

## What you don't know about heart disease can hurt you

In the United States in general, and in the Naugatuck Valley in particular, heart disease is very common. In fact, at Griffin Hospital, we almost invariably admit several patients a day with heart disease. And when we do, it gives us a chance to review all of the medications and treatments they are using. Often we find that the medical regimen is not optimal. That's where you come in.

You may recall radio commercials by the Sim's clothing chain, stating that "an educated consumer is our best customer." The same is certainly true in medicine. The more educated you are, the more actively you can participate in a process designed to protect and promote your health.

If you have had a heart attack, you should be on aspirin, unless there is some reason why you absolutely cannot be. And generally if you can't take aspirin, you should take an alternative medication, such as Ticlid, that prevents platelets from clumping together. The clumping of platelets starts a heart attack. If you have heart disease and are not on aspirin, talk to your doctor.

There is good evidence that anyone who has had a heart attack should be on an ACE inhibitor. ACE

stands for an enzyme that makes a chemical that can tax the heart and raise blood pressure. Inhibitors of the enzyme reduce the workload of the heart. If unsure, ask your doctor if you are on an ACE inhibitor.

Another category of medicine with known benefits is beta-blockers. The heart is rich in beta-receptors that respond to blood chemicals such as adrenaline. By blocking the receptors, these drugs protect the heart from emotional and physical stress. Beta-blockers are known to improve survival following a heart attack. If you've had a heart attack, it's important to remember that it didn't come out of thin air. It likely resulted from the accumulation of cholesterol-rich plaque in the blood vessels that supply the heart, over a period of years. Stopping that accumulation—a process called atherogenesis—is essential to prevent subsequent heart attacks. Often, medication is needed to lower cholesterol. The most effective medicines are called statins. If you have had a heart attack, you should probably be on a statin; ask your doctor if you are.

In women with heart disease, the issue of hormone replacement is particularly important. Estrogen, and estrogen-like medications, can substantially lower the



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risk of recurrent heart attacks. Women are often reluctant to take "hormones," but women are also generally less aware of their heart disease risk than they should be. Heart disease kills more than 10 times as many women as breast cancer. If you are a woman who has had a heart attack, and are not on any estrogen-like medication, I encourage you to discuss it with your doctor.

Finally, you should know that doctors may pay more attention to the medications they need to prescribe than to things you can take on your own. A multivitamin may lower your risk of heart attack, and I encourage anyone who has had a heart attack to take one every day. Vitamin E, 800IU per day, has proven benefits in patients with a history of heart attack, and Vitamin C, 500mg, may be beneficial. Obviously, no medication regimen substitutes for a healthy lifestyle; if you've already had a heart attack, it's that much more essential that you don't smoke, eat well, and remain physically active if possible. When your health is the issue, there's too much at stake to assume your doctor is taking care of everything. Be an educated consumer to get the very best care you can.

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*Preventive Medicine Column*

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