometimes even more difficult than expected. Heart attack survivors and feel vulnerable or afraid. But there is hope and help.

That’s why AstraZeneca has created Survivors Have Heart – a movement to celebrate survivorship and a destination that provides support and community for heart attack survivors and their loved ones.

We encourage you to visit [www.SurvivorsHaveHeart.com](http://www.SurvivorsHaveHeart.com) where you will find heartwarming personal stories, videos and valuable resources, and where you can sign up to receive a helpful guide with tips for survivors. -CardioSmart
What is a Heart Arrhythmia?

A heart arrhythmia is an irregular heartbeat or abnormal heart rhythm.

There are many types of arrhythmias. They can occur in the heart's upper chambers (atria) or lower chambers (ventricles). Arrhythmias may occur at any age. Some arrhythmias are so brief (a temporary pause or premature beat) that the overall heart rhythm is not significantly affected. But if arrhythmias last longer, they may cause the heart rate to be too slow, too fast, or the heart rhythm can be erratic – so the heart pumps less effectively and can lead to stroke, sudden cardiac arrest, and death.

Common types of arrhythmias:
- Atrial Fibrillation: upper heart chambers contract irregularly
- Bradycardia: slow heart rate
- Conduction Disorder: electrical impulses slow down or block the heart beat
- Premature Contraction: early heart beat
- Tachycardia: very fast heart rate
- Ventricular Fibrillation: disorganization contraction of the lower chambers of the heart

Common arrhythmia signs & symptoms include:
- Premature beats, palpitations or skipping beats
- Dizziness
- Fatigue
- Light-headedness
- Fainting

What is a Pulse? The number of times your heart beats per minute.

The normal pulse rate of an adult ranges from 60 to 100 beats per minute, according to Medical News Today. This rate temporarily increases or decreases depending on a variety of factors, including physical activity, body temperature and emotional state.

Medical News Today explains that not only does the pulse rate change in response to many different internal and external factors, but it also varies significantly according to age and physical fitness. For example, the normal heart rate for newborns is between 70 and 190 beats, while that of athletes who have trained extensively can go as low as 40 beats per minute.

What is the difference between Atrial Fibrillation and A Flutter?

Both are types of arrhythmias that are caused by issues with the electrical signals that make your heart chamber contract faster than normal. The biggest difference between the two conditions is how this electrical activity is organized.

In A Fib, the two top chambers of your heart (atria) receive chaotic electrical signals. The atria beat out of coordination with the bottom two chambers of your heart (ventricles). This leads to a rapid and irregular heart rhythm. In A Fib the heart rate ranges from 100 to 175 bpm.

In A Flutter or atrial flutter, your atria receive organized electrical signals, but the signals are faster than normal. The atria beat more frequently than the ventricles (up to 300 bpm). Only every second beat gets through to the ventricles. The resulting pulse rate is round 150 bpm. A flutter creates a very distinct “sawtooth” pattern on an EKG.
Mouth Health can be a Sign of Overall Wellness

Taking care of your mouth health can also mean a healthier heart, according to WebMD. Many illnesses such as diabetes, heart disease, respiratory disease, rheumatoid arthritis, and osteoporosis have been linked to gum disease. In fact, those suffering from periodontitis are three times a likely to have a stroke and twice as likely to suffer a fatal heart attack.

The connection between the mouth and the heart lies within the incredible amount of bacteria commonly found inside the human mouth, according to the Mayo Clinic. Most of these bacteria are harmless and can be controlled with daily flossing and brushing, but a lack of dental hygiene can allow them to get out of control and cause oral infections, tooth decay, and gum disease.

Certain medications, such as antihistamines and painkillers, can also slow the flow of saliva which is one of the most significant natural defenses in the mouth against harmful microbes. Bacteria can move through the bloodstream to places like the heart, potentially leading to endocarditis and other issues.

Elsewhere in the body, oral health can show that something else is wrong inside the body such as lesions of HIV/AIDS and through its ongoing link with chronic diseases such as diabetes. Because diabetes lowers the body’s resistance to infections, gum disease is more frequent among those patients. People living with Alzheimer’s have shown a similar tendency as the condition worsens.

The American Dental Association recommends regular dental checkups to protect overall health and they urge immediate attention for bleeding, red, or swollen gums, loose or separating teeth, persistent bad breath, or any changes to how the teeth feel in the mouth.

-CardioSmart

Mended Hearts Christmas Gathering December 19th

Please join us as we celebrate – It’s Great to Be Alive! – enjoying the joys of the holiday season. It is a potluck, so bring anything you would like to share – an appetizer, a side dish, salad, dessert, anything is perfect! The main dish will be provided. If you have a beverage you like, bring it, otherwise, beverages are provided. Most importantly, bring YOU and your significant other/caregiver!

Date: Wednesday, December 19, 2018
Time: 5:30–8:30 PM – come when you can
Where: Ray & Wini Trapp’s home
553 Pebble Beach Way - Eagle
(208) 939-0300 if you need directions

If you are reading this, you are invited!
To have a count for food, please RSVP to raywini1@outlook.com, or give them a call.

HeartGuides Patient and Family Education

The Journey to a Healthy Heart Starts Here

The Mended Hearts HeartGuide is an innovative, informative resource for heart patients and their families, friends, and caregivers. The Mended Hearts HeartGuide 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 HeartGuide 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/
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Mended Little Hearts Liaison – Julie Du Bois, RN 208-860-6984 dubois@slhs.org
Mended Little Hearts Web Page: www.mendedlittlehearts.org

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

Septmeber-November  Year to Date
Hospital Visits: 574  2000
Patients: 466  1664
Follow-up Calls: 329  1326

Our annual reaccreditation training was held Oct 2nd. Julie Swanson of St Luke’s was our guest trainer. Many of our members who have attended trainings during their professional careers commented that never had they attended a training that was so comprehensive and engaging. Thank you, Julie for your leadership!

Welcome our newest Mended Hearts Visitor, Kelly Clifton and our newest Mended Hearts Callers, Susan Multanen and Chris Toshcoff.

We are now serving five (5) hospitals in the Treasure Valley. St. Luke’s in Boise, Meridian and Nampa, and Saint Al’s in Boise and Nampa. If you are interested in becoming an accredited visitor or caller, please call or email Jack Marr who is taking over the training component of our visiting program, at 229-269-8161 jack_marr@hotmail.com. A HUGE Thank YOU to all of our visiting and calling team!

Accredited Visitors:
Fred Bernier  Wilson “Bill” Miller
Chris Catherman  Becky Newberry
Kelly Clifton  Tom & Ev Nichols
Bob Courval  Bruce Parks
Odee Gordon  Jim & Marilyn Pettingill
Elaine Grossaint  Dennis & Adrienne Shiedlak
Bill Hielscher  Pat Toshcoff
Jack Marr  Ray & Wini Trapp

Accredited Callers:
Cynthia Guarino
Ray Heady
Jewel Magney
Wilson “Bill” Miller
Susan Multanen
Chris Toshcoff
Mary Ellen Voshell
Marcia Warne

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.