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APRIL/MAY 2022



HEALTH

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Protect Your HEART

Reimagine Heart-Healthy Living

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Art OF THE Wish

AN EXHIBIT CELEBRATING THE WISHES OF ELDERS

Advancing the health and dignity of all persons

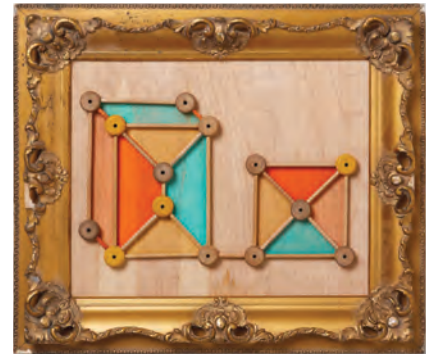
Protecting the interests of those whose voices have not been heard or heeded



*"I wish every home had a piano.
Music fills your life with color."*



*"I wish every artist
would know how important
they are to the world."*



*"I wish for meaningful connections,
it makes one feel validated,
it makes one feel whole."*

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Contents



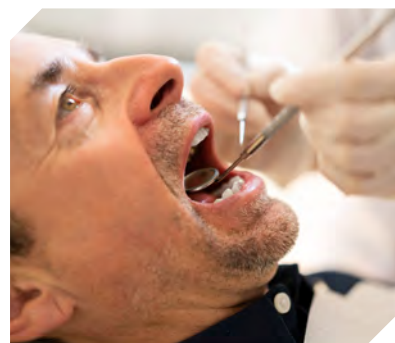
Photo: Bigstockphoto.com

COVER STORY

Reimagine Heart-Healthy Living

By Chris Ryan, Contributing Writer

Learn what contributes to a healthy heart and what harms it. Maintaining good heart health means not ignoring symptoms and knowing what places you at risk of heart disease and taking preventative steps to keep your heart in good health.



READ THIS ARTICLE ONLINE

Is There a Link Between Gum Disease and Heart Disease?

Poor dental health increases the risk of a bacterial infection in the bloodstream. More research is needed to determine if there is a direct link to heart disease. Read the full story online at kcourhealthmatters.com

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MENTAL HEALTH

8

Want a Less Stressful Life?

By Dr. Robert Lee Hill

Community Consultant

We all deal with some type of stress from time to time. Discover activities you may not have considered to manage it.

OUR KIDS MATTER

10

Babies' Hearts Matter

Screening for critical congenital heart defects help identify babies with a heart condition before they leave the birth hospital.

FOOD + NUTRITION

14

Fiber-rich Foods Are Great for Your Heart

By Jeanene Dunn, OHM Staff

There are enormous benefits to incorporating fiber into our diets every day. Learn what it does for your body.

MEDICINE

20

Your Heart's Relationship with Cholesterol

By Tenille L. Lawson, PharmD, BCPS

If you have high cholesterol, you may not realize you are at higher risk for heart disease, especially if you have diabetes, obesity, or a family history of heart disease.

23

Anatomy of a Heartbeat and Heart Glossary

Do you know what your heart really looks like and how it works? Learn why protecting this magnificent organ is central to our health.



A HEALTHIER HEART STARTS WITH YOU

Hearth disease is the leading cause of death in the United States. Poor nutrition and unhealthy eating, lack of regular exercise, stressful environments, smoking, alcohol and substance use disorders and more, can all lead to heart disease.

It cannot be emphasized enough that our lifestyle choices and family history have a powerful impact on our heart health. Reimagining a heart-healthy life means we adopt “very intentional” lifestyle routines and make necessary changes to protect ourselves from heart disease and other preventable conditions such as diabetes.

In this edition, we share some basics about the heart: we explain what cholesterol is and how bad cholesterol affects the heart; how fiber-rich foods contribute to a healthy heart; and share some basics about the anatomy of the heart and provide a glossary of terms used to describe the heart and some of its conditions.

This year let's be intentional about our heart health. Make an appointment for an annual checkup (or for some health issue that might be of concern to you right now), and make a list of questions you want to ask your doctor. When your laboratory results come back, ask what the numbers indicate about your health.

Protect your heart. Stay safe and healthy. And thank you for allowing us to bring you timely and relevant health news and information for more than 17 years!



To your health,

Ruth Ramsey, Publisher and CEO

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WE WOULD LOVE TO HEAR FROM YOU.

Send us your suggestions for health topics you would like to see in *Our Health Matters*. Also share what you enjoy about the magazine.

Email us at
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- 2012 Alpha Phi Alpha Fraternity, Inc. Beta Lambda Chapter Outstanding Business Person of the Year
- 2011 Delta Sigma Theta "Woman of Courage" award for *Our Health Matters'* impact on health education
- 2011 Mid-American Minority Supplier & Development Council Nominee for Minority Supplier of the Year
- 2007 Black Health Care Coalition Media Award
- 2007 Missouri Public Health Association Media Award
- 2006 Kansas City Chronic Disease Association Health Media award for providing a valuable service to the community



Meet Dr. Marvia Jones, PhD, MPH Director
Kansas City Health Department

EXPERIENCED. INNOVATIVE. FOCUSED.

The Kansas City MO Health Department is happy to introduce Dr. Marvia Jones as the newly appointed Director for the Kansas City Health Department. Dr. Jones replaces Rex Archer, who retired in August 2019 after 23 years of service to the City.

Dr. Jones brings 15+ years in Public Health experience, with special interest in violence prevention and health policy, both of which were honed during her time at the Centers for Disease Control and Prevention. Jones earned both her Master of Public Health and her PhD from the University of Kansas.

"My vision for the department is to continue developing innovative community engagement and responsive strategies to meet the public health needs of the diverse communities we serve. This may involve looking outside of traditional measures to devise better solutions. Community engagement demonstrates to residents that they have value and that their voice is respected. We want residents to know that they are our partners."

KC HEALTH IQ'S GOALS:

- Increase COVID-19 vaccination numbers in Kansas City
- Increase and improve healthcare provider communications regarding COVID-19 with their patients
- Improve organizations' ability to communicate in clear, plain language
- Promote COVID-19 prevention strategies
- Partner with community organizations to encourage health-focused events
- Build community capacity through education and empowerment

KC HEALTH IQ PROVIDES:

- COVID-19 materials
- Health Education presentations for community organizations
- Printed materials (5 Facts about COVID-19, Vaccine Hesitancy Conversation Tips, How Vaccines Work)
- Health Literacy Workshops

To learn more about Dr. Jones and the KCMO Health Department's work, visit www.kcmo.gov/city-hall/departments/health

NEW PROGRAM BUILDS TRUST AND COMMUNITY ENGAGEMENT

The Kansas City Health Department has launched a new program called **KC Health IQ** under the Community & Family Health Education Division. KC Health IQ addresses health disparities during the COVID19 pandemic addressing socially disadvantaged racial, ethnic, and other population groups, and communities.

"We are prepared to work with residents to understand their concerns and provide them with trusted and effective solutions especially when our community is facing a crisis or pandemic. By working together we protect our community's health and foster genuine trust of our public health mission—optimal health for all residents."

— Dinyelle Baker, Program Manager,
Community & Family Health Education-KC Health IQ Team,
City of Kansas City, Missouri Health Department.



Public Health

If your organization or group would like the support of the KC HEALTH IQ Community Engagement Team, please contact us at HealthIQ@kcmo.org

5 facts about the COVID-19 vaccine



1

The vaccine cannot give you COVID-19

The vaccine doesn't contain the live virus that causes COVID-19, so it can't give you the disease.

If you feel sick after the vaccine, it's likely a sign your body is learning to protect itself against the virus.



Side effects from the vaccine, such as headache or fever, usually go away in 1-2 days. Symptoms from COVID-19 can last weeks or even months.

2

The vaccine will not change your DNA

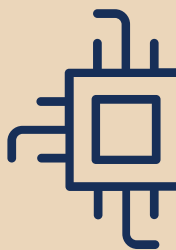
The vaccine never enters the core of your cells, which is where your DNA is.



3

The vaccine doesn't contain microchips

Vaccines are made to fight disease, not to track your movement.



4

The vaccine doesn't cause problems getting pregnant

There's no evidence that any vaccines, including COVID-19 vaccines, cause fertility problems in women or men.



5

You should get vaccinated, even if you had COVID-19

The vaccine is stronger and lasts longer than the defense your body built from having the virus.



Call 311 to ask your vaccine questions.

Scan this to schedule an appointment.



Want a Less Stressful Life?

Managing stress is a major focus for people during this time of pandemic threat, economic uncertainty, political tensions, international conflict, and spiritual turmoil. While most of these concerns may lie beyond our personal control, we all can more effectively manage stress in ourselves and our families. We all can't do everything, but we each can do something.

One of the simplest and most effective ways of decreasing one's stress also applies to managing stress in our families: Every day, do something good for your body, your mind, and someone else. It may not be possible for

**EVERY DAY, DO SOMETHING
GOOD FOR YOUR BODY, YOUR MIND,
AND SOMEONE ELSE.**

every member of the family to do all three every day, but a weekly, noncompetitive family check-in can be inspirational.

Once, while participating in a rowing class held at the junction of the Kansas and Missouri rivers, I gained a key insight about increasing the presence of endorphins (the "feel good" hormones) in our bodies and its effect on groups. The rowing instructor was disagreeable, and

on more than one occasion, was actually mean to some members of the class. None of us quit the class, and I returned home from every session relaxed and invigorated. When I asked a psychologist friend why I was feeling so good when the class atmosphere was so bad, he remarked that I had experienced most of the characteristics for increasing endorphin rush: (1) activities with others; (2) physical exertion; (3) musicality (instrumental, vocal, or nature sounds); and (4) breaking away from one's usual routine. Activities with others, regular exercise, music in all of its forms (including playing an instrument or singing in a choir), a vacation or short day-trip to experience something new—all these can lead to managing stress more effectively.

Stress of any and all kinds is impossible to avoid. It comes with our membership cards in the human family. But managing stress is not only possible but attainable.



By Dr. Robert Lee Hill
Community Consultant





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that work for all of us.

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BABIES' HEARTS MATTER

Congenital heart defects (CHDs) are conditions that are present at birth and can affect the structure of a baby's heart and the way it works. They are the most common type of birth defect. As medical care and treatment have advanced, infants with congenital heart defects are living longer and healthier lives. Many are living into adulthood.

Screening for heart defects

Critical Congenital Heart Defects (CCHD) Screening can detect heart defects in newborns that often have no other symptoms. It is a simple bedside test to determine the amount of oxygen in a baby's blood. Low levels of oxygen in the blood can be a sign of a congenital heart defect. CCHD screening is a part of the national Recommended Uniform Screening Panel (RUSP).

Importance of Newborn Screening for Critical Congenital Heart Defects

Screening for critical congenital heart defects (critical CHDs) can help identify babies with a critical CHD before they go home from the birth hospital. This

allows these babies to be treated early and may prevent disability or death early in life.

Importance of Diagnosis Before Leaving the Hospital

Early detection is important. Some babies with a critical CHD appear healthy at first and may be sent home before their critical CHD is detected. Newborn screening for critical CHDs is a tool that works with prenatal diagnosis and physical exams after birth to improve detection of critical CHDs.

Newborn screening for critical CHDs involves a simple bedside test called pulse oximetry, which estimates the amount of oxygen in a baby's blood. Low levels of oxygen in the blood can be a sign of a critical CHD.

If a critical CHD is diagnosed before a baby leaves the hospital, doctors can provide care and treatment that may prevent later health problems or even death.

Source: Centers for Disease Control and Prevention, [CDC.gov](https://www.cdc.gov)



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University Health Truman Medical Center
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Kansas City, MO 64108



University Health Lakewood Medical Center
Lakewood Family Birthplace
7900 Lee's Summit Road
Kansas City, MO 64139



JADA LARGE

Diverse Talent for Healthcare Leadership

Our Health Matters (OHM) previously featured two articles highlighting Kansas Citian Jada Large as a scholar of the Bluford Healthcare Leadership Institute (BHLI), whose mission is to eliminate disparities in healthcare by cultivating a pipeline of diverse talent for healthcare leadership.

We asked Jada about her professional journey since graduating from Emory University in Atlanta, GA in May 2021 and participating in a BHLI internship at Carilion Clinic in Roanoke, VA. Jada recently joined John Snow, Inc. (JSI), a public health consulting firm.



Jada Large with Nancy Howell Agee, President and CEO, Carilion Clinic



"IT HAS BEEN SO REWARDING TO SEE JADA'S GROWTH, DEVELOPMENT AND MATURITY AS A YOUNG PROMISING PROFESSIONAL. I FORESEE DECADES OF CONTINUOUS SUCCESS IN HER FUTURE THAT WILL FAVORABLY IMPACT THE COMMUNITY SHE SERVES."

**—JOHN BLUFORD,
PRESIDENT AND FOUNDER
BLUFORD HEALTHCARE LEADERSHIP INSTITUTE**

OHM: What were your main takeaways from your internship?

JADA: As I spent time in different hospitals and departments across Carilion's health system, I recognized that the culture of an organization truly begins at the top. Secondly, I gained a deeper understanding of how the different pieces of healthcare fit together to form a successful health system. My internship exposed me to clinical, administrative, and supportive aspects of healthcare that are all essential for patients to receive quality care.

OHM: What did you learn about advancing health equity?

JADA: Advancing health equity is complex and multifaceted. Solutions have to address sources of inequity that occur both in and outside of the hospital. Additionally, I learned how geography creates a unique challenge to minimizing health disparities among the rural populations that hospitals such as Carilion serve.

OHM: What were your main leadership lessons learned?

JADA: My main leadership takeaways were that it is important to build and maintain relationships and that approachability and transparent, inclusive communication are crucial to ensuring that people feel supported and valued.

OHM: What are your responsibilities at John Snow, Inc. (JSI) a public health consulting firm?

JADA: I am responsible for supporting a variety of projects related to U.S. public and community health issues. I provide research and administrative support for project teams by conducting environmental scans and literature reviews, presenting research results, and coordinating logistics for project activities. My work at JSI is driven by my passion to reduce health inequities and to ensure that individuals can access resources they need to achieve optimal health.

OHM: What are your main takeaways from participation in the BHLI?

JADA: I am so appreciative of the guidance that the BHLI has provided throughout my professional journey. Prior to the BHLI, all I knew was that I wanted to impact healthcare disparities in a non-clinical role. Through the BHLI I learned about a variety of non-clinical careers in the health field and most importantly, I learned about the impact one can make by holding a position of leadership. Everyone's path to leadership is different. I have become a more confident professional and leader as a result of my participation in the BHLI. To learn more about BHLI, visit www.blufordinstitute.org

PONDER THIS ...

A TALENT POOL FOR HEALTHCARE LEADERSHIP, RIGHT HERE IN KANSAS CITY AND BEYOND!



Left to right: Timothy Nguyen, Lee's Summit, MO; Avery Pardue, Olathe, KS; Medinah Rashid, Decatur, GA; Jada Large, Kansas City, MO.

At the **Bluford Healthcare Leadership Institute** we develop culturally competent, underrepresented scholars for future leadership roles.

For more information visit
www.blufordinstitute.org



BLUFORDHEALTHCARE
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Fiber-rich Foods Are Great for Your Heart

Whole grain foods are one delicious option.

By **Jeanene Dunn**, OHM Staff

Mary Jo Mason, RDN, CDCES, of Saint Luke's Health System Kansas City, is a certified diabetes specialist and dietitian nutritionist working with Kansas City, Missouri city employees. She works one-on-one with clients to educate them about healthy food choices that can help maintain good health and/or better manage health concerns.

If you are not sure if a food contains whole grains, be sure to read the food label. Breads can be the most confusing. The words “whole grains” should appear first on the list of ingredients on the food label.

Fiber intake is an important part of the conversation. “I discuss their current eating habits and together, we develop a healthy nutrition plan,” Mason says. “We often discuss the importance of eating foods rich in fiber.”

“It is common for clients to have heart disease in addition to diabetes. This is because diabetes puts a person at higher risk for heart disease and elevated cholesterol,” Mason explains. “What we eat impacts our total health. That’s why incorporating fiber into the diet every day is so important to help minimize health risks.”

Fiber-rich foods have many health benefits

People commonly associate fiber with helping to eliminate constipation. That is only one way fiber-rich foods help our bodies work well. Incorporating fiber into the diet can also help you to:

- Manage your weight
- Maintain good gut health
- Lower your colorectal cancer risk
- Control your blood sugar levels
- Decrease cholesterol

Mason says fiber-rich foods take longer for the body to digest, which helps us to feel full longer and more satisfied. This causes us to eat less, says Mason.

Add whole grains to your diet

Whole grains are a great source of dietary fiber that are found in many foods. They contain additional vitamins and nutrients that our bodies need. Foods that contain whole grains include oats, corn, barley, and brown rice, to name a few.

The American Heart Association recommends choosing products that contain at least 51% whole vs. refined grains.

Examples of a serving of whole grains include:

- 1 slice of whole-grain bread (100% whole wheat bread)
- 1 cup of ready-to-eat, whole-grain cereal
- 1/2 cup of cooked, whole grain cereal (oatmeal), brown rice or wheat pasta
- 5 whole-grain crackers

If you are not sure if a food contains whole grains, be sure to read the food label. Breads can be the most confusing. The words “whole grains” should appear first on the list of ingredients on the food label.

How much fiber is needed in the daily diet?

The general recommendation for women is about 25gms per day and the

recommendation for men is 35-38gms per day. For kids over the age of 5, the recommendation is to add 5gms to their age to find the target. For someone who is 10 years old, for example, their goal would be 15 gms (10 + 5).

“If you need to increase your fiber intake, do so slowly and drink lots of water,” says Mason. “The recommended daily water intake is 64 oz. or half of your body weight in ounces.”

For clients managing their weight and increasing their fiber intake, Mason recommends:

- Use an app to track your activity and what you eat in a typical day.
- Calculate how much fiber you need and slowly increase by 5 grams per day.

- Consider adding one-two tablespoons of beans to a salad.
- Add a tablespoon of chia seeds or flaxseed to a smoothie, yogurt or any other food that will help moisten the seeds.

Mason cautions that increasing fiber too quickly may cause digestive issues. Gradually increasing intake is recommended. If you are not sure that you are getting the proper amount of fiber in your diet, talk to your healthcare provider.

Reimagine Heart Healthy Living!

Always consult with your medical provider for any diet or nutritional needs assessments.

Office of Minority Health

Missouri Department of Health and Senior Services

Michael G. Parsons
Governor

Paula F. Nickelson
Acting Director

Joseph Palm
Chief

The Office of Minority Health:

- Monitors the programs in the Missouri Department of Health and Senior Services for their impact on improving health equity for African American, Hispanic American, Alaskan/Native American and Asian/Pacific Islander American populations.
- Advises the director of the Department of Health and Senior Services on all matters that affect health equity for all Minority populations.

The Office of Minority Health is responsible for:

- Participating in the health education, design and implementation of culturally sensitive and competent awareness programs that reduce the incidence of disease in Minority populations and increases the knowledge of available resources.
- Analyzing federal and state legislation for the impact on the health status of Minority populations.

- Developing programs that can attract other public and private funds.
- Assisting in the design of evidence-based programs and evaluations targeted specifically toward improving the health status and promoting health equity for all Minority populations.
- Providing necessary health information, data, and staff resources to the Missouri Minority Health Regional Alliances and minority communities.
- Collaboration with community and professional organizations, community health centers, universities and colleges, and federal, state and local public health agencies.

The Office of Minority Health supports:

- Six regional minority health alliances (Northwest, Northeast, Southwest, Southeast, Eastern, and Central).
- Community-based organizations and activities.

- Senior services outreach.
- Educational and capacity building seminars and trainings.
- Faith-based communities and initiatives.
- Technical and advisory assistance related to minority health issues.



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A photograph of a woman with dark, curly hair smiling and hugging a young girl with similar hair. The woman is wearing a grey and white striped shirt, and the girl is wearing a white patterned shirt. The background is softly blurred.

Protect Your **HEART**

Reimagine Heart-Healthy Living

According to the Centers for Disease Control and Prevention (CDC)

- Heart disease is the leading cause of death for men, women, and people of most racial and ethnic groups in the United States.
- One person dies every 36 seconds in the United States from cardiovascular disease.
- About 659,000 people in the United States die from heart disease each year—that's 1 in every 4 deaths (Heart Disease and Stroke Statistics 2021 Report: American Heart Association).

Men, women and, more rarely, children experience heart disease. In the United States, more men and women die from it than from any other cause.

Coronary Artery Disease (Clogged Arteries) the Leading Cause

In adults, the most common heart problem is coronary artery disease. It can create blockages in the vessels that carry oxygen-rich blood to the heart. Blockages can cut off this blood supply, possibly leading to a heart attack.

In children, heart failure usually results from defects present at birth. Other causes include enlargement of the heart, which is frequently inherited, and diseases of the heart muscle. Coronary artery disease is very rare in children.

Heart Attacks Can Look Different in Men and Women

In the movies, a man having a heart attack grabs his chest and collapses. This image has led to the term “Hollywood heart attack,” where a man reacts to the intense pressure and pain. But that kind of pain does not happen as often in women, so they might not know they are having a heart attack, and they might wait too long to seek treatment. The delay is an important reason more women than men die from a heart attack.

Women can experience heart attack symptoms such as shortness of breath, indigestion, nausea and vomiting, jaw pain, elbow pain and overwhelming



Tracey Stevens, MD, cardiologist, Mid America Heart Institute

fatigue, says Tracey Stevens, MD, a cardiologist with Mid America Heart Institute. For women, “any symptom from the waist up can be a heart attack,” she says. Men, too, can have these symptoms, but they are more likely than women to

experience the crushing chest pain.

Dr. Stevens adds that the leading cause of heart attacks in women under 50 is not coronary artery disease but a coronary artery dissection, or tear in the artery wall. Nine out of 10 coronary artery dissections occur in women. They commonly happen post-partum (after giving birth) and can be the result of a genetic abnormality or uncontrolled high blood pressure.

Heart Attack First Aid

If you or someone around you experiences a heart attack, the first thing to do is call 911. “Don’t feel bad about calling 911,” says Ammar Habib, MD, an interventional cardiologist with AdventHealth Shawnee Mission. “The faster you get care, the better you’re going to do.”

Perhaps the most important thing you can do in case of a heart attack is know the symptoms, both severe and more subtle, Dr. Habib says. Even if the symptoms seem less dramatic, call 911. Minutes matter. While the ambulance is on the way, you can take some action. Dr. Habib recommends that the person experiencing the

heart attack:

- Have people around to help
- Sit down and rest to reduce pressure on the heart.
- Take aspirin



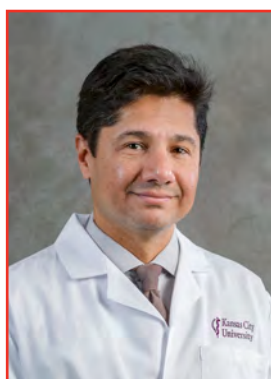
Ammar Habib, MD, interventional cardiologist, AdventHealth Shawnee Mission

- If you have been prescribed nitroglycerin and have already taken one, wait a few minutes and if the pain continues, take one more.

If a defibrillator is available, it can determine whether a shock is needed to restore heart rhythm. The machine guides the user through the process.

What to Expect from a Heart Checkup

Primary care doctors make heart health part of any physical exam. If you're over 20 and symptom-free, your doctor will take your health history and check your blood sugar, cholesterol and blood pressure, among other factors, and also use a risk calculator to assess your risk of heart disease. Your doctor will use



Gautam Desai, DO, professor and chair, Department of Primary Care, Kansas City University

information to determine if you need further testing.

Gautam Desai, DO, Professor and Chair of the Department of Primary Care at Kansas City University, says that family history is the most important risk factor. For example, he says, "Fainting is a red flag." It is important that your doctor know whether you or anyone in your family has experienced fainting.

Physical exams and testing can make a real difference if you take the results to heart and follow your doctor's advice concerning your lifestyle. As Dr. Desai puts it, "Most people can change their future and live longer with diet and exercise."

What you can do to support a heart-healthy life

The best thing you can do to keep your heart healthy is to take charge of its care. Get regular checkups, be aware of the symptoms that signal a heart problem, eat healthy foods, exercise and stop smoking. This is the formula for a healthier and longer life.

Sources: health.gov/myhealthfinder/topics/health-conditions/heart-health/keep-your-heart-healthy, MedlinePlus, National Institutes of Health

Tips for Keeping Your Heart Healthy

Reimagining heart-healthy living means not ignoring symptoms but knowing your risk of heart disease and taking steps to keep your heart in shape. Here are some recommendations.

Know Your Cardiac Disease Risk Factors

Some people are more likely to develop heart disease than others. The risk factors include:

- Family history of heart disease
- High cholesterol
- High blood pressure
- Diabetes
- Smoking
- Obesity
- Too little physical activity
- Unhealthy diet
- Over age 55 for women and 45 for men

Of course, having these risk factors does not mean you will have heart disease or a heart attack. However, they are an added incentive to take care of your heart health.

Follow These Heart-healthy Guidelines

It is not hard to live a heart-healthy lifestyle, but you do need to pay attention to a few suggestions:

- Have your cholesterol checked every five years, at least; and more frequently when elevated
- Regularly check your blood pressure; know your numbers
- Ask your doctor if you should take aspirin daily
- Learn about any family history of heart problems
- Adopt healthy eating habits with foods that are low in saturated fats, salt and sugar and high in fiber
- Use moderation when drinking alcohol
- Get exercise, such as walking or bicycling, that raises your heart rate for at least 150 minutes a week
- Maintain a healthy weight
- Do not smoke or be around second-hand smoke
- Reduce stress

KNOW YOUR HEART HEALTH RISKS

A person with diabetes has a 2- to 4-fold increased risk of cardiovascular disease, and more specifically, an increased risk for a heart attack, heart failure, stroke, loss of a leg due to poor circulation, and hypertension (high blood pressure). The risks are much higher in people with diabetes who smoke cigarettes. Other factors, such as obesity and inactivity,

LIFESTYLE CHANGES SUCH AS STOPPING SMOKING, LOSING WEIGHT, REDUCING SALT INTAKE, AND EXERCISING ARE VERY IMPORTANT, AS WELL AS CONTROLLING BLOOD PRESSURE AND BLOOD GLUCOSE LEVELS WITH MEDICATIONS.

also add to the risk to life and limb. The good news is that there is much we can do to reduce these risks, both to prevent heart disease in the first place and to protect the life of those who already have one or more of the cardiovascular conditions.

Lifestyle changes such as stopping smoking, losing weight, reducing salt intake, and exercising are very important, as well as controlling blood pressure and blood glucose levels with medications. There are newer medications available that are helpful for blood glucose control and also protect the heart and kidneys.

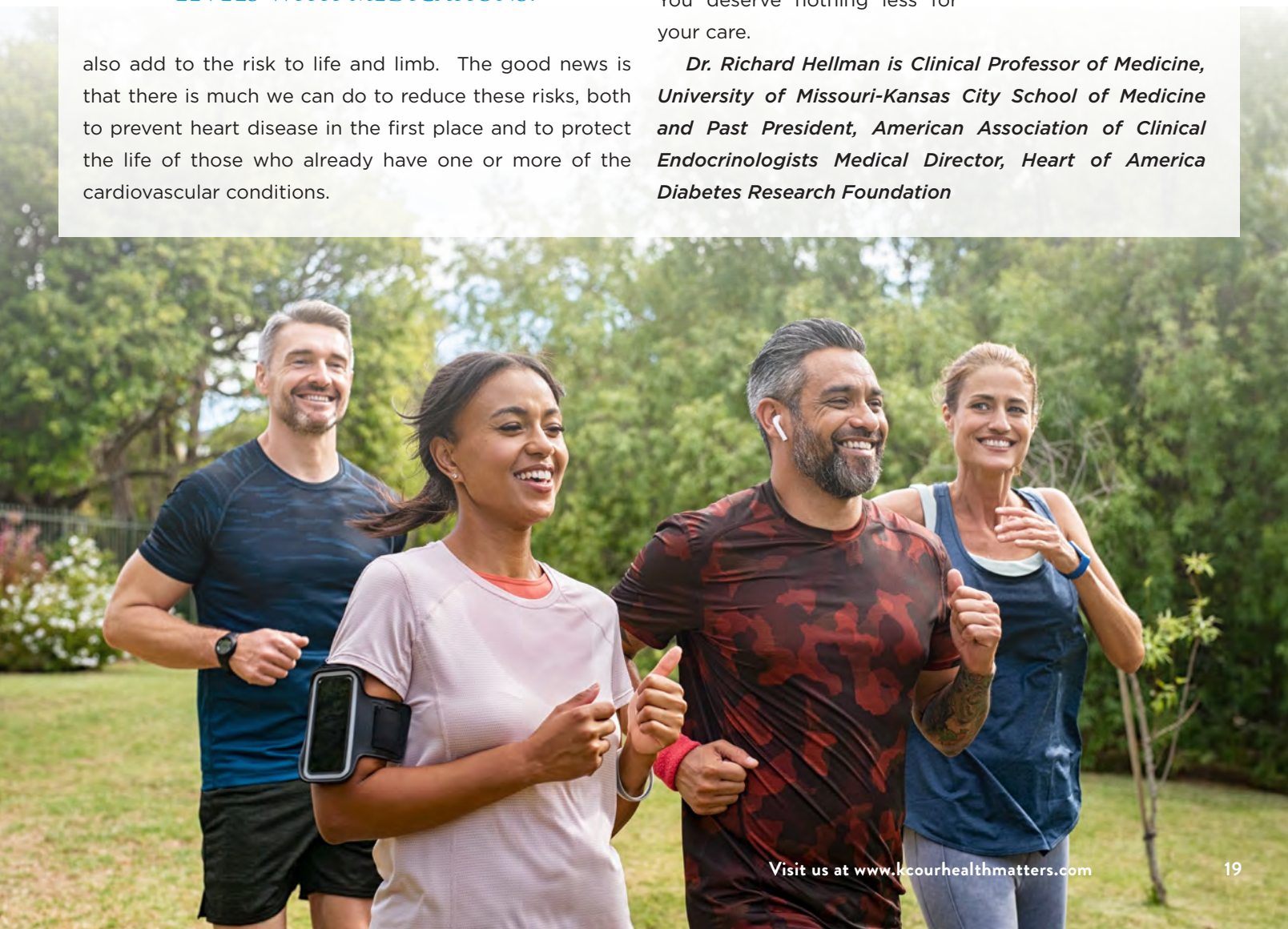
Early diagnosis and good follow-up medical care can be life-saving and life sustaining. You deserve nothing less for your care.

Dr. Richard Hellman is Clinical Professor of Medicine, University of Missouri-Kansas City School of Medicine and Past President, American Association of Clinical Endocrinologists Medical Director, Heart of America Diabetes Research Foundation



By Richard Hellman, MD, FACP, FACE

Clinical Professor of Medicine, University of Missouri-Kansas City School of Medicine





Your Heart's Relationship with Cholesterol

According to the Centers for Disease Control and Prevention, if you have high cholesterol, you also have higher risks of heart disease. Although maintaining a healthy cholesterol level is good for your heart, there are no symptoms to tell if it is too high. Proactively monitoring your cholesterol is especially important if you have diabetes, obesity, or a family history of heart disease or high cholesterol.

What is cholesterol?

Cholesterol is a fat-like, waxy substance. Because cholesterol is mainly fat, it travels through the blood in something called a lipoprotein. The two most commonly measured lipoproteins are LDL and HDL. These lipoproteins can be measured to tell if you have healthy cholesterol levels.

How is cholesterol measured?*

There are four types of cholesterol measurements:

TOTAL CHOLESTEROL - Less than 200mg/dL is considered normal.

LDL CHOLESTEROL - Less than 100mg/dL is considered normal.

HDL CHOLESTEROL - More than 40mg/dL is usually best.

TRIGLYCERIDES - Less than 150mg/dL is considered normal.

*There are exceptions related to your age, other medical conditions, and health goals. You should check with your doctor for the best recommendations.

How often should I have my cholesterol checked?

For most people, it is recommended to have levels checked every 4 to 6 years; however, it may be checked

more often if you have certain conditions such as diabetes.

Is cholesterol bad?

Your liver makes cholesterol because it is necessary for your body to function normally. Unfortunately, cholesterol can build up in the walls of your blood vessels over time, especially if there is too much in your blood. This buildup can block blood flow to and from your heart, brain, and other organs. A heart attack or stroke can happen if your blood vessels are blocked.



By Tenille L. Lawson
PharmD, BCPS
Medical Writer

Why are medicines called “statins” given for high cholesterol?

Statins work in three ways. First, statins lower the amount of cholesterol made by your liver. Second, statins help the liver remove cholesterol that is moving around in your blood. Finally, statins can reduce inflammation or swelling in your blood vessel walls.

If I take a statin, what else can I do to lower my cholesterol levels and keep a healthy heart?

Even if you take a medication to reduce your cholesterol levels, it is best to choose healthy foods, stay physically active, and avoid smoking to keep your heart healthy. For more information on maintaining a healthy cholesterol level, visit the Centers for Disease Control and Prevention at <https://www.cdc.gov/cholesterol/>



A CHILD'S SMILE AT THE HEART OF THE MISSION

When a child smiles, it makes our hearts happy. LevelUp Kids knows dental care at an early age helps to ensure a healthier life.

Since 2002, Miles of Smiles, known as **LevelUp Kids**, has been providing access to portable dental services for low income children and their families in the Northland. When staff saw that children and their family members also needed vision screening and eyeglasses—they expanded their services to include vision care.

Expanded Mission Serves More Children

In January of 2020, LevelUp Kids implemented a new service called **ICare4Kids**. This school-based vision program offers vision screenings, comprehensive eye exams, and free eyeglasses for children of low-income families.

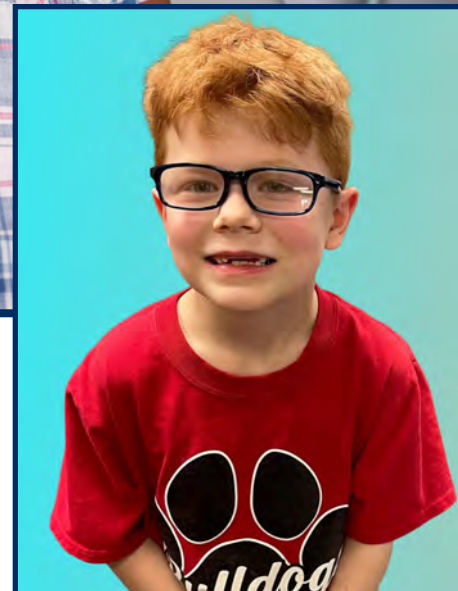
Services are provided by licensed dentists, optometrists, and assistants at the home office and in over 45 schools. Over the years, the organization has served more than 25,000 children and families.

How You Can Help

LevelUp Kids is a 501(c)3 tax-exempt organization. Donations of adult and child toothbrushes, toothpaste and dental floss are appreciated. For program information contact: Christy May, MPA, Executive Director, christy@levelupkidsinc.org or call at 816-413-9009.

WWW.LEVELUPKIDSINC.COM

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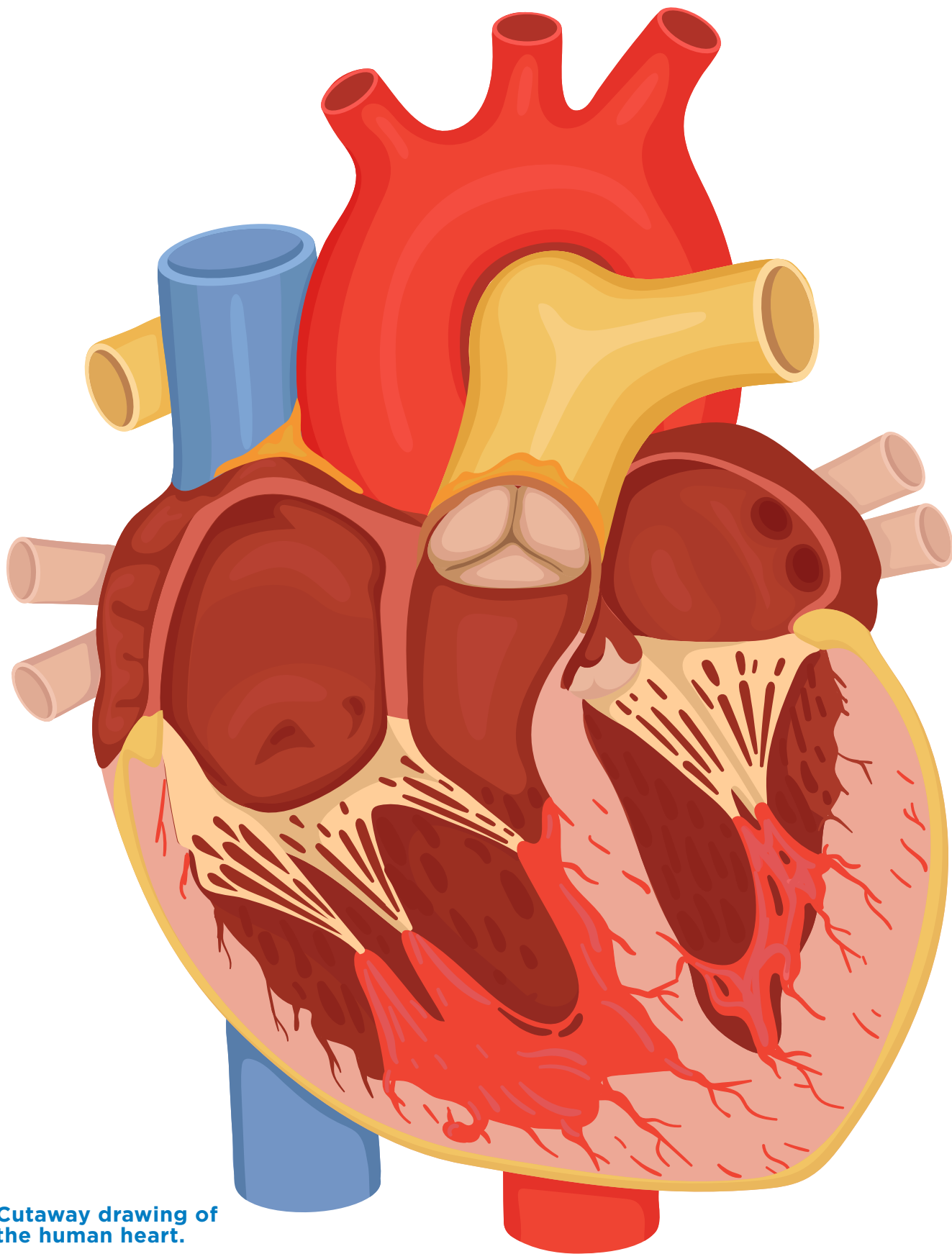
KNOWLEDGE IS POWER



A HEALTHIER
YOU
BEGINS WITH
YOU

Our Health Matters™ wants you to know what the anatomy (bodily structure) of your heart looks like and recognize terms associated with the heart.

We encourage you to reimagine a heart-healthy life.
Protecting your heart is achievable for you and your family.



Cutaway drawing of
the human heart.

This section is not a complete description of all of the heart's anatomy and functioning. Yes, it's a sophisticated system (lots of BIG words to navigate). Don't worry stay tuned we will share more about the heart in upcoming editions. To all of the cardiologist heroes treating heart conditions, thank you for your excellent care and treatment of heart patients.

The Anatomy of a Heartbeat

Your heart is a remarkable organ. Tough and durable, it beats around 3,600 times an hour. In one year, it contracts and relaxes about 31,536,000 times. During a life of 75 years, it beats more than 2,450,000,000 times. The heart is a very complex organ. That is why we need to be more intentional about caring for our hearts. Always ask questions and discuss concerns about any symptoms with your medical providers.

WHY AND HOW YOUR HEART BEATS

The purpose of a heartbeat is to send out oxygen-rich blood to tissues throughout your body and bring back oxygen-poor blood to be made oxygen-rich again. How it serves this purpose is a bit more complicated.

On the inside, your heart consists of blood vessels, atria and ventricles, and valves. Outside the heart walls are more blood vessels and an electrical conduction system that powers the whole organ, making sure it pumps blood efficiently.

THE WALLS

The heart walls consist of:

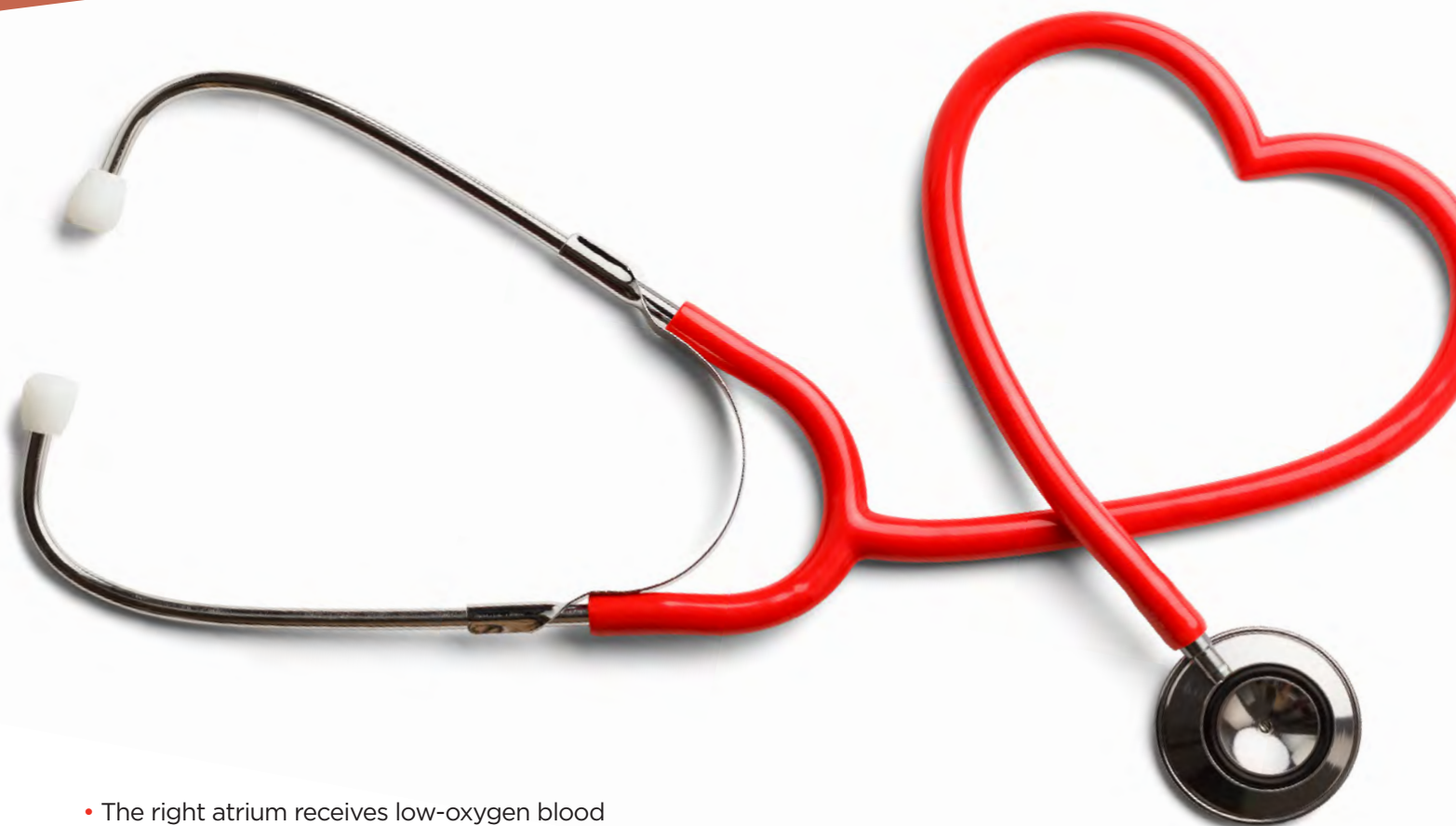
- Three layers: the endocardium, the muscular myocardium and the protective epicardium. The walls contract and release to pump blood, creating the heartbeat
- Pericardium, a layer of the epicardium that surrounds the heart and lubricates it, preventing friction between it and other organs
- Septum, which divides the walls into two sides, left and right

A CLOSER LOOK INSIDE THE HEART

As you might expect, most of the work involved in pumping blood goes on inside the heart walls. It's performed by these heart parts:

ATRIA AND VENTRICLES

The two atria are located on the right and left side of the heart on top, the two ventricles on the bottom.



- The right atrium receives low-oxygen blood from the upper and lower body through two large veins, the superior vena cava (SVC) and the inferior vena cava, and pumps it to the right ventricle.
- The right ventricle pumps blood from the right atrium to the lungs, which replenish its oxygen.
- The left atrium receives the oxygen-rich blood and pumps it to the left ventricle.
- The left ventricle, which is a little larger than the right ventricle, pumps the oxygenated blood throughout the body.

BLOOD VESSELS

Three kinds of blood vessels carry blood through your body:

- **ARTERIES** (except the pulmonary artery) supply oxygenated blood from your heart to your body's tissues. The pulmonary artery carries poorly oxygenated blood to your lungs.
- **VEINS** bring oxygen-depleted blood to your heart.
- **CAPILLARIES** allow exchange of low-oxygen blood with oxygenated blood.

VALVES

As the name implies, heart valves let blood pass through without allowing it to flow back. Your heart has four valves:

- **THE TRICUSPID VALVE** controls flow between the right atrium and the right ventricle.
- **THE MITRAL VALVE** manages blood flowing between the left atrium and the left ventricle.

- **THE AORTIC VALVE** allows blood to flow from the left ventricle to the aorta (Ao), which sends oxygenated blood to your entire body.
- **THE PULMONARY VALVE** opens blood flowing from the right ventricle to the main pulmonary artery.

ELECTRICAL CONDUCTION SYSTEM

This rather complex system controls your heartbeat's pace and rhythm. It includes:

- The sinoatrial node signals your heart to beat.
- The atrioventricular node sends signals from your atria to your ventricles.
- The left bundle branch provides your left ventricle with electrical impulses.
- The right bundle branch gives impulses to the right ventricle.
- The Bundle of His supplies the Purkinje fibers with impulses from the atrioventricular node.
- Purkinje fibers signal your left and right ventricles to pump blood.

It takes every part of your heart to keep it beating. Your life depends on how well the parts support each other.

Source: National Heart, Lung, Blood Institute, www.nhlbi.nih.gov/health-topics/how-heart-works

Glossary of Heart Terms

ANGINA

Pain or pressure occurring in your chest or an aching sensation in your back, shoulders, neck, arms or jaw caused when part of your heart muscle isn't getting enough oxygen.

ABDOMINAL AORTA

The portion of the aorta in the abdomen.

ANEURYSM

A sac-like protrusion from a blood vessel or the heart, resulting from a weakening of the vessel wall or heart muscle.

AORTA

The largest artery in the body and the main vessel to supply blood from the heart.

ARTERY

A vessel that carries oxygen-rich blood to the body.

ARRHYTHMIA

Occurs when the heart beats too fast or slow or with an irregular rhythm.

ARTERIOSCLEROSIS

Stiffening and loss of elasticity of the large arteries that happens with aging. Causes high blood pressure and heightens risk of coronary heart disease, stroke, heart attack and other serious heart issues.

ARTIFICIAL HEART

A manmade heart. Also called a total artificial heart.

ATHEROSCLEROSIS

A disease process that leads to the buildup of a waxy substance, called plaque, inside blood vessels. A disease process that leads to the buildup of a waxy substance, called plaque, inside blood vessels.

ATRIAL FLUTTER

A type of arrhythmia in which the upper chambers of the heart (the atria) beat very fast, causing the walls of the lower chambers (the ventricles) to beat inefficiently as well.

BYPASS

Surgery that can improve blood flow to the heart (or other organs and tissues) by providing a new route, or “bypass” around a section of clogged or diseased artery.

CALCIUM CHANNEL BLOCKER (OR CALCIUM BLOCKER)

A medicine that lowers blood pressure by regulating calcium-related electrical activity in the heart.

CORONARY HEART DISEASE

Also called coronary artery disease or just heart disease, this involves buildup of plaque in the coronary arteries.

COVID-19 AND HEART CONDITIONS

COVID-19 symptoms can be more severe in older people. They can experience trouble

breathing and chest pain. If they have a heart condition, they are more prone to severe COVID-19 illness.

ELECTROCARDIOGRAM

Also known as an ECG or EKG, this test shows the heart’s electrical activity and helps identify a heart attack or arrhythmia.

HEART ATTACK

Known also as a myocardial infarction, it occurs when oxygen-rich blood flow can’t reach a section of the heart muscle. The section of muscle begins to die unless blood flow is restored.

HEART FAILURE

Also called congestive heart failure. Happens when the heart can’t pump enough blood to support the body’s needs.

HIGH BLOOD PRESSURE

Also known as hypertension. Describes the flow of blood through arteries at a pressure that is higher than normal.

STROKE

Occurs when oxygen-rich blood is blocked from reaching part of the brain. Loss of oxygen causes brain cells to die. Sudden bleeding into the brain can also cause a stroke.

SUDDEN CARDIAC ARREST

Sudden cardiac arrest occurs when the heart suddenly stops beating and blood stops flowing to vital organs.

Source: Medlineplus.gov

APRIL IS NATIONAL SARCOIDOSIS AWARENESS MONTH

In 2008, Congress declared April as National Sarcoidosis Awareness Month to bring more attention to this rare, multisystem disease. Slowly but surely, public awareness and research of sarcoidosis is making progress. The exact cause of sarcoidosis is not known. It may be a type of autoimmune disease associated with an abnormal immune response, but what triggers this response is uncertain. How sarcoidosis spreads from one part of the body to another is still being studied. A purple ribbon symbolizes awareness about sarcoidosis.

Sarcoidosis causes inflammation, called granuloma, in different areas of the body. Because it can appear anywhere from the lungs to the eyes to the heart, it can manifest in a variety of symptoms, including swollen lymph nodes, skin sores, and lumps in the lungs—or no symptoms at all. With treatment, many people recover, although it can take several years. Others may have a harder time and can suffer greater organ damage. Even when symptoms subside, called remission, sarcoidosis can return. In rare cases, sarcoidosis is fatal. Researchers don't yet know what causes sarcoidosis.

The Bernie Mac Foundation, named after the celebrity actor and comedian, was founded in 2005. The mission is to increase awareness and greater understanding about sarcoidosis, its impact on patients' lives and current opinions regarding treatment.

An international community of thought leaders, healthcare

providers, researchers and patients raises funds to support research and education for affected patients and families.

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WHAT'S NEXT?



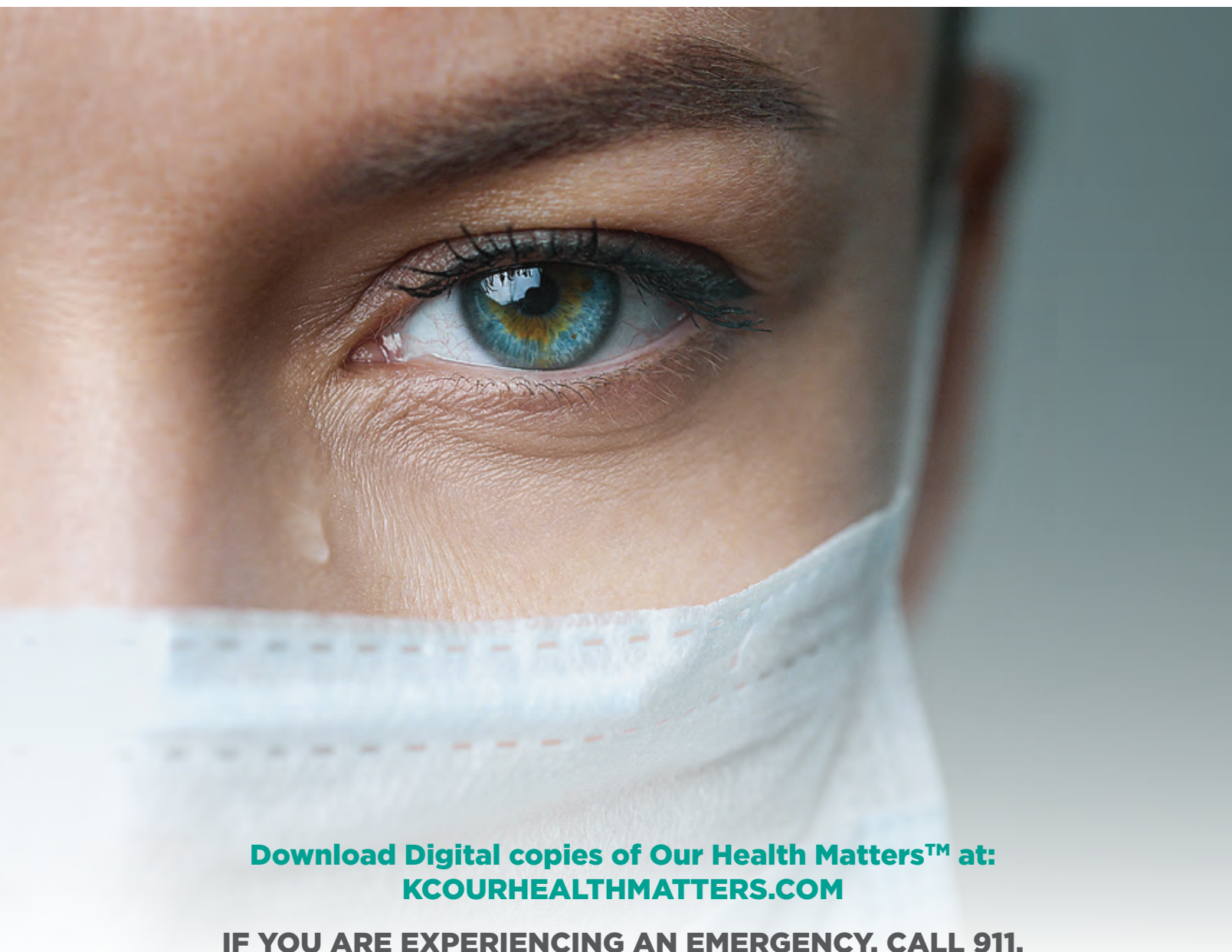
- JUNE 2022 - Healthy Families Edition

We empower parents to re-evaluate and incorporate healthy lifestyle changes that benefit their own and their child's mental and physical health, educational goals, and social well-being at home, school and work. Some common features of healthy, happy families include: open communication; parents leading by example; providing effective conflict management; setting clear expectations and limits; providing security and a sense of belonging; making each person feel important, valued, respected and esteemed. It's not about perfection, but learning what each member of the family needs to thrive and succeed in life.

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