

SPECIAL POINTS OF INTEREST:

- **Angina**
- **Flu Season**
- **Slow Cooker Chili**
- **Another New Cholesterol Drug**

INSIDE THIS ISSUE:

- Front Story** 1
- Tip of the Month** 1
- Recipe** 2
- Quote of the Month** 2
- Did you Know** 2
- Our Info** 3

What is Angina?

What is a Angina? Angina is the classic symptom of chest pain. Typical symptoms of angina are described as a “heavy chest pressure or squeezing, a “burning” feeling, or difficulty breathing” (1). This discomfort may radiate to the left shoulder, neck, or arm and may increase in intensity over a few minutes time. Angina may start after exercise or stress of some kind, but may also occur at rest or with no precipitating factors. Angina occurs when the heart is not getting enough blood. This can occur for a number of reasons. Coronary artery disease (CAD) or blockage in the arteries of the heart is usually the most common cause. However,



angina can also occur in the setting of normal arteries if the artery has a spasm. This is called a vasospasm. Other heart problems such as a narrowing or leaky aortic valve, or a heart muscle disorder like hypertrophic cardiomyopathy can cause angina.

What test may be done for angina? The testing depends on the nature and history of the symptoms. Extensive testing may be done if this is a new problem or no testing may be done if this is a chronic

problem and symptoms are stable. Some common tests include an electrocardiogram (EKG), a stress test, an echocardiogram, and laboratory studies. Depending on the findings, further test may need to be done such as a CT scan or a cardiac catheterization. How is angina treated? Treatment is aimed at the underlying cause, eliminating aggravating factors, and decreasing the hearts oxygen demands. Smoking can aggravate angina, therefore smoking cessation is vital. Treating high blood pressure and keeping the heart rate down also helps decrease anginal symptoms as well. After any underlying causes have been treated, then medical therapy is left. The most famous medication that is used to treat angina is nitroglycerin. Nitroglycerin comes in several different forms. It comes in very short acting forms that may be sprayed and placed under the tongue...cont...page 3 (1).

Tip of the Month

Keeping Healthy this Fall:

1. Get your FLU Shot!!!. This is recommended for everyone 6 months and older unless there is an allergy.
2. Wash your hands. Wash your hands.
3. Stay rested.
4. Take your medications to minimize the chance for a hospital admission.
5. Ask family and friends who are “under the weather” to stay home.
6. Try to avoid close contact with others if you are sick or close contact with others that are sick. (4).



Slow Cooker Chili



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

Ingredients:

-2 lb extra lean turkey
-2-8 oz. cans NSA Tomato Sauce
-2-14.5 oz. cans Kidney Beans
-2-14.5 oz. cans Pinto Beans
-1 cup Onion, chopped
-1-4 oz. can Green Chiles
-1\2 cup Celery, chopped
-3 Garlic Cloves, minced
-2-14.5 oz cans NSA Diced Tomatoes
-2 1\2 tsp Cumin
-2-3 Tb Chili Powder (a no sodium chili powder)
-1 tsp Black Pepper

-1 tsp. Oregano

-1 tsp. Paprika

-1 tsp Sugar

Directions:

-Brown turkey in a skillet.
-Add all ingredients in a slow cooker.
-Stir.
-Let cook 8-9 hours on low.

Nutrition Info

Yields 8 servings
1 Serving = 1 cup

Calories: 360
Total Fat: 8 g
Sat Fat: 3g
Cholesterol: 80 mg
Potassium: 102 mg
Carbohydrates: 42 g
Protein: 34 g
Fiber: 11g
Sugar: 8 g
Sodium: 377 mg

Quote of the Month: "You may have to fight a battle more than once to win it." Margaret Thatcher

Did you Know?

Did you know that on August 27, 2015 the FDA approved another drug for the treatment of high cholesterol? Repatha (evolocumab) is the second drug in its class to be approved. In July, its sister drug Praluent was approved for a similar indication. So who can take Repatha? Repatha is approved for individuals with Familial Hypercholesterolemia who still need lower cholesterol despite diet, exercise, and being on a maximum tolerated dose of statin. Repatha is also approved for people with cardiovascular disease who need further lowering of their LDL despite diet, exercise, and being on a maximum tolerated dose of their statin. There are some people who have not tolerated statin drugs in the past due to side effects so Repatha may be an option for those individuals if they fall into one of

these two categories. Based on the study, Repatha lowered LDL (bad) cholesterol by 60 percent over a 12 week period. Repatha comes in a prefilled syringe and stored in the refrigerator but can be stored at room temperature if needed. It is injected into the abdomen, thigh, or upper arm. The dose is either 140mg twice a week or 420mg once a month depending on the indication for use. Most common side effects include irritation at the injection site, upper respiratory tract infections, influenza, common cold symptoms, and back pain. Allergic reactions can occur. It is recommended that cholesterol levels are repeated in 4-8 weeks to ensure response to the drug. It is important to know that Repatha has not been shown yet to decrease the risk of heart attack or stroke which is why statin drugs are still the mainstay of therapy. (2,3).



This form is good for individuals that do not have angina that often. These preparations are often kept with individuals at all times just in case there is an “attack”. Then there are longer acting preparations called isosorbide dinitrate or isosorbide mononitrate. These drugs are taken on a daily bases for people that have frequent angina. Nitrates work by open up the blood vessels to allow more blood to pass thru. They also take some of the workload off of the heart.

Beta blockers are also commonly used to treat angina. There are several beta blockers on the market. Some commonly used ones include metoprolol, atenolol, and carvedilol. These medications help decrease workload on the heart by lowering the heart rate and lowering the blood pressure. These drugs have also been shown to decrease mortality and heart attacks in people who have already had a heart attack. They are also very beneficial in treating heart failure.

Calcium channel blockers such as amlodopine, felodopine, nicardipine, diltiazem, and verapamil are also used to treat angina. These drugs work by relaxing the blood vessels which not only helps when there is a blockage, but also helps when there is a spasm in the artery. Some of these medications also slow the heart rate down and they all lower the blood pressure.

Ranaxa or Ranolazine is also used in patients with chronic stable angina. This drug is usually reserved for individuals who continue to have symptoms despite the other therapies because it is expensive. However, for individuals who do not have a high blood pressure, it is sometimes a good option as it does not have a significant effect on blood pressure or heart rate.

To sum up, angina is a common problem among individuals with heart disease. The treatment is aimed at treating any reversible causes and then taking medications that take some workload off the heart. (1).

