- Heart

PREVENTION

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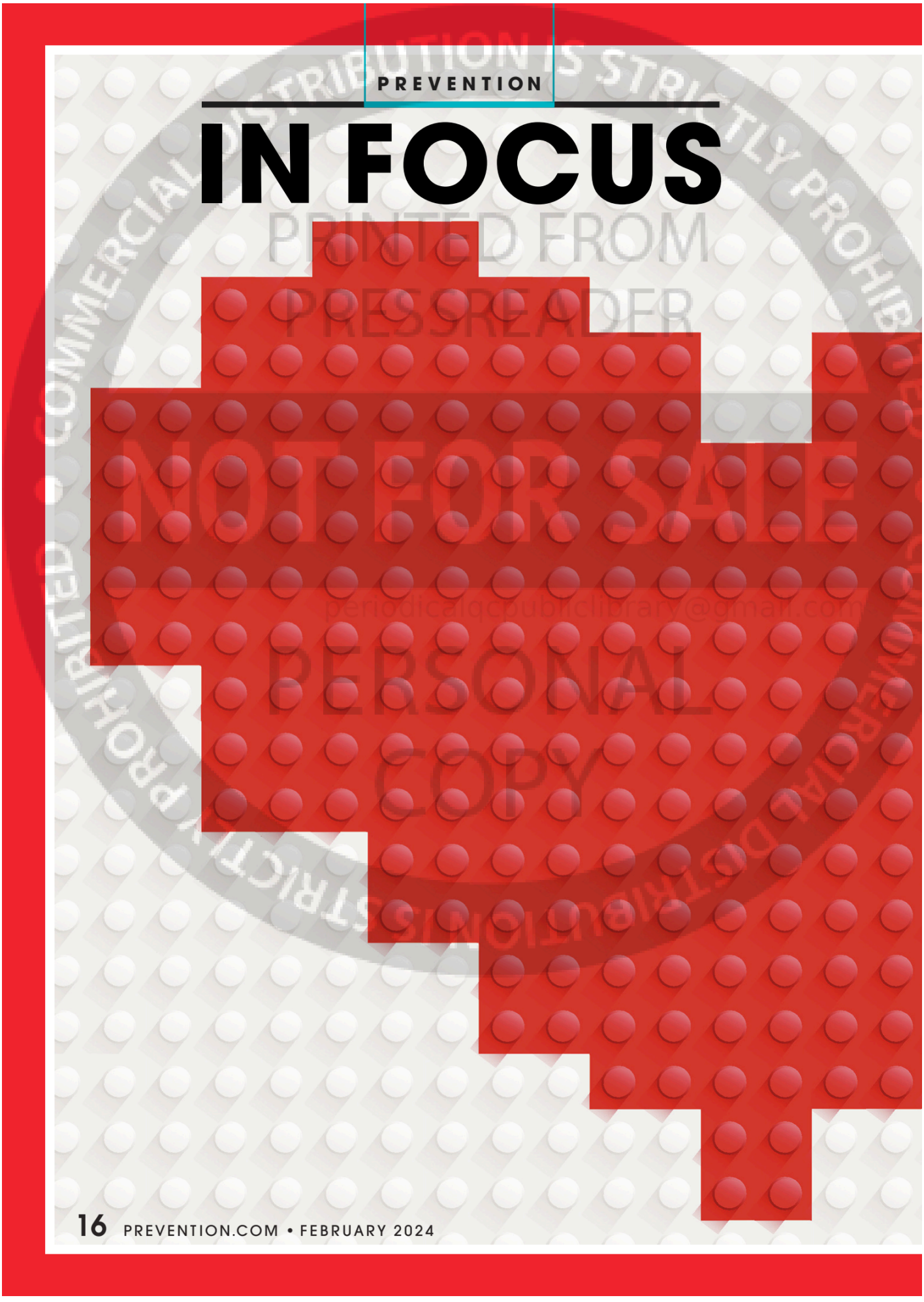

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HEART HEALTH

The body's powerhouse is affected by what you eat, how you move, your state of mind, and even COVID—and that means there's so much *you* can do to keep it ticking. **Here's everything you need to know.**

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IN FOCUS

SPECIAL hearts, special CARE

BY LISA BAIN



"WOMEN ARE NOT SMALL MEN. Women's hearts ARE NOT JUST SMALLER VERSIONS of men's hearts."

CARDIOLOGIST NIECA GOLDBERG, M.D., IS PASSIONATE about the need for care equity—the idea that when it comes to heart disease, all practitioners need to give women as much attention as they give men. Women need to pay attention as well: Heart disease is the number one killer of U.S. women, a fact that only a little over half of American women are aware of.

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And if a woman suffers from a cardiac issue, her symptoms may well be different from a man's.

Yes, the most common symptom for everyone is the classic chest discomfort, tightness, or pressure, says Dr. Goldberg, medical director of Atria New York City and a clinical associate professor of medicine at NYU Grossman School of Medicine. "But sometimes a woman may experience severe shortness of breath without chest discomfort," she points out. "Or the discomfort is lower down in the chest, and she may mistake it for a stomach ailment. Some women experience upper back pressure or unexplained exhaustion when doing very minimal exercise."

Another difference for women, says Dr. Goldberg, is in the risk factors. "There are standard heart disease risks men and women share, like high cholesterol, high blood pressure, diabetes, cigarette smoking, lack of exercise, and obesity. But specific to women are pregnancy-related complications that raise their risk even years later: preeclampsia, preterm birth, hypertension during pregnancy, and gestational diabetes."

What this means, Dr. Goldberg says, is that it's critical for doctors to take complete medical histories and to ask women, even later in life, if they had any of the above complications during pregnancy or after giving birth. But not enough physicians know this, she adds: "There's so much research going on around women and heart disease, and we need to get this integrated into clinical practice faster so more women can benefit from it. Med schools have improved their curricula, so it'll be better for the doctors of the future. But we have to make sure this information gets disseminated to the doctors who are already practicing and taking care of women. It's time for better action for women." Something that would help, she says, "is for all doctors to have a checklist, right on the electronic record, explaining how to screen women for heart disease."

For now, here's the bottom line: Be aware that not all physicians are tuned in to the specific heart risks women face. This guide can help arm you with the important know-how you need, because women's hearts are special, and special hearts deserve special care.

5 QUARTS THAT'S HOW MUCH BLOOD YOUR HEART PUMPS AROUND YOUR CIRCULATORY SYSTEM EVERY MINUTE.

Need-to-know heart FACTS

BY LISA BAIN



AN UPSIDE TO THE CHILLING STATS about women and heart disease: There's much you can do to prevent problems down the line. These facts can mobilize you to take steps to strengthen your heart, and maybe even save your life.

FACT:

High blood pressure raises your risk of heart attack and stroke.

The American Heart Association (AHA) refers to high blood pressure (HBP) as a "silent killer," because usually there are no symptoms. That's why a key heart health step is to get your blood pressure checked on the regular. This is especially important for Black people, the AHA says, because in the U.S. they have a higher rate of HBP than other racial and ethnic groups; it also tends to be more severe in them, and certain meds may be less effective. If the condition isn't detected or controlled it can wreak havoc on blood vessels and the heart as well as on the brain, eyes, and kidneys.

DO THIS: Get your blood pressure checked regularly, and talk to your doctor about how often it should be monitored. If yours turns out to be on the high side, discuss ways to help bring it to a healthy level. Many things mentioned in this guide can help, including healthy eating, monitoring weight, easing stress, and exercising regularly. Also important, according to the Mayo Clinic: Watch your sodium levels and alcohol intake.

FACT:

Sitting too much puts your heart at risk.

Studies have shown that sitting on your duff for prolonged periods increases heart disease risk by raising both blood pressure and blood sugar. Here's why: When we sit or lie down, our legs and gluteus muscles (the body's largest muscles) don't contract much and thus

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don't do their usual jobs of taking sugar from the bloodstream and helping break down fatty acids in the blood. Bingo: Too much sugar and too many fatty acids build up.

▶**DO THIS:** Get out of your seat. It doesn't take much movement: A recent small study found that getting up every 30 minutes and moving for as little as three minutes might help. One idea for when you're at home is to make yourself a playlist with some three-minute songs and get out of that chair every hour for a solo bop. In the office, take breaks and walk up a couple of flights of stairs or around the block or the parking lot.

FACT:

Inflammation is a sharp indicator of heart risk.

Not all inflammation is bad—it's a natural way in which the body fights off trauma and injury. But when it's chronic, it hangs around, builds up, and has a negative impact on health. "It's definitely a risk marker for heart disease," says Dr. Goldberg. "Autoimmune diseases such as lupus, rheumatoid arthritis, psoriatic arthritis, and Sjögren's syndrome are associated with inflammation. So is obesity."

▶**DO THIS:** Think about how to lower inflammation. Getting regular aerobic exercise and losing weight

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if needed can reduce inflammation, says Dr. Goldberg. This is particularly important for people with an autoimmune disease, she adds. "The leading cause of death in people with autoimmune disease is heart disease, so they should pay attention to their heart and heart disease risk factors."

FACT:

Any amount of smoking harms the heart.

Smoking hurts almost every organ in the body, including the heart, says the National Heart, Lung, and Blood Institute—affecting how it functions, its structure, the blood vessels, and the blood itself. Vaping ups risk too, says Dr. Goldberg. "Vaping is harmful to the heart as well as the lungs and brain," she says. "There's a 71% higher risk of stroke and a 59% higher risk of developing a heart attack when you vape."

DO THIS: If you smoke, do everything you can to quit. Start by talking to your doctor, who can direct you to programs and possible medications that can help. Secondhand smoke ups your risk as well, so send any smokers outside!

FACT:

Easing stress is a big heart-health booster.

Mental stress is a strong potential cardiac risk factor, according to a 2021 *Journal of the American*



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Medical Association (JAMA) study as well as several previous studies. The reason: The fight-or-flight response accompanying stress releases hormones that cause changes in the body (for example, increasing blood pressure and body fat over time). Stress also brings about higher inflammation in the arteries.

▶ **DO THIS:** Add some zen to your life. Think seriously about your own personal path to a calmer life, whether it's downloading a meditation app (and carving out time to use it!), making sure you're not carrying too much of the mental load in the household, starting each day with some dedicated reading time, or taking a mindfulness walking break each afternoon.

FACT:

Both cardio and strength exercises are important.

Exercise can help keep your blood pressure in check, reduce your levels of stress hormones, and help your muscles pull oxygen out of your blood, among other heart benefits. Getting regular exercise—a combo of aerobic movement and resistance training—reduces your risk of sudden heart attack and other potentially fatal cardiac events.

▶ **DO THIS:** For optimal heart health, "get at least 150 minutes of aerobic exercise each week," says Dr. Goldberg. "And do some upper- and lower-body strength training two or three times per week."

FACT:

A healthy level of cholesterol can prevent blockages in your arteries.

The AHA suggests that everyone 20 and older get their cholesterol checked every four to six years. And you should do that more often if you have heart risk factors or already have heart disease. High levels of LDL cholesterol can lead to fatty buildup in your arteries, and low levels of HDL cholesterol—which helps transport cholesterol away from your arteries—are also unhealthy. Your triglyceride levels will also be checked; if those are high, your risk of heart attack and stroke is higher, especially if the other two levels are wonky.

▶ **DO THIS:** Go get that cholesterol test! If you need to improve your levels, your doctor will talk to you about healthier eating, the importance of exercise, and possibly medication.

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IN FOCUS

The COVID-heart CONNECTION

BY MERYL DAVIDS LANDAU



LUIS VELASCO/STOCKSY UNITED.

WHEN JACQUELINE SAENZ CAUGHT COVID IN SEPTEMBER 2021, the 49-year-old accounting technician knew the virus might cause lung problems. Sure enough, she struggled to breathe and wound up on oxygen in the hospital, then at home for months afterward.

What she never expected was that COVID could also damage her heart in ways that are still affecting her more than two years later. For months after Saenz was COVID-free, as she lay in bed each night, she felt intense pressure in her chest and the fluttering of her heart.

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"I was really scared. I kept thinking, *I'm too young to have heart issues,*" Saenz recalls. She delayed seeing her doctor because of fear, denial, and scheduling issues, but she eventually saw a cardiologist who diagnosed a condition known as premature ventricular contractions (PVC), in which extra heartbeats disrupt the heart's rhythm. Since then, Saenz has worn heart monitors at home, and she takes prescription beta-blockers. Fortunately, the symptoms have improved, meaning she lucked out in avoiding the invasive surgery her doctor had told her she might need.

Surprising but not shocking

When the pandemic initially tore through the world, physicians paid close attention to COVID's effects on the lungs. After all, COVID is a respiratory disease, says Giv Heidari, M.D., a cardiologist at the COVID-19 Heart Clinic in California's Loma Linda University Health, where Saenz is being treated. But it's now clear that numerous other organs—including the kidneys, the GI tract, and the heart—can be affected.

Heart problems in particular are widespread—and really dangerous. Data from the Centers for Disease Control and Prevention shows that 5% more people died from heart disease during the pandemic's first two years than would have absent the virus. Many cardiac diseases have been linked to COVID: Rates of heart attack, heart failure, pulmonary embolism, stroke, and heart rhythm issues all increase within a year of infection, according to a large study of more than half a million adults. Younger people—typically at low risk—are especially vulnerable to COVID-related heart attacks, with the sharpest relative rise in deaths occurring in people ages 25 to 44, research by Los Angeles' Cedars-Sinai Medical Center shows.

Exactly how much of this is due to COVID's effects on the body is under debate. A portion of the jump in heart conditions likely reflects the fact that some people who had early heart disease at the start of the pandemic avoided doctors and hospitals, leading small problems to mushroom into bigger ones. Another part might be the tremendous stress we were all under, not to mention our avoiding the gym and chowing down on greasy, artery-damaging comfort food during long periods at home.

Yet some of the increase was attributable to COVID itself. "The virus can directly affect the heart, such as by inflaming the cardiac muscle or the layers around it. It may also cause dysregulation of neuron fibers feeding the heart, whether via direct effect or through immune

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system activation," Dr. Heidari says. Plus, long COVID, which affects some 11% of those infected, frequently includes a cardiac component, such as glitches in the autonomic nervous system that trigger palpitations.

What we don't yet know is whether there's heart damage that isn't resulting in heart disease symptoms now but is setting the stage for future heart problems. For example, COVID infections have been shown to cause inflammation of blood vessel walls. This can theoretically lead to atherosclerosis and coronary artery disease later on—that's one of the reasons COVID has been called a vascular disease too. Especially worrisome: Some 21% of those hospitalized for COVID develop hypertension for the first time within a few months, as do 11% of those with milder cases—boosting their risk of future issues like coronary artery disease and congestive heart failure.

Who is most at risk?

The number of COVID-related cardiac patients streaming into Dr. Heidari's clinic has been declining, perhaps because of the increased immunity most people now have along with the fact that circulating COVID variants are now sometimes milder. What this means for generally healthy people is unclear. "Currently, whether people with SARS-CoV-2 infection have to worry about cardiovascular disease is not known," says Harlan Krumholz, M.D., a cardiologist at the Yale University School of Medicine. "This is an issue that deserves continued attention."

Still, the bottom line is that anyone can develop heart symptoms during or after a battle with COVID, and people with additional medical conditions are especially vulnerable. More than a decade before contracting COVID, Jen Singer, 57, a writer in Red Bank, NJ, had rounds of strong chemotherapy along with radiation to her chest in a successful fight against Stage III non-Hodgkin's lymphoma. Nobody warned Singer then that the treatments had made her heart vulnerable, but six weeks after she got COVID, her heart's electrical system shut down. She would have died without emergency medical care, including getting a pacemaker inserted, and going on four different heart meds.

Now Singer, who has since published several *Just Diagnosed Guides* to medical conditions including heart disease, lives with heart failure (insufficient blood flow to the organs), so she's frequently fatigued and short of breath. "I was a tennis-playing, gym-going, otherwise healthy person until COVID. Chemo and radiation filled the barn

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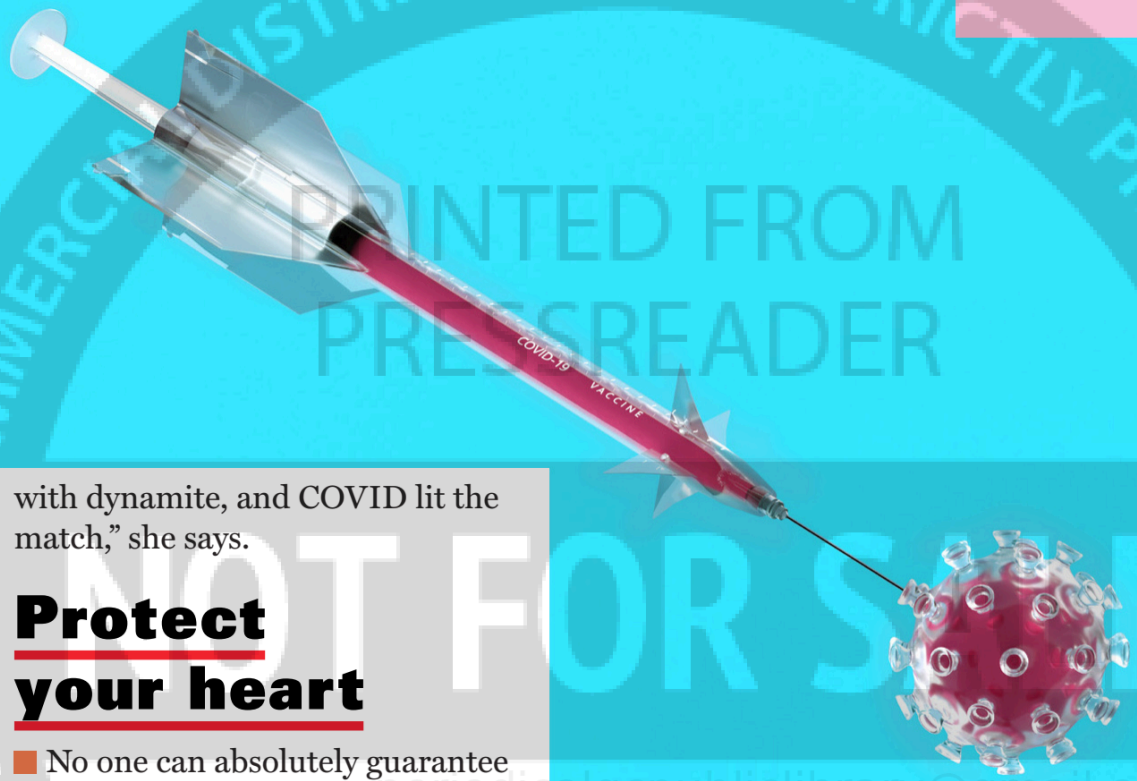

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with dynamite, and COVID lit the match," she says.

Protect your heart

No one can absolutely guarantee that you can avoid heart complications after COVID, but you can reduce your odds. The best way is to do everything within your power to keep from getting COVID—by avoiding crowded indoor situations when the virus is circulating locally, wearing a mask, and getting the latest vaccine. Some people have heard that earlier versions of the shots could cause a kind of heart muscle inflammation known as myocarditis, especially in young men, but the CDC found that these men were up to eight times as likely to develop the problem after a COVID *infection* as after vaccination.

If you get sick, take time to rest, which seems to reduce the chance of lingering problems, Dr. Heidari says. And if you notice anything weird going on with your heart (whether or not you've had COVID), don't ignore it. "Anyone who feels they have heart symptoms, especially the onset of chest pain or shortness of breath, should contact their doctor—and for heart attacks time matters, so they should do it immediately," Dr. Krumholz advises.

Of course, you'll want to keep your heart as strong as possible by exercising regularly, eating a heart-healthy Mediterranean diet, staying at a healthy weight, not smoking or vaping, and having your BP and cholesterol checked during regular doctor's appointments. Says Dr. Krumholz, "With risks rising, it is more important than ever to embrace heart-healthy habits."

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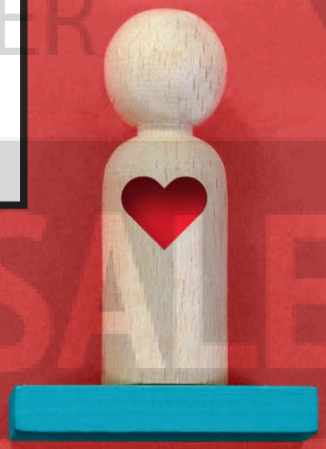
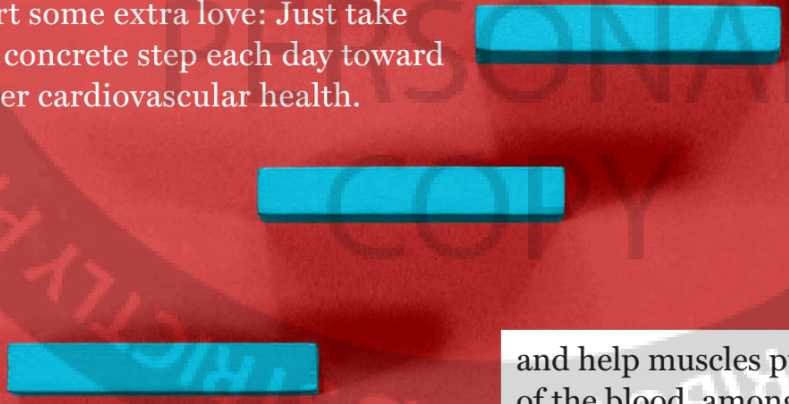
7-DAY Love-Your-Heart CHALLENGE

BY MARISA COHEN



IT'S THE ENGINE THAT HELPS EVERYTHING ELSE in your body run smoothly. Spend a week showing your heart some extra love: Just take one concrete step each day toward better cardiovascular health.



DAY 1: TAKE THE STAIRS

Exercise is one of the best all-around heart boosters: It can help keep blood pressure in check, reduce levels of stress hormones, and help muscles pull oxygen out of the blood, among other things. And here is an easy-peasy way to get it in: Walk up stairs. Recent research from Tulane University found that climbing more than five flights of stairs daily could reduce risk of cardiovascular disease (CVD) by 20%. And counting 50 steps going up is a lot easier than counting 10,000 steps on flat ground!

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DAY 2:

STRATEGIZE FOR BETTER SLEEP

Chronic lack of sleep is associated with higher blood pressure and an increased risk of CVD. When we snooze, our blood pressure drops to its lowest point of the day, which helps us maintain healthy blood pressure during our waking hours, says Rebecca Robbins, Ph.D., a sleep expert for Oura. Today, set the stage for a better night's sleep. First, consider installing blackout shades, as research shows that adults exposed to light when they sleep may be more likely to develop high blood pressure than those who sleep in complete darkness. Next, find a spot to charge your phone that's *not* in your bedroom so blue light and scrolling won't keep you up. Finally, try to crash between 10 p.m. and 11 p.m.—a study found that people who fell asleep within this window had a lower rate of developing CVD than those who conked out earlier or later.

DAY 3:

LIMIT ULTRA-PROCESSED FOODS

Eating whole foods is ideal but not always possible IRL. Still, some processed foods are healthier than others; for instance, frozen strawberries and whole-wheat bread are minimally processed to optimize nutrition. But new research ties "ultraprocessed" foods (frozen dinners, packaged cookies, potato chips) to an increased risk of heart disease. One way to tell whether a food is ultraprocessed: Check to see if the ingredient list includes things you wouldn't see in a home kitchen, like high-fructose corn syrup, emulsifiers, and chemical additives. Take a look through your pantry and strategize a few alternatives (for example, instead of boxed mac 'n' cheese, cook up some whole-wheat penne with tomato sauce and grated Parmesan).

DAY 4:

GET OUT!

It's easy to spend the entire day indoors—working in an office, doing chores around the house, and shuttling between the two in a car or on a bus. Today, schedule a half-hour walk outdoors, preferably in a place where you can see at least a hint of Earth's wonders. Studies show that the calming nature of, well, nature can reduce blood pressure, heart rate, and levels of the stress hormone cortisol. It can also help keep your brain healthy as you age. Even if you live in a concrete

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jungle, strolling in a local park or community garden for 30 minutes a day at least four times a week will deliver the full benefit.

DAY 5:

BOOST YOUR OMEGA-3'S

Today, figure out a delicious way to get more of this nutritional powerhouse into your life. One recent study found that a diet including omega-3-rich foods was associated with a 10% lower risk of cardiovascular disease and a 20% reduced risk of fatal coronary heart disease. One delectable way to get omega-3's: from fatty fish such as salmon, mackerel, and herring. If you are vegan—or just don't like fish—you can still get a powerful boost from plant-based foods such as walnuts and flaxseeds (sprinkle them on yogurt, use them in a smoothie, or mix them into a salad). If none of those options appeal to



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you, ask your doctor if you should take a supplement, then look for one with 1,000 mg of fish oil, including EPA and DHA.



DAY 6:

SCHEDULE A DENTAL CHECKUP

You may be surprised to hear that prioritizing dental health is not just good for your smile but also important for your heart. Studies have shown that people with gum disease or tooth loss have a higher risk of developing heart disease. One theory is that bacteria that cause gum disease can travel through blood vessels, causing inflammation. So make an appointment if you're due for one, and be sure to brush twice daily and floss once a day!

DAY 7:

CHECK YOUR MEDS

Schedule a convo with your health care provider to go over your daily meds. About one in five American adults with high blood pressure takes a medication that can raise blood pressure even more, a recent study found. The most common culprits: certain antidepressants, nonsteroidal anti-inflammatories, and oral steroids. If you're on any of these, it's worth having a discussion to see if it can be safely replaced.

TUNE IN TO OUR PODCAST!

• • • We're talking more about keeping your heart healthy on the latest *Prevention* episode of *The Not Old Better Show*. Find out how to tune in (on the radio or online) at **notold-better.com**.

THE NOT OLD BETTER SHOW

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Your Heart's Favorite FOODS

ONE OF THE BIGGEST INFLUENCES ON YOUR HEART is what you feed it. Your diet is fundamental to managing blood pressure, cholesterol, blood sugar, inflammation, and weight.

The simplest way to get all the nutrients needed for a strong heart is to build meals around a variety of these foods: produce, whole grains, lean protein, and healthy fats. And minimize heart saboteurs: trans and saturated fats, sodium, and added sugars.

Hungry for a change? Add these healthy-heart allies to your daily menu.

AVOCADOS

They are an excellent source of monounsaturated fats, the healthy type that can help lower "bad" LDL cholesterol.

TOMATOES

Inflammation is a bad actor when it comes to heart disease. Counter it with tomatoes; they're rich in lycopene, an anti-inflammatory antioxidant. Enjoy them both raw and cooked—heat increases the amount of lycopene that is available for your body to absorb.

BEANS

Beans and other legumes are high in fiber, which helps balance blood sugar and aids in appetite control. One study found that people who ate ⅓ cup of black beans daily were 38% less likely to suffer a heart



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attack than those who ate beans less than once a month.

LEAFY GREENS

Eating 7 cups of raw greens or 3½ cups of cooked greens per week has been associated with a 15% lower risk of coronary heart disease, largely due to their high nitrate content, which helps blood vessels relax and promotes healthy blood pressure.

WALNUTS

They may reduce LDL cholesterol and inflammation, improve blood vessel function, and support balanced blood sugar.

BERRIES

When eaten regularly, these fruits may help increase levels of "good" HDL cholesterol, decrease blood pressure, and prevent blood platelets from sticking together so it's easier for your heart to pump blood.



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SWEET POTATOES

These are high in potassium, a mineral that supports healthy blood pressure by dilating blood vessels and helping flush away sodium.

TURMERIC

Curcumin, a compound found in it, protects against plaque formation in arteries. Use turmeric with black pepper for better absorption.

OATS

Eating 1½ cups of cooked oatmeal in the a.m. could reduce total cholesterol by 5%. Whole grains like oats are a good source of fiber and other heart-friendly nutrients.

FLAXSEEDS

Studies suggest that these seeds, known for their omega-3's and fiber content, may help lower blood pressure, cholesterol, and blood sugar.

BROCCOLI

This veggie is a great source of potassium, nitrates, folate, and vitamin C, all of which support healthy blood vessel function and blood pressure.

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2 Heart-friendly RECIPES



Breakfast

CHOCOLATE-CHERRY GRANOLA BARS

Say hello to the perfect on-the-go breakfast. Make these at the beginning of the week for a sweet start to your morning.

ACTIVE **20 MIN.**
TOTAL **30 MIN. PLUS SETTING**
MAKES **14**

- **2** cups old-fashioned oats
- **½** cup raisins
- **1** cup unsweetened dried cherries, divided
- **½** cup almond butter
- **¼** cup honey
- **¼** cup raw almonds, roughly chopped
- **½** cup dark chocolate chips

1. Heat oven to 350°F. Line 8-in. square baking pan with parchment paper, leaving 2-in. overhang on 2 sides. **2.** Spread oats on large rimmed baking sheet and bake until just golden brown, 8 to 10 min.; cool completely. **3.** Meanwhile, place raisins and ½ cup cherries in heatproof bowl. Cover with boiling water and let sit 10 min. **4.** Drain, transfer to food processor, and puree until smooth. Add almond butter and honey and puree until smooth; transfer to bowl. **5.** Add oats and stir to coat, then fold in almonds, chocolate chips, and remaining ½ cup cherries. Pat mixture into prepared pan; let set about 1 hr. **6.** Using overhangs, transfer set mixture to cutting board and cut into 14 bars.

PER BAR *About 255 cal, 13 g fat (2.5 g sat), 0 mg chol, 10 mg sodium, 29 g carb, 5 g fiber, 16 g sugar (8 g added sugar), 6 g pro*

TED CAVANAUGH.

Lunch

LEMON-MARINATED HERB PASTA SALAD

ACTIVE **20 MIN.**
TOTAL **25 MIN.**
SERVES **2**

- **4 oz short pasta, such as rotini**
- **2 Tbsp olive oil**
- **1 tsp lemon zest**
- **½ Tbsp lemon juice**
- **Kosher salt and pepper**
- **2 cups spinach**
- **½ cup mixed fresh herbs (basil, parsley, dill, chives)**
- **¼ cup shaved Parmesan**

1. Cook pasta per pkg. directions and rinse under cold water to cool, then drain well.
2. Meanwhile, in large bowl, whisk together oil, lemon zest and juice, and ¼ tsp each salt and pepper. Toss with pasta and refrigerate until ready to serve (up to overnight).
3. When ready to serve, toss with spinach, herbs, and half of Parmesan. Serve with remaining Parmesan.

PER SERVING *About 395 cal, 18.5 g fat (4.5 g sat), 13 mg chol, 475 mg sodium, 45 g carb, 3 g fiber, 2 g sugar (0 g added sugar), 13 g pro*

This zesty dish is the ideal make-ahead meal—it gets more flavorful as it sits!



DANIELLE DALY.

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