

Some Heart Disease Myths

Sometimes, it is difficult to shake off, long held habits and beliefs. Over the decades, certain recommendations about avoiding heart disease have evolved, thanks to the constant streams of new evidence from medical research. Knowing the latest evidences can help us make better choices for preventing, recognizing and monitoring, heart disease. Here are some myths about heart disease.

MYTH #1: TAKING DAILY FISH OIL SUPPLEMENT CAN HELP TO PREVENT HEART DISEASE In 1970s, studies suggested that people whose diet featured lots of fatty fish had a low rate of heart disease. Fatty fish are rich in omega-3 fatty acids such as EPA and DHA which have beneficial effect on cardiovascular health. The effect was related to anti-inflammatory and anti blood clot forming effects.

By 1980s omega-3 fish supplements started showing up in stores. At present, these capsules are among the most popular supplements sold in this country.

Over the past two decades, numerous studies have compared omega-3 supplements against placebo and found no evidence that the capsules can help to stave off heart attacks or related problems in healthy people. Present recommendation is not to waste money on over-the-counter omega-3 supplements.

They are not regulated by the FDA and some contain unhealthy saturated or oxidized fats, industrial pollutants or mercury. Only fish oil supplement proven to be effective is ICOSAPENT ETHYL(IPE) otherwise called VASCEPA at a dose of 2 grams twice daily, which is useful in patients with high triglycerides and it also reduces cardiovascular events and deaths.

This medication is available only with the prescription.

MYTH #2: IT IS OK TO HAVE HIGH BLOOD PRESSURE WHEN YOU ARE OVER 65 As people age, their arterial walls stiffen, forcing heart to pump harder. As a result, blood pressure tend to rise. In the past doctors thought that for older people, high blood pressure was essential to deliver enough blood to the brain. Many doctors thought that after age 65, systolic blood pressure as high as 150 mmHg is OK.

Current guidelines suggest that all adults should aim for a systolic blood pressure of 130 or lower. Reaching that goal often requires people to take multiple blood pressure medications and this could result in side effects such as dizziness and falls. Recent studies suggest similar side effects rates among older people who aimed for lower blood pressure versus higher blood pressure target.

Importantly, the lower targets lead to reduced rates of stroke and heart attacks. Present recommendation is that no matter how old you are, work with your doctor to achieve a blood pressure goal below 130 over 80, as long as you don't experience significant side effects.

MYTH #3: A FAMILY HISTORY OF HEART DISEASE MEANS, YOU ARE DESTINED TO HAVE IT TOO It is true that having a parent or sibling with heart disease increases your risk of this condition, especially with family history of premature cardiovascular disease.

Family history of Premature cardiovascular disease is defined as diagnosis of cardiovascular disease before the age of 55 in first degree male relative (father, brother or son) or before the age of 65 in the first degree female relatives (mother, sister or daughter).

Factors such as high cholesterol and high blood pressure that increases heart disease risk may be linked to genes that run in families. High Blood Pressure , unhealthy diet, smoking, sedentary lifestyle-also tend to run in the families and may contribute to the elevated cardiovascular risk. In most of the people, lifestyle factors carry more weight than genetics.

If early heart disease runs in your family, it is possible that you might have an inherited lipid disorder, such as familial hypercholesterolemia, which causes abnormally high LDL cholesterol above 190 or elevated Lipo protein(a) level.

MYTH #4: ONLY WOMEN GET UNUSUAL HEART ATTACK SYMPTOMS Many years back, American heart Association launched the GO RED FOR WOMEN campaign to help raise awareness of heart disease in women. The key message was to recognize heart attack symptoms- regarding some of the less common symptoms, such as nausea, vomiting, dizziness, sweating, and jaw pain.

Some studies suggested that women are more likely to experience these symptoms than men. But the difference aren't all that great and less typical symptoms can also occur in men and men should be aware of this too.

MYTH #5: BABY ASPIRIN HELPS TO PREVENT HEART ATTACK AND STROKE IN HEALTHY PEOPLE It is true that in the past, everybody took baby aspirin daily to prevent heart attack. Then reports came out, which showed that in healthy people risk of baby aspirin exceeds the benefits in primary prevention, meaning prevention of cardiovascular disease before an event occurs.

The most common side effect of aspirin is bleeding, either in the G.I. tract or more seriously brain bleed. Therefore, aspirin is no longer used for primary prevention in most people however it can be recommended in people with multiple risk factors and diabetes, and also in patients with elevated Lipoprotein (a) level. Work with your doctor to see whether low dose aspirin is good for you.

Bottom line is, all of us should be aware of symptoms of heart disease, and be vigilant. Remember, NO-ONE IS IMMUNE

Keshava Aithal

Dr Keshava Aithal

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