



Mended Hearts™  
of Orlando - Central Florida



The Mended Hearts, Inc.  
Chapter 296 Orlando Florida  
www.mendedheartsorlando.org

## President's Message

# The Central Beat

Mended Hearts Inc., Chapter 296  
Volume Sixteen, Number One  
January, 2016

Happy New Year everyone! I hope you all had a wonderful and heart healthy holiday season; I know I did my best to abide by healthy choices over the season. I am ready to take on 2016 and look forward to another year of some fantastic meetings, full of great opportunities for learning, yet a great time to mingle with our Mended Heart family.

This month's meeting is at Orlando Heart Health Institute, January 19<sup>th</sup> at 7:00PM; the meeting will be about Caring and Sharing your journey after a cardiac event. We have not had this type of meeting since last June, so I hope many of you can make the time to attend. I always enjoy Caring and Sharing because I believe it allows us to share what we have gone through, or currently are going through, aiding in others feeling they are not alone. Plus, it gives opportunity to gain insight on what our caregivers might also be going through on their end; as always, it is not just about what we as the patient, but also our caregivers.

In February, our meeting will offer Dr. George Guthrie, faculty at the Florida Hospital Residency Program, to discuss myths and misconception that tend to be repeated as facts in relation to blood glucose, insulin, and how to prevent and manage diabetes. It should be a very informative meeting that we all could learn from. The meeting is Tuesday, February 16<sup>th</sup> at Florida Hospital Orlando in the Barker Conference Center; be sure to check the meeting flyer for more information.

Have great 2016 and see you ALL soon!

Corrie Crum  
President

*Imagine what a harmonious world it could be if every single person, both young and old, shared a little of what he is good at doing.*



**Stronger heart risk warning for popular painkillers**

NSAID users: Take the lowest effective dose for the shortest possible time.

The tiny print on your bottle of over the counter ibuprofen (Advil, Motrin) includes this warning: The risk of heart attack or stroke may go up if you use more than directed or longer than directed. A similar warning appears on the label for naproxen (Aleve, Naprosyn). Both drugs are nonsteroidal anti-inflammatory drugs or NSAID’s – popular painkillers used to treat arthritis, muscle strains, headaches and other painful conditions. In July, the FDA announced plans to strengthen these heart risk warnings on both over-the-counter and prescriptions NSAIDs.



Until recently, only long-term NSAID use – over many months or years was considered dangerous in terms of heart attack risk. But the new evidence suggests that the harm from NSAIDs can occur with short-term use, during the first couple of weeks of taking the drugs, says Harvard professor Dr. Elliott Antman, a cardiologist at Brigham and Women’s Hospital and lead author of guidelines on NSAIDS use from the American Heart Association.

How NSAIDs may harm the heart

NSAIDs pose a two –pronged risk to the cardiovascular system. First, NSAIDs encourage the body to retain more salt and water, which can raise blood pressure. Second, they may change levels of substances in the blood in ways that might make clots more likely to form. These clots can block an artery feeding the heart or brain, triggering a heart attack or stroke.

People with heart disease or its risk factors (such as high blood pressure) have a greater chance of having a heart attack from taking NSAIDs because their baseline risk is higher. But the drugs also raise risk among people without heart disease risk factors. Just how much varies, depending on the drug and the dose.

Use with caution

If you have heart disease, taking an NSAID for the occasional headache is probably okay, says Dr Antman. But he always recommends naproxen rather than ibuprofen. While the evidence is not definitive, some data suggest that naproxen may be less risky than other NSAIDs.

Don’t make the mistake of some weekend athletes, who routinely take NSAIDs to prevent or treat minor muscles aches or sprains. Too often, such use becomes a habit, say Dr. Antman. Those with chronic conditions like arthritis, who may need long-term pain relief, should work with their doctors to find the safest options. Follow Dr. Antman’s mantra: Take the safest drug at the lowest dose for the shortest possible period of time.

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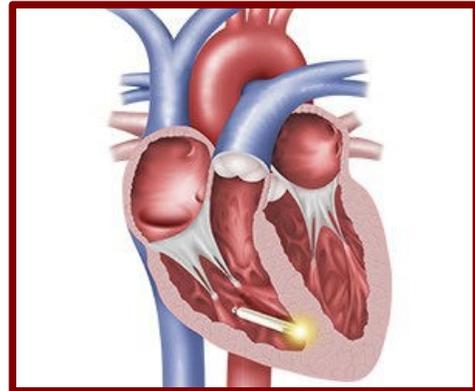
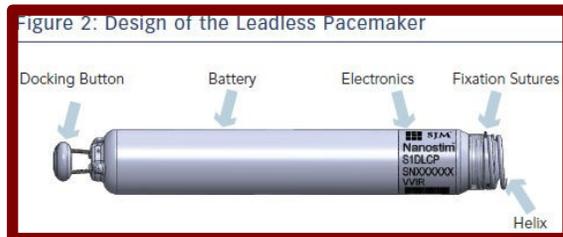
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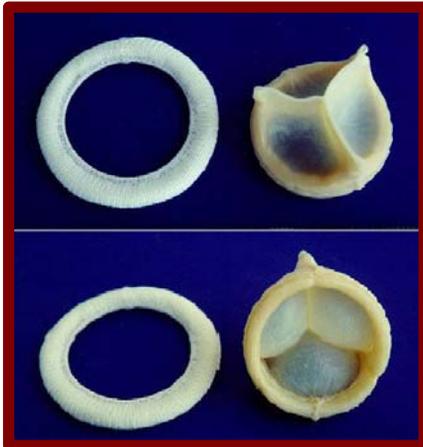
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## Leadless Pacemaker

Traditional pacemakers consist of a small battery-operated power source implanted under the skin. Wires known as leads deliver electrical impulses to the heart muscle to help maintain a normal heartbeat. Although pacemakers are in general very reliable, the leads represent the weak link in the system. When complications do arise, they most often involve a broken lead (which can cause a malfunction) or an infection at the insertion site. In addition, some people have anatomical differences that make it difficult to implant the lead. The leadless pacemaker is a tiny, self-contained unit that is placed on the inside wall of the heart through a thin, flexible tube called a catheter. The first version of a single-chamber pacemaker placed in the heart's right lower pumping chamber looks promising. Future iterations may be available in the next few years.



## Valve-in-valve procedure



Heart valves made from animal tissue (called bio prosthetic valves) are increasingly used to replace stiff, narrowing aortic valves. Compared with mechanical valves, they carry a lower risk of clot formation, which means people who get them probably don't need long-term anti-clotting drugs. The catch is that bio prosthetic valves don't last as long as mechanical valves, so a recipient may eventually require another surgery to replace the valve a second time. Now, a less invasive technique called a valve-in-valve procedure is more often being used instead of that second surgery. A new bio prosthetic valve is inserted into the heart via a catheter at the site of the failing device. More research needs to be done on the pro and cons of this procedure in younger patients. But it may turn out to be the best valve replacement option for people at high risk for surgery.

**January 16, 2016**

## Mended Heart Regional Cluster Meeting

Be sure to add Saturday January 16<sup>th</sup> to your upcoming calendar. This is the day we will be having our Regional MH Cluster Meeting at Osceola Regional Medical Center in Kissimmee. If you missed out on attending the June National MH Meeting here in Orlando, now you have another chance to network and learn from other chapters. This is an all day affair that offers lots of great information, including a session with Dr. Jamnadas, plus you can't beat the fact it is FREE and includes lunch. Call Ed Wainwright at 407-361-1360 to let him know you are coming.

**THE MENDED HEARTS, INC.**  
**Cardiac Support Group**  
**Chapter 296**

*Please join us at our monthly meeting and be part of this self-help organization  
for those who have had any heart problems.*



**January 19, 2016**

**Tuesday, 7-8:30 PM**

**Orlando Health Heart Institute - Orlando, Florida 32804**

Orlando Health Heart Institute (OHHI) is located in downtown Orlando on the corner of Orange Ave and Underwood across from the Cancer Center. The physical address is 1222 S. Orange Ave. The building is a five story glass building with a red banner across the top of the building that reads Heart Institute. You may park in the garage next to the Heart Institute and enter the building two ways. 1) Through the pedestrian bridge accessible on the 2<sup>nd</sup> level of the parking structure or 2) via the first floor where you may also valet park. Once you are in the building; take the elevators to the 1<sup>st</sup> floor. When you exit the elevators turn left and the OHHI classroom is on your left. Just follow the Mended Hearts signs in the building.

**Topic: Caring and Sharing**

**February 16, 2016**

**Tuesday, 7-8:30 PM**

**Florida Hospital Orlando Barker Conference Center Room A**  
**601 East Rollins St, Orlando, Florida**

**Speaker: Dr George Guthrie, Faculty at FH Residency Program**

**Discussion Topic:** Evidence indicates damage to the arteries in our body begins before a diagnosis of diabetes. Learn how to PREVENT and manage diabetes with answers to questions such as: What is glucose? What is insulin? What is the relationship between diet and glucose levels? What is the relationship between blood levels of glucose and insulin and disease? What level of blood glucose correlates with complications and/or disease?

Due to possible changes for future meetings **call** the contact person or check our local web site listed below to be assured that no change has occurred before coming to any meeting.

Call the National Organization to locate a chapter near you if you don't live in the Central Florida area.  
1-888-432-7899 or 214-206-9259 - <http://www.mendedhearts.org>

Our **local** web address is [www.mendedheartsorlando.org](http://www.mendedheartsorlando.org)

2016 February meeting

Contact Eileen Krause – 407-342-3708

2016 January meeting

Contact Joanna Gerry - 321- 843-1093

## Mended Hearts Orlando - January Birthdays

Last Name	First Name	Date
Burns	Linda	1/27
Weber	Mike	1/17

## Mended Hearts Orlando - Cardiac Event

Last Name	First Name	Event
Jones	Claire	1/22/04
Lemmens	Inger	1/30/12

### Longer Work Hours May Boost Stroke Risk

People who work long hours may face a higher risk of stroke, according to a study published online August 20, 2015, by *Lancet*.

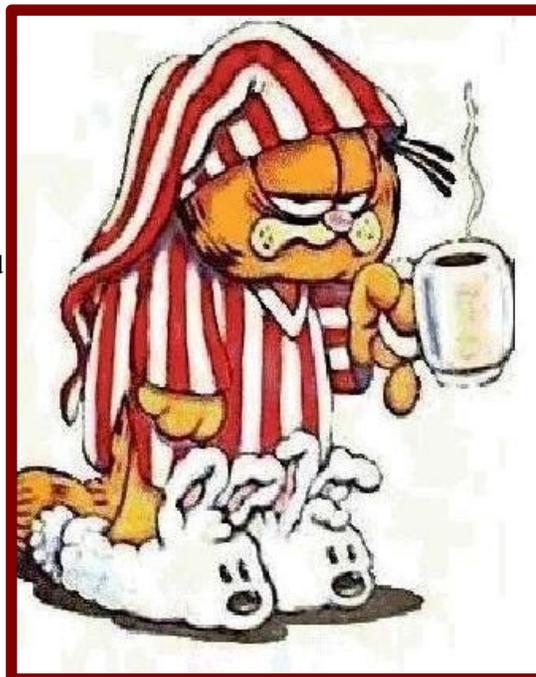
Researchers pooled data from 17 studies from the United States, Europe, and Australia that followed more than 528,000 workers for an average of just over seven years. None of the participants had cardiovascular disease when they signed up for the studies.

After controlling for socioeconomic status, smoking, physical activity, high blood pressure, and other confounding factors, the researchers found that people who worked at least 55 hours a week were 33% more likely to have a stroke than those who worked a standard full-time schedule of 35 to 40 hours a week. People who work long hours may also spend more time sitting, sleep less, and have higher stress levels—all of which have been linked to a higher risk of stroke. Given the potentially devastating consequences of a stroke, people who often work overtime might want to make sure to eat a healthy diet and get enough rest.

### Too much or too little sleep linked to stiffer arteries

People who sleep too much or too little may be more likely to have early signs of heart disease, according to a study of more than 47,000 apparently healthy young and middle-aged adults.

The study volunteers filled out sleep questionnaires and underwent test to assess the arteries in their hearts and legs. Researchers found that people who slept for nine or more hours per night had more calcium buildup in their heart artery walls and stiffer leg arteries than those who slept seven hours per night. These early signs of heart disease were also more prevalent in people who logged five or fewer hours of sleep per night and in people who reported poor sleep quality. The authors, whose study was published online September 10 by *Arteriosclerosis, Thrombosis, and Vascular Biology*, note that many studies have linked insufficient sleep to high blood pressure and other factors that boost heart disease risk. It's less clear how excess sleep might contribute to early heart disease. One possibility is that people who sleep longer than normal might have fragmented, poor quality sleep, which may boost levels of inflammation, a known risk factor for heart disease.



# DECEMBER 2015 MENDED HEARTS HOLIDAY BANQUET

