

SPECIAL POINTS OF INTEREST:

- **Murmur**
- **Magnesium**
- **Baked Beans**
- **New Heart Failure Medication**

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## What is a Murmur?

What is a murmur? A murmur is a sound that is heard with a stethoscope when listening to the heart beat. A murmur is caused by turbulent blood flow within the cardiac cycle. How the murmur sounds, where it is located, and how it varies with different positions can help your healthcare provider determine whether or not the murmur is a benign finding or not.

To hear a murmur well, the exam room should be very quiet. This includes no talking by the patient or family members when the exam is being done. For this reason, the healthcare provider may close the door and turn off any machines that may be running. This is harder to do in a hospital



setting but in an office this is very reasonable. As part of the physical exam, you may be asked to remove or at least raise your shirt. Some healthcare providers may want a gown to be placed. This is because a murmur can be heard much better when the stethoscope is on the skin and nothing else is touching it. You may be asked to sit up, lie down, or even lie on your side. Sometimes a hand grip or positions changes such as squatting and standing may

also be needed. Holding your breath or taking a deep breath may be needed as well. All of these maneuvers help distinguish the type of murmur.

Murmurs can occur at all ages and for different reasons. As we age though, especially in people who already have heart problems, a murmur is more likely to be something abnormal within the heart. Murmurs can occur due to abnormal valve function such as a leaky valve or a narrowed valve. They can also occur if there is an abnormal opening between the chambers of the heart. This is often referred to as a “hole” in the heart. There are some other causes of murmurs within the heart however these are the most common reasons. Some disease states such as anemia, pregnancy, and hyperthyroidism can also cause a murmur. (3).

### Tip of the Month

#### Increasing Magnesium in Your Diet if Your Magnesium is Low

1. Eat nuts. Unsalted of course. Almonds, cashews, and brazil nuts have the most.
2. Increase your seeds like sunflower, pumpkin, and sesame seeds.
3. Eat some oatmeal for breakfast.
4. Add fruit like bananas and papaya to your day.
5. Don't forget your spinach.
6. Mix in some black beans, soybeans, pinto beans, or kidney beans. Each are high in magnesium. (4).



## Baked Beans



Recipe From "Breaking the Salt Habit" by Erik Williams.

### Ingredients:

2 14.5 oz cans of Pinto Beans  
 1 Tb Corn Starch  
 1\2 cup NSA Ketchup  
 1\3 cup White Wine Vinegar  
 1\3 cup Brown Sugar, packed  
 1/3 cup Onion, chopped  
 3 Tb Barbeque Sauce  
 1 tsp Yellow Mustard  
 1\2 tsp Hickory Liquid Smoke  
 1\2 tsp Chili Powder  
 1\4 tsp Black Pepper  
 1\4 tsp Garlic Powder

### Directions:

1. Pour beans in 8x8 casserole dish.
2. In a small bowl, combine remaining ingredients and pour over beans.
3. Cover and place in the oven.
4. Bake for 90 minutes stirring 2-3 times.
5. Enjoy!

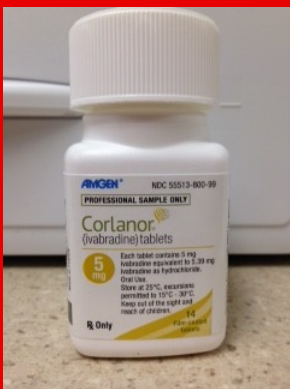
### Nutrition Info

Yields 8 servings  
 1 Serving = 1/2 cup

Calories: 142  
 Total Fat: <1g  
 Sat Fat: 0g  
 Cholesterol: 0  
 Potassium: 235mg  
 Carbohydrates: 28g  
 Protein: 4g  
 Fiber: 10g  
 Sugar: 17g  
 Sodium: 107mg

**Quote of the Month:** "Worry does not empty tomorrow of its sorrow, it empties today of its strength." Corrie Boom

## Did you Know?



Did you know that a new drug was recently approved for the treatment of heart failure? Last month, the FDA released the approval for Corlanor (Ivabradine) for the treatment of chronic stable heart failure. Ivabradine is not for everyone with heart failure though. It is recommended for people who have higher heart rates, greater than 70 beats per minute at rest. Currently the standard of care to help lower heart rates in the treatment of heart failure is beta blockers. However, some individuals cannot take a high enough dose of the beta blocker due to the side effects or underlying low blood pressure. Ivabradine, does not lower blood pressure and at this point has no known effect on asthma. The starting doses are dependent on what the heart rate is and then the dose is titrated to achieve the heart rate goal.

The three doses of Ivabradine are 2.5mg, 5mg, and 7.5mg. Each are taken twice daily with meals. The most common side effects include slow heart rate and atrial fibrillation. High blood pressure and visual disturbances can also occur. This drug can be harmful to unborn babies and should not be used during pregnancies. The SHIFT trial showed that people taking Ivabradine had a 26 percent decrease in hospitalization due to worsening heart failure. This drug does not seem to replace any current therapies based on the information available. However, it could be beneficial for some people with heart failure that cannot be maximized on their current medications due to other factors, or if the heart rate is unable to be controlled on maximum doses of beta blockers. It is exciting to have a new treatment for heart failure now available. (1,2).

After a murmur has been heard, your healthcare provider will decide about further treatment. If it is felt to be a benign finding or a finding that has not changed then nothing else may be ordered. However if it is a new finding that does not sound benign, or if there is a change from the previous exam, an echocardiogram is usually ordered. An echocardiogram is an ultrasound of the heart. This is a non invasive test can be ordered by any healthcare provider but is usually read by a cardiologist. During the test, pictures of the heart are able to be taken from various views. The blood flow is able to be seen flowing across the valves and into the various chambers of the heart. Many measurements are taken during the echocardiogram to evaluate the size of the heart's chambers and it's valves. Because of this, the test usually takes around 45 minutes, but can take over an hour depending on the anatomy. The test should not be painful although some individuals do get sore around the chest afterwards.

If the findings on the echocardiogram are significantly abnormal or if more information is needed, then sometimes a more invasive echocardiogram is ordered. This is called a transesophageal echocardiogram or TEE for short. This test is similar to the echocardiogram except it is done by running a small probe down the food pipe (esophagus) to get a better view of the heart. For this test, some form of sedation is usually used and a numbing agent for the throat. This is usually done as an outpatient by a cardiologist. The findings from one or both of these test will help your healthcare providers know more about your heart's anatomy and how best to treat and follow you long term. (3).

