



The Heart Disease and Stroke Prevention Program newsletter has been developed in response to coalition member requests for more information and communication. Please submit articles of interest, upcoming events, awards, honors and other announcements to laura.scott@state.co.us. Photos are welcome! All information should be submitted as Word documents, and photos and graphics as jpg files.

If you find this information helpful, please feel free to forward it to someone else who might enjoy it.

Heart eNews Heart Disease and Stroke Prevention Program February 2010

Links!

[American Heart Association](#)
[Centers for Disease Control](#)
[National Stroke Association](#)
[National Heart, Lung and Blood Institute](#)
[Colorado Stroke Alliance](#)
[Rocky Mountain Stroke Association](#)
[Heart Disease and Stroke Prevention Program](#)



This newsletter contains

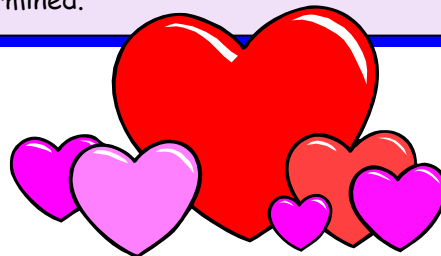
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Calendar of Current Events

- **Sat., Feb. 27, 2010: DAY OF DANCE**
Time: 9 a.m. to 1 p.m. (screenings 9 a.m. to 11 a.m.). *Where:* Pueblo Mall - Dillard's Court.
Cost: FREE! *More information:* 719-595-SPRT (7778) or <http://www.parkviewmc.com/>.
Bring your family and friends to dance, learn simple ways to stay healthy, enjoy music and participate in health screenings. Free cholesterol screening for first 100 participants...Interactive dance instructions...Fun for everyone...PUT ON YOUR RED SHOES AND COME DANCE!
- **Wed., May 26, 2010: SAVE THE DATE!**
Colorado Heart Disease and Stroke Prevention Program Coalition Meeting. Time and place to be determined.

- ♥ [Heart and Stroke Healthy Community Progress Report](#)



Focus On:

Smoking Bans

Did you know... smoking bans save lives?

Two new studies support the notion that smoking bans in bars, restaurants and other public places lead to a quick drop in heart attack rates. The research analyzed data from 24 studies conducted across the United States and showed at least a 17 percent reduction in heart attacks one year after the ban. These studies showed that the longer the ban was in effect, the bigger the reduction in heart attacks. For example, one ban in effect for three years showed a 36 percent drop in heart attack rates.

One of the first studies to show this effect was conducted in part by Colorado Prevention Center, comparing heart attack rates in Pueblo, Colo., after a smoking ban was implemented with those of a nearby city that did not have a smoking ban. In Pueblo, a 27 percent decrease in heart attack rates was seen during the 18 months following the ban. These findings led cities across the U.S. to implement similar smoking bans in public places.

If there are any doubters, in Helena, Mont., a smoking ban in public places reduced the heart attack-related admissions to the hospital by 60 percent. When a judge reversed the banning ordinance, the incidence of heart attacks returned to previous levels.

The authors of this study explain that the effects of secondhand smoke are remarkably potent. Another study focusing on passive smoke exposure states that the strongest effect is seen in spouses of smokers. Second-hand smoke exposure increases a non-smoker's risk of heart attack by as much as 30 percent.

What does the Colorado Prevention Center recommend?

Both smoking and exposure to secondhand smoke increase your chance of suffering a heart attack or stroke. Smoke causes blood clots to form more easily, which can block arteries and lower the levels of "good" HDL cholesterol, which lowers the body's natural protection against heart disease.

Non-smokers who work or live around smoke, even in small amounts, are increasing their risk of heart attack and stroke. Eliminating or decreasing exposure as much as possible is recommended. If you're going to smoke, step outside. Smokers should make every effort to quit, not only for their own health, but for those around them.

The studies cited above are published in:

Journal of the American College of Cardiology, 2009 Sep.29, Meyers DG, et al.

Circulation, 2006 Oct 3, Bartecchi C, et al.

Circulation, 2009 Sept 15, Pope CA, et al.

- Submitted by Dr. Mori Krantz, Colorado Prevention Center



NO SMOKING

**IT IS AGAINST THE
LAW TO SMOKE IN
THESE PREMISES**

Local News

February Is Heart Month!

National Wear Red Day

Friday, February 5, is National Wear Red Day. Millions of people will choose to wear red and speak up against heart disease. It gives women and men everywhere a way to show their dedication and support of the cause and empowers them to take action for their health.



One in every three female deaths in the United States is due to cardiovascular disease. Fortunately, this statistic can change, and you're helping to change it by participating in **Wear Red Day**.

How can you take action? There are many ways to show your support and spread this important message.



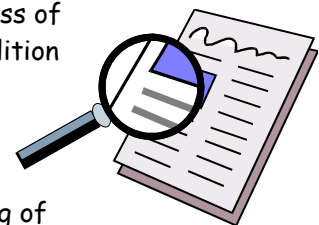
- **Wear Red**-- Speak up by wearing red on National Wear Red Day and spreading the word to others to build awareness and inspire action.
- Hold a **Wear Red Day** event at your office or within your organization on **National Wear Red Day**, or any other day. It's fun, it's meaningful and it's a great way to boost morale and build team spirit. It's also a great way to show your concern for co-workers, family members and friends, and empower them to take action and speak up against heart disease. Sign up for free downloadable tools at GoRedForWomen.org/WearRedDay.

For a listing of events in your community, please go to

<http://www.americanheart.org/>

Volunteer Opportunity

The Colorado Heart Disease and Stroke Prevention Program is in the process of developing an updated burden (status) report and state strategic plan. Coalition members who are interested in participating on a work group for either of these projects should contact Marsha Wilde, Program Manager, at marsha.wilde@state.co.us.



The work for the burden/status report will include development and editing of written materials related to defining heart disease, stroke, risk factors and other topics. The data collection and description is being done through the Epidemiology Branch at the Colorado Department of Public Health and Environment. In addition, the group will develop a distribution and dissemination plan for the report. Work will begin after March 15. Meetings will take place primarily via conference call.

Work on the state plan will begin in early April and the work will be similar to that of the burden/status report: writing and editing of materials and the development of a distribution and dissemination plan.

Marty's Story of Recovery

Marty, a Colorado native, graduated from Ranum High School in Westminster and built a career with a local municipality for more than 20 years. Marty was a music buff and was named after singer Marty Robbins, as suggested by his grandmother. He had always led a very active life; he was a softball player, swimmer, hiker and expert skier. With a large group of friends, a very large family and many social activities, Marty had a great life. But he went to work on June 16, 2008 and developed a severe headache. That day he had no idea he was having a stroke and that his life would change dramatically. After a period of hospitalization and rehabilitation, Marty was discharged to live with family members. Marty's parents, sisters and friends have been a lifeline for him. In addition to advocating for him to receive the best medical treatment, they also made contact with Easter Seals Colorado.



In September of 2008, Marty joined the Rehabilitation Services and Stroke Recovery Day Program at Easter Seals Colorado. Following his stroke, he suffered paralysis on the right side of his body. Marty's intense motivation and the help of the program's many therapists has led to his gradual and steady recovery. Through participation in the program's therapy components, his gait has improved; he walks faster; he has greater function in his right arm; and he feels that he has sharpened his cognitive skills. With practice, Marty has also become more independent in his day-to-day activities, including grooming, bathing and meal preparation. He attends more social activities with friends; he goes to ball games; and he plans to return to driving his car. Marty has a long-term goal of returning to work and once again living independently. Marty's motto is: "No successful sailor has ever come out of a calm sea." For more information, call the Rehabilitation Services and Stroke Recovery Day Program at 303-274-5415 or www.eastersealscolorado.org.

- Submitted by Carolyn Hassett, M.S., Director, Stroke Day Program, Easter Seals Colorado

Good Food

The Colorado Springs School District 11 Good Food Project promotes healthy eating by serving "farm" food rather than highly-processed food.



BREAKING NEWS

CDC to test promising practice to control hypertension

The Evaluation and Program Effectiveness Team at the Centers for Disease Control completed a process to select a hypertension intervention that is a potentially promising practice and that has the capacity and readiness for a rigorous evaluation study. An expert panel rated nominated programs using written program descriptions and programs' self-reports of success, including cost, reach and potential health impact. An evaluability assessment that included a site visit was conducted with the three top-rated programs to more fully understand their implementation and to assess the feasibility of replicating the program in other sites. The final expert panel rating resulted in the Kaiser Permanente Colorado Hypertension Management Program being selected to collaborate on a CDC-sponsored rigorous evaluation. The program consists of enhanced uses of electronic medical records, multidisciplinary health care teams, home blood pressure monitoring and ongoing support through telephone follow-up and drop-in clinics for period checks and medication titration. Kaiser currently implements the program at 16 Colorado sites and captures an extensive amount of data on the health status of its participants and the services they receive in the program.

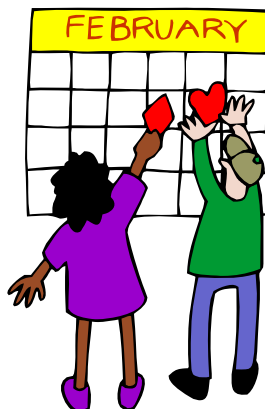


Next Steps

The work has begun with input from the CDC's Division of Heart Disease and Stroke Prevention, ICF Macro (the evaluation contractor for the project) and representatives of the Kaiser Permanente Colorado Hypertension Management Program. The evaluation study design is under development and emphasizes the use of rigorous methods to conclusively determine intervention effectiveness and support replication of the intervention in other sites if it is found to be a promising practice. The aim is to complete the evaluation by January 2011. Results will be shared with state Heart Disease and Stroke Prevention programs and partners.

Kaiser Permanente is excited to share this news and to have the opportunity to share our findings with the broader community in the interest of saving lives and improving care of individuals with hypertension.

Contacts for the Hypertension program at Kaiser Permanente Colorado are Stephanie Schneider RN MSN (stephanie.schneider@kp.org) and Acey Albert MD (Jonathan.s.albert@kp.org).



Now Available - The Community Health Worker's Sourcebook: A Training Manual for Preventing Heart Disease and Stroke



In the United States, community health workers help us meet our national Healthy People goals by conducting community-level activities and interventions that promote health and prevent diseases and disability, especially among disparate populations.

The Community Health Worker's Heart Disease and Stroke Prevention Sourcebook serves two purposes: 1) as an instruction manual for training community health workers and 2) as a reference and a resource for community health workers working with community members. The sourcebook may be used as an instruction manual by college instructors, health educators, nurses and other health care professionals at health departments, community clinics, community colleges and other organizations and agencies.

After completing the sourcebook, Community Health Workers should:

- Have a basic understanding of how the heart and blood vessels work
- Know risk factors for and causes of heart disease and stroke
- Know the warning signs of heart attack and stroke
- Know the signs of heart disease and other conditions that can lead to heart attack and stroke
- Be able to show people how to take greater control over their health

Please contact laura.scott@state.co.us for a copy of the English and/or Spanish version. Supplies are limited. The English version is also available at http://www.cdc.gov/dhdsp/library/chw_sourcebook/index.htm

State Employee Furlough Days

Due to the state budget shortfall, state employees are required to take furlough days (days off without pay). Except for critical life and safety positions, state employees will not be available the following days, and all state offices will be closed:

Friday, Feb. 12, 2010

Friday, April 2, 2010

Friday, May 28, 2010

You're Invited to Take the Lieutenant Governors' Challenge

As the fittest state in the nation, the citizens of Colorado recognize the importance of eating well and exercising regularly to improve our frames of mind, stay productive, lose and maintain our weight, and reduce our risk for chronic illness.

Our goal is not only to be the fittest state in the nation, but to defy the trend of the rapidly increasing rates of obesity that we are experiencing just as much if not more than the rest of the country. Lt. Gov. Barbara O'Brien, with the support of the American Heart Association, American Diabetes Association, AstraZeneca, Kaiser Permanente, and the Colorado Department of Public Health and Environment, is challenging the state to take advantage of all Colorado has to offer -- get outside and enjoy the variety of ways to lead an active life.

The 12 weeks of the program are designed to be a starting point for your introduction, continuation, or improvement to living a healthier life. You

choose which activities you enjoy and that best fit into your busy schedules. Points are awarded on the basis of what that activity is and how long you are moving - the more intense the activity, the higher the point value. It is up to you, as the participant, to keep track of your activities.

Depending on the number of points you log during the 12-week period, you can be eligible for a gold, silver or bronze medal.

LT. GOVERNORS' CHALLENGE Your HEART is in your HANDS



Medal Levels

Bronze Medal: 140—239 points

If you walk briskly for 30 minutes, three times per week you can achieve 144 points in three months.

Silver Medal: 240—339 points

If you walk briskly for 30 minutes, five times per week you can achieve 240 points in three months.

Gold Medal: 340—500 points

If you walk briskly for 60 minutes, four times per week, or jog 30 minutes, five times per week you can achieve at least 350 points in three months.

Lt. Governor O'Brien recognizes that children, as well as adults, are at just as much risk for cardiovascular disease, diabetes and other complications of obesity later in life if they continue down the road to a more sedentary lifestyle. In the last 20 years, childhood obesity has more than doubled while teen obesity has tripled. Currently, one in 10 children in Colorado are considered overweight. Schools and families can help encourage kids to increase their daily physical activity inside and outside of school hours.

To register, go to <http://www.ltgovernorschallenge.us>

- Submitted by Robin Nagel, Health and Wellness Coordinator, Office of Lt. Gov. Barbara O'Brien



National Updates

One in Five American Youth has an Abnormal Lipid Level

Twenty percent of 12- to 19-year-olds has at least one abnormal lipid level, potentially putting them at increased risk of developing heart disease. The lipids of interest include low-density lipoprotein, or "bad," cholesterol (LDL-C); high-density lipoprotein, or "good," cholesterol (HDL-C); and triglycerides.

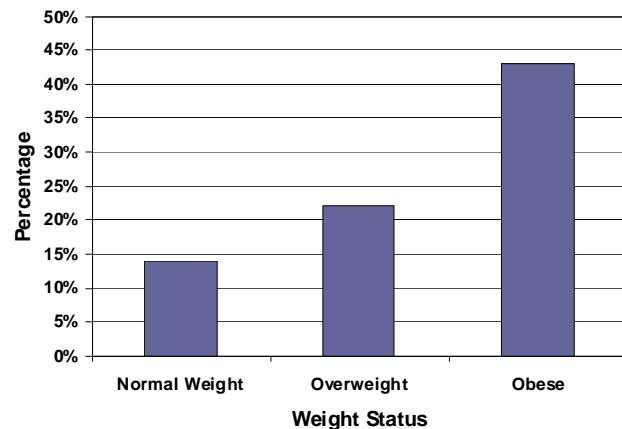
A new study in CDC's *Morbidity and Mortality Weekly Report* used data for 1999-2006 from the national Health and nutrition Examination Survey (nHanES), an ongoing survey designed to assess the health and nutritional status of adults and children in the United States.

Typically, overt heart disease develops in adulthood, but its risk factors, such as abnormal lipid levels and elevated body mass index, often emerge during childhood and adolescence.

Obesity adds to the concern

An additional risk factor for heart disease — obesity — increases the likelihood of having abnormal lipid levels.

Figure. Percentage of youth aged 12 to 19 years with at least one abnormal lipid level, by weight status, NHANES 1999-2006



- Researchers found that 43 percent of obese and 22 percent of overweight youth had at least one abnormal lipid level, significantly higher than normal weight youth (14%). (See figure.)
- Screening for abnormal lipid levels and risk for heart disease is an urgent public health concern.

Differences in lipid levels by sex, age and race/ethnicity

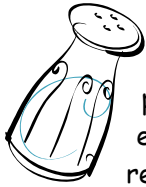
- More boys (24%) than girls (16%) had at least one abnormal lipid level.
- Fourteen- and 15-year-olds (9%) and 18- and 19-year-olds (10%) were more likely to have low HDL-C levels than 12- and 13-year-olds (5%).
- More non-Hispanic white youths had low levels of HDL-C (8%) or high triglycerides (12%) than non-Hispanic black youths (5% and 4%, respectively).

Importance of screening guidelines and lifestyle interventions

- Clinicians should be aware of lipid screening guidelines and recommended interventions for youth who are overweight or obese.
- Therapeutic lifestyle interventions that aim to improve diet and increase physical activity may help youth achieve healthy lipid levels and decrease their risk for heart disease.
- To improve the impact of therapeutic lifestyle interventions, clinicians may want to refer youth with abnormal lipid levels to nutritional counseling, community fitness programs and school-based lifestyle programs where available.

To view the entire article, [click here](#).

World Salt Awareness Week



To increase public awareness of the dangers of consuming too much sodium, the Centers for Disease Control (CDC) and the state Division for Heart Disease and Stroke Prevention is promoting [World Salt Awareness Week](#) Feb. 1-7. This annual event, sponsored by the World Action on Salt and Health, has recently been added to the official health observations calendar promoted by CDC. This year's theme is focused on "Salt and Your Health." People and groups around the world will adopt this theme and promote salt awareness in various ways.



The "Too Much Salt Can Be Risky" public service announcement is now live and can be found on the CDC Radio and CDC Podcast homepage. It can also be directly accessed through the following URL: <http://www2c.cdc.gov/podcasts/player.asp?f=760255>.

[Medication and Dietary Non-Adherence and Heart Failure](#)

This article from the American Heart Journal explains that non-adherence is a common precipitant for heart failure and how important it is to stick with the medications and low salt diet.

CDC information of interest

Click on title for more information.

[Increasing Kids Awareness of Stroke Beneficial to Parents](#)

An article published in *Health Promotion Practice*, "Kids Identifying and Defeating Stroke (KIDS): Development and Implementation of a Multiethnic Health Education Intervention to Increase Stroke Awareness among Middle School Students and their Parents," showed that stroke awareness knowledge improved.



[Higher Salt Consumption Raises Heart Disease Risks](#)

A systematic review and meta-analysis published November 25 online in *BMJ* (*British Medical Journal*) concluded that high salt intake is associated with a significantly increased risk of stroke and cardiovascular disease. The article notes that due to imprecision in measurement of salt intake, the effects are likely to be underestimated.

[Doctor and Pharmacist Teams Increase Blood Pressure Control](#)

A small study published in the Nov. 23 issue of *Archives of Internal Medicine* found that in a group of 402 people treated for high blood pressure, a doctor-pharmacist team with the pharmacist trained to measure participants' blood pressure and adjust the kind and dosage of drugs prescribed, 64 percent of participants achieved goal blood pressure levels. In the control group, 30 percent achieved blood pressure level control.

[New Heart Attack Treatment Guidelines Focus on Coordination](#)

New guidelines focusing on integrated systems for patients with STEMI will be published Dec. 1 in *Circulation* and the *Journal of the American College of Cardiology*. The main recommendations include procedures to identify patients before they get to hospitals, moving a patient directly to a hospital where immediate angioplasty (PCI) is available and stenting when the left main coronary artery is blocked.

[Smoking Doubles the Risk for Heart Disease](#)

A study published in the Nov. 23 issue of *Circulation* determined that current smokers were 2.26 times more likely to die from heart disease than were former or non-smokers. The analysis included 12,152 American and European male and female smokers who were followed for three years. There was no significant difference for former smokers in the risk for dying of heart disease, but cancer risk was still increased.



[Obesity is a Leading Risk Factor for Left Atrial Enlargement during Aging](#)

Data from a prospective study over 10 years showed that left atrial enlargement, which increases the risk of atrial fibrillation, resulted from both hypertension and obesity. The highest incidence was in those with both obesity and high blood pressure. The results appear in the November 17 issue of the *Journal of the American College of Cardiology*.



[Migraine with Aura Increases Risk for Stroke for Women](#)

Researchers from Johns Hopkins presented a study at the American Heart Association meeting, reporting findings that people who have migraines have more than double the risk of ischemic stroke and the risk is even higher for women who suffer migraines with aura (visual disturbances).

[People with Serious Mental Illness More Likely to Die from Cardiovascular Disease](#)

A study appearing in the journal *General Hospital Psychiatry*, Nov-Dec 2009, found that people with schizophrenia were 17 percent more likely to die of heart disease, and those with other psychotic disorders were at 30 percent more risk and are likely to die decades earlier than people without mental illness. Smoking and not exercising were contributors, along with diabetes. However, despite these factors, researchers found that patients in this VA-based study were still more likely to die from heart disease.

[Never Too Old to Control Blood Pressure](#)

A recent Cochrane review on treatment of hypertension in those over 60 concluded that treatment reduces deaths, strokes and disability. The highest benefit comes from thiazide diuretic therapy for those from 60 to 80 years old, and for those over 80 years old, two drugs in low doses. The review is titled *Pharmacotherapy for Hypertension in the Elderly*. *Cochrane Database of Systematic Reviews* 2009, issue 4.



[Some blood pressure drugs may cut risk of dementia](#)

Medicines commonly used to treat high blood pressure and heart disease may cut the risk of developing Alzheimer's disease and dementia, U.S. scientists said on Wednesday.



[Dementia Linked to High Blood Pressure Years Earlier](#)

High blood pressure may put women at greater risk for dementia later in life by increasing white matter abnormalities in the brain, report researchers from the University of Pittsburgh Graduate School of Public Health in a study published online in the *Journal of Clinical Hypertension*.



Resources

[Unified Health Communication 101: Addressing Health Literacy, Cultural Competency, and Limited English Proficiency](#)

This is a free online learning experience designed to help health professionals improve their patient communication skills, increase their awareness and knowledge of factors that affect their communication with patients, and implement patient-centered communication practices. The course, developed by the Health Resources and Services Administration, comprises five modules and is estimated to take a total of five hours to complete. The course may be completed at the user's own pace and may be taken for credit (CEU/CE, CHES, CME, and CNE) or not for credit.

[Progress Report to the Nation's Employers: How Health Plans Are Improving Cardiovascular Disease Care](#)

The report shows how employers have used eValue8, a national standardized request for information, to assess the performance of local health plans. Prevention and identification of cardiovascular disease, disease and pharmacy management, along with plan and physician performance improvement, were items assessed.

[Jane - Journal/Author Name Estimator](#)

Jane is an experimental service that can be used to find journals to publish a paper in, and become aware of new journals in an area of interest.

[Promoting Preventive Services for Adults 50-64: Community and Clinical Partnerships](#)

A new report from the Healthy Aging Branch in the Division of Adult and Community Health found that too few adults are getting preventive screenings, including for cholesterol levels. Only 25 percent of adults between the ages 50 and 64 are getting recommended preventive screenings.

Link to the report [PDF](#).

[New America's Health Rankings Report](#)

The 20th Anniversary edition of America's Health Rankings is online, noting a significant increase in preventable diseases, with costs for treatment of chronic diseases, including heart disease, cancer, and diabetes estimated at \$1.8 trillion. The Web site includes e-Rankings, a searchable database with data for each state and the nation enabling comparisons with rates from 20 years ago, a Healthy Actions Center with tips, tools and programs, and an Obesity Cost Calculator. [PDF](#) version of the report.

News content is selected solely on the basis of newsworthiness and potential interest to readers. The Centers for Disease Control (CDC) and the U.S. Department of Health and Human Services (DHHS) assume no responsibility for the factual accuracy of the items presented. The selection, omission or content of items does not imply any endorsement or other position taken by CDC or DHHS. Opinions expressed by the original authors of items included in the *News*, or people quoted therein, are strictly their own and are in no way meant to represent the official position of CDC or DHHS. References to products, trade names, publications, news sources and non-CDC Web sites are provided solely for informational purposes and do not imply endorsement by CDC or DHHS.



Heart and Stroke Healthy Community Progress Report

The Heart and Stroke Healthy Community Initiative is beginning the "pilot" phase of the program. Two communities are currently being explored as potential pilot sites: Colorado Springs and Kit Carson County are in the early stages of development and will be having their first community meetings in February.



Two new co-chairs have been named to the Heart and Stroke Healthy Community steering committee. They are Monica Buhlig from Kaiser Permanente and Lisa Jensen from the Colorado Prevention Center. The steering committee will be recruiting new members in the next two months. If you are interested in participating on the steering committee and would like more information regarding the role of the committee and the responsibilities please contact Michelle Hubbard-Pitts at mihubbar@cdphe.state.co.us.



Please check for new information on the Heart and Stroke Healthy Communities initiative on our Web site: <http://www.cdphe.state.co.us/pp/cvd/heartandhealth.html>. An e-mail message will be sent to all coalition members as the information is placed on the Web site.

SAVE THE DATE!

Wednesday, May 26, 2010

Colorado Heart Disease and
Stroke Prevention Program
Coalition Meeting

Time and place to be determined

The information provided in this document is meant to inform and should not be construed as medical advice; always consult your doctor.