A healthy heart guidebook
Congratulations!

You’ve taken an important step in managing your health by signing up with your Moda health coach. Making healthy lifestyle changes can prevent or improve heart disease and improve your quality of life.

Work with your healthcare team to understand what healthful changes you can make to control your risk factors for heart disease. Your health coach will provide you with the support and guidance you need.

Health Coaching at Moda was developed to help you achieve your best health and learn how to maintain healthy habits. For more information about your health plan and online tools, visit myModa at modahealth.com.
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This workbook is meant to be a reference to help you live better with a cardiac condition. It is not meant to be used in place of consultation from your healthcare provider.
Know your risks

Several risk factors make people more likely to develop cardiovascular disease. Some of these risk factors can be controlled and, in some cases, eliminated completely. Some risk factors cannot be changed.

The more risk factors you have, the more likely you are to develop heart disease and related problems. Also, your likelihood of developing heart disease increases as each risk factor intensifies or becomes more serious. For example, anyone with a total cholesterol of more than 240 mg/dL is at a high risk for developing heart disease. But someone with a total cholesterol of 300 mg/dL is at an even greater risk.

Risk factors you can control

Many heart disease risk factors can be avoided or controlled by making healthy lifestyle choices. This workbook will guide you through several possible lifestyle changes that you could make to improve your heart health.

Smoking

Tobacco smokers’ risk of developing coronary heart disease is two to four times greater than nonsmokers’. Smoking also combines with other risk factors to greatly increase a person’s risk for developing these diseases. In addition, exposure to secondhand smoke can increase the risk of heart disease for nonsmokers. For information on quitting smoking, turn to page 30.

High blood cholesterol

Cholesterol is an important substance produced by our bodies and obtained from the foods we eat. A certain amount of cholesterol keeps your body functioning normally, but if you have too much, it can build up in your blood vessels and prohibit the flow of blood. High cholesterol can combine with other risk factors to greatly increase your risk of developing heart disease. Cholesterol levels can rise for a number of reasons, including age, sex, heredity and diet.

High blood pressure

Blood pressure is the force of your blood pushing against your blood vessel walls. High blood pressure, or hypertension, increases your heart’s workload, causing this important muscle to thicken and become stiff. Just like stiffness in any muscle in your body, stiffness in the heart muscle can make it difficult for the heart to do its job.

High blood pressure increases your risk of stroke, heart attack, kidney failure and congestive heart failure. When high blood pressure combines with obesity, smoking, high cholesterol or diabetes, the risk for heart disease or stroke increases several times.

Lack of physical activity

Physical activity is an important part of overall good health — especially good heart health. An inactive lifestyle is a risk factor for coronary heart disease. Regular physical activity helps prevent heart and blood vessel disease. The more vigorous the activity, the greater your benefits. However, even moderate, regular activity can help control cholesterol, diabetes, obesity and blood pressure.
Obesity and excess weight
People who have excess body fat, especially around the waist, are more likely to develop heart disease or have a stroke. Extra weight increases the heart’s work. It also can raise blood pressure, cholesterol and triglyceride levels. People who are overweight also are more likely to develop diabetes, which further complicates your risk. Losing as few as 10 pounds can help lower your risk for heart disease.

Diabetes
Even when your glucose levels are under control, diabetes increases your risk for heart disease and stroke. The risks are even greater if your blood sugar is not controlled. At least 65 percent of all people with diabetes die from some form of heart disease or stroke.1 It’s important to work with your healthcare provider to manage your diabetes as well as your heart condition.

Oral health
Studies have shown that poor oral health increases the risk for high blood pressure and cholesterol in patients with cardiac conditions.2 Ninety percent of people with periodontal (gum) disease are at risk for diabetes.3 It is important to practice good oral health habits, including regular dental visits.

Metabolic Syndrome
Metabolic syndrome is a group of conditions, including high blood pressure, excess body fat around the waist and abnormal cholesterol levels. When these conditions occur together they can increase your risk of heart disease, stroke and diabetes. You can refer to page 14 to evaluate your risk factors for metabolic syndrome.

Risk factors you can’t control
While some heart disease risk factors can be controlled, others cannot be changed — you are simply born with them. The more of these risk factors that you have, the greater your chance of developing heart disease. Since you cannot do anything about these factors, if you have any of them, it becomes even more important to manage the factors you can control.

Age
Approximately 82 percent of people who die from heart disease are 65 or older.1 Older women who have heart attacks are more likely than men to die within a few weeks.

Gender
A man is at greater risk of heart disease than a pre-menopausal woman. Once past menopause, a woman’s risk is similar to a man’s. Risk of stroke is similar for men and women.4

Family history & race
Several groups of people tend to be at a higher risk for developing heart disease:
- People whose parents had heart disease
- African-Americans
- Mexican-Americans
- Native Americans
- Native Hawaiians
- Some Asian-Americans

Heart disease can run in the family. Genetic factors likely play some role in high blood pressure, heart disease, and other vascular conditions. However, it is also likely that people with a family history of heart disease share common environments and risk factors that increase their risk.5

Other contributing factors

Stress
Some research has shown that the way people handle stress can contribute to an increased risk for heart disease. People under stress sometimes overeat, smoke more than usual or experience a sustained increase in blood pressure.

Diet and nutrition
Eating nutritious foods is a great way to take care of your heart. In fact, your diet directly affects a number of risk factors for heart disease, including cholesterol, blood pressure, diabetes and excess weight. Make sure that your diet includes a variety of fruits and vegetables, whole grains, fish, lean protein and low- or nonfat dairy products.

Sleep apnea
Sleep apnea is a potentially serious sleep disorder in which breathing repeatedly stops and starts. You may have sleep apnea if you snore loudly and you feel tired even after a full night’s sleep. If you think you might have sleep apnea, see your doctor. Treatment is necessary to avoid heart problems and other complications.6

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1 American Heart Association, 2010
3 Journal of Public Health Dentistry, Volume 70, Issue 2, pages 156–162, Spring 2010
4 World Heart Federation, 2013
5 Centers for Disease Control, 2013
6 Mayo Clinic, 2013

To understand more about your risk factors, talk to your health coach about completing a health risk assessment.
Heart conditions

A number of conditions fall into the category of coronary heart disease. This group of diseases develops when arteries that supply blood to the heart become clogged with fatty deposits called “plaque.” Cholesterol is part of the plaque. Over time, the buildup of plaque can cause arteries to narrow and blood flow to the heart and brain to be restricted. This condition is also called “hardening of the arteries” or “atherosclerosis,” and it can lead to a number of related health problems.

Angina

When your heart doesn’t get as much blood and oxygen as it needs, you may feel pain and discomfort. These sensations are known as “angina.” The pain and discomfort from angina might come and go, but it is still considered a sign of heart disease. Angina can be treated with lifestyle changes, medication and surgery.

The symptoms of angina usually last for a few minutes at a time and include:

- Tightness or heaviness in the chest
- Shortness of breath
- Pressure, squeezing or burning in the chest
- Discomfort in the arms, back, neck, jaw or stomach
- Numbness or tingling in the shoulders, arms or wrists
- Nausea

These symptoms can occur at any time, but they are most likely to happen when you are more active than usual, feel angry or upset, are working in very hot or cold weather, or eat too much.

If you are diagnosed with angina, your doctor might prescribe nitroglycerin tablets to relieve your discomfort. You also can make lifestyle changes described in this book that will lower your chance of having the uncomfortable sensations associated with this condition.

Notify your doctor if your symptoms change — especially if you have pain or discomfort while resting.

Heart attack

Sometimes built-up plaque in your arteries breaks apart and forms a blood clot. If a clot blocks the blood flow to part of your heart, you will have a heart attack. When blood flow is stopped, the affected part of your heart muscle begins to die.

Some heart attacks are sudden and intense, but most come on slowly, with mild pain and discomfort. Some signals that you might be having a heart attack include:

- Uncomfortable pressure, squeezing or pain in the center of your chest that lasts longer than a few minutes
- Pain or tingling in one or both of your arms, back, neck, jaw or stomach
- Shortness of breath
- Cold sweat
- Nausea
- Lightheadedness

Some women might experience heart attacks in a slightly different way than men. Atypical heart attack symptoms for women include:

- Nausea
- Abdominal pain
- Shortness of breath
- Unusual fatigue
- Muscle weakness

It’s important to understand how to recognize changes in your own body that could be related to a heart attack. If you think you,
or someone you are with, might be having a heart attack, follow these steps:

- Call 911 immediately; do not wait more than five minutes.
- Chew one regular aspirin as soon as you experience symptoms.
- Call your local emergency medical service ASAP — this team can begin treatment the quickest.
- Do not drive yourself to the hospital.
- Don’t be embarrassed if you call in a false alarm; uncertainty is normal.

**Emotional recovery**

Recovery from a heart attack can be physically and emotionally challenging. You may be in the hospital for just a few days or it may be longer. Either way, your normal routine will be significantly disturbed. You are likely to experience a number of feelings after a heart attack:

- **Fear.** After a heart attack, it’s normal to feel afraid of dying or having intense chest pains strike again. You might also be afraid that you’ll never be able to work or have sex again.
- **Anger.** Your heart attack might bring up feelings of anger that this could happen to you. Or you might feel angry with family and friends for not understanding what you are going through or for past issues that have not been resolved.
- **Depression.** Experiencing a serious health emergency can cause you to feel depressed. You may begin to feel like life as you know it is over, that you will never be the same again or that others will think of you as weak. Depression has many symptoms that include changes in sleep, loss of energy, difficulty concentrating, changes in appetite, loss of interest or pleasure in activities, or deep feelings of sadness.

All of these feelings are normal. Talk to your family and friends. It’s likely that they will be feeling the effects of your heart attack on an emotional level, too. They may feel frightened of the possibility of losing you, angry about the timing of the heart attack or even guilty because they think they may have caused it.

If you have symptoms of depression that persist for more than two weeks, speak with your healthcare provider. For a referral to an Moda Health behavioral health provider in your area, call 800-799-9391. Contact your Moda health coach for more information about the Moda Depression Care Program, or you can email depression@modahealth.com.

Recovery time varies for each person, depending on how severe the heart attack was, as well as other health and lifestyle factors. It takes most people anywhere from two weeks to three months to return to work and other normal routines. Some people need to change their work situation after a heart attack to help prevent another one. Be sure to discuss your work with your doctor and ask about any cardiac rehabilitation programs in your area.

**Congestive heart failure**

“Heart failure” is a confusing term. This condition is not the same as a heart attack, and it does not mean that your heart stops beating. Heart failure is when your heart can no longer pump blood in a normal way. When this happens, the rest of your body does not get enough blood and oxygen. This condition is sometimes called “congestive heart failure” because your blood and other fluids become “congested” in your body.

Heart failure can be caused by a number of different health situations, including clogged arteries, a past heart attack that has damaged the heart muscle, heart defects since birth, high blood pressure, heart valve or heart muscle disease, and heart or heart valve infections.

The symptoms of heart failure include:

- Shortness of breath
- Tiredness
- Persistent cough
- Swelling in the feet, ankles and legs
- Weight gain from fluid buildup
- Confusion or difficulty thinking

If left untreated, this condition can worsen and lead to an emergency situation. Blood can back up in your veins, and your body can hold too much fluid, causing extreme swelling and discomfort. Your lungs also can hold fluid, resulting in a condition called “pulmonary congestion,” which can cause severe difficulty breathing.

**Treatment**

Treatment for heart failure includes rest, lowering your salt intake and, in some cases, surgery. In addition, your doctor may prescribe medicine to strengthen your heart and reduce the fluid buildup in your body. If you have been diagnosed with congestive heart failure, it’s important to weigh yourself daily to keep track of increased fluid buildup. Communicate any sudden increases to your healthcare provider right away.

You may also experience depression along with heart failure. See “Emotional recovery” on this page for more information about what to do if you think you might be depressed.
Atrial fibrillation
Sometimes the upper chambers of the heart, or atria, can get out of sync and send out irregular electrical charges or quivers. This condition is called atrial fibrillation (AF). An estimated 2.2 million Americans are living with AF. With this condition, the atria pump too fast or unevenly and are not able to squeeze the blood out of the heart completely. Blood that doesn’t get pumped out can pool in the atria and form a clot. If one of these clots leaves the heart, it can lodge itself in an artery in the brain, causing a stroke.

The likelihood of developing AF increases with age, and men have the condition more often than women. Smokers and people who use stimulant drugs (including caffeine) are more likely to experience AF.

AF can be triggered by any of the following situations:
- Stress
- Extreme fatigue
- Too much alcohol
- Too much caffeine
- Excessive physical activity
- Cold drinks
- Chocolate
- Bending over or lying on your left side

Symptoms of AF can include:
- Racing, uncomfortable, irregular heartbeat
- Fluttering or thumping feeling in the chest
- Heart palpitations
- Dizziness
- Sweating
- Chest pain or pressure
- Difficulty breathing
- Overall weakness
- Fainting
- Tiredness during exercise

Treatment
AF is not life threatening by itself, but it can lead to more serious conditions, including stroke and heart failure. That’s why if you have AF, it’s a good idea to work with your doctor to develop a treatment plan that will help control your heart rate, prevent blood clots and reduce your risk of stroke.

Some treatments for AF may include medication, electrical shock, radio frequency ablation treatment, surgery or a pacemaker. In addition, your healthcare team will most likely coach you on important lifestyle changes, such as lowering blood pressure and cholesterol, quitting smoking, getting enough physical activity, eating well and maintaining a healthy weight.

High blood pressure
Maintaining a healthy blood pressure rate is an important part of overall good health. Blood pressure is the measurement of how hard your heart pumps blood through your blood vessels. The harder your heart is working to pump your blood, the higher your blood pressure will be.

You may not have any obvious symptoms of high blood pressure. The only way to know your blood pressure level is to have it checked regularly. Blood pressure is measured and recorded using two numbers:
- The first (or top) number measures your systolic blood pressure, which is the pressure of the blood flowing through your blood vessels while your heart is beating.
- The second (or bottom) number measures your diastolic blood pressure, which is the pressure when your heart is at rest between beats.

A blood pressure reading is presented like this: 120/80. It is read as “120 over 80,” which is a normal reading. If your blood pressure is 140/90 or higher, it may be considered too high, depending on your medical history. The higher your blood pressure, the more likely you are to develop a serious health condition, such as stroke, heart attack, blindness or kidney failure.

Use the chart on page 15 in Chapter 5 to keep track of your blood pressure readings. Report any significant changes to your healthcare provider.

Treatment
If you have high blood pressure, talk to your doctor about treatment options to find the best one for you. Treatment for lowering blood pressure may include one or more of the following:
- Weight loss to help reduce the stress on your heart
- A healthy diet that is low in fat and salt (see page 16)
- Physical activity to strengthen your heart and overall health (see page 22)
- Stress reduction techniques (see page 29)
- Medication to help lower your blood pressure and keep it low
- Help to stop smoking, which will prevent damage to your heart, lungs and blood vessels (tips to get you started are on page 30).

More information about high blood pressure is available online from the Centers for Disease Control and Prevention at cdc.gov/bloodpressure.
Peripheral vascular disease

Diseases of the blood vessels that occur outside of the heart and brain are called “peripheral vascular disease” (PVD). Typically the condition occurs as a narrowing of the passageways that carry blood to the arms, legs, stomach or kidneys.

There are two types of these circulation disorders:

- **Functional PVD** is often related to a spasm that comes and goes and the effects are usually short term.

- **Organic PVD** is caused by abnormalities in the blood vessels, including inflammation and tissue damage. Peripheral artery disease (PAD) is a type of organic PVD caused by plaque buildup on the inner walls of arteries, which blocks normal blood flow.

PAD is a dangerous condition. Restricted blood flow to the kidneys, stomach, arms, legs and feet can lead to damage to your organs, gangrene and amputation of limbs. People with PAD frequently have plaque buildup in the blood vessels that lead to the heart and brain as well. These individuals are at a higher risk of death from heart attack or stroke.

Signs of poor leg circulation include:

- Cramping
- Fatigue
- Heaviness, pain or discomfort in the legs and buttocks during activity

Signs of poor kidney circulation are:

- Sudden high blood pressure
- Blood pressure that is hard or impossible to control with medication

Treatment

If you are diagnosed with PAD, your healthcare provider may prescribe medicine to help improve your circulation, reduce clotting and lower cholesterol. Various lifestyle changes described in this book can also help improve your symptoms or keep them from getting worse. Talk to your Moda health coach about lifestyle changes you feel are important to make. A small number of patients may need angioplasty (a procedure to open narrow or blocked arteries) or surgery. Certain over the counter cold medications that contain pseudoephedrine can constrict blood vessels and may increase PAD symptoms.1 Talk to your healthcare team for more information.

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1 Mayo Clinic, 2013
Talking with your healthcare team

Many types of health professionals can help you manage your heart health. Each professional approaches the treatment of heart disease in a slightly different way. Some healthcare providers focus on very specific types of diseases and conditions, while others take a more general approach. It is best to choose one main provider who helps coordinate your care. If necessary, your providers may also refer you to other specialists who can be of help.

The different providers you work with make up your personal healthcare team. Your primary care provider or health coach can help you determine which types of health professionals might be of most help to you. Be sure to let each provider know you are working with the others so that they can coordinate your treatment plan.

Ask questions
It’s important to talk with your healthcare provider so that he or she has a clear understanding of your health concerns. Be sure to communicate symptoms, medication side effects and your personal concerns to your provider. Part of your provider’s job is to answer questions about your condition, your care and your medications. Use the questions below and on the next page to help get the conversation started.
- What are the goals for my treatment?
- Can I expect to be completely cured?
- What is my own role in the treatment plan?
- How can I reach you in an emergency?
- How will other illnesses I have affect my treatment?

Who’s on your team
Primary care physicians manage your overall care and will provide referrals as needed.
Cardiologists are physicians certified to treat problems of the cardiovascular system — the heart, arteries and veins of the body.

Physical therapists work with patients to improve joint function, flexibility and strength.
Occupational therapists teach people to live as independently as possible after a heart attack or stroke, through assistance and training in performing daily activities.
Dietitians teach patients ways to use a heart-healthy diet to improve overall health and reduce symptoms.
Nurse educators specialize in helping patients understand their overall condition and implement treatment plans.
Psychologists help patients cope with difficulties in the home and workplace resulting from their medical conditions.
Social workers assist patients with social challenges caused by disability, unemployment and financial hardships. They offer home healthcare and assist with other needs resulting from patient medical conditions.

To find details about your plan benefits and eligibility for specific healthcare professionals, call Moda Health Customer Service at 503-243-3962 or toll-free at 877-605-3229, or visit myModa at modahealth.com/mymoda.
**Ask your healthcare provider**

If you have been diagnosed with heart disease, it's important that you understand your specific condition. Talk to your doctor and get all of your questions answered. Below are a few sample questions to help you start the conversation. Try to think of other questions that relate to your personal situation:

When can I go back to work?

What should I do when I feel depressed?

Can I drive my car?

What diet should I follow?

Can I still be physically active?

How much salt can I eat?

Can I have sex as usual?

What is an ideal weight for me?

Can you explain how I should take my medicine?

Other questions:

When should I call my healthcare provider?
Cholesterol plays an important role in your body. It is required for the production of steroids, sex hormones, bile acids and cellular membranes — all of which are used by our bodies to keep us healthy. Cholesterol itself can’t dissolve in blood. It has to be transported to and from the cells by carriers called lipoproteins.

Cholesterol in your body comes from animal-based foods, such as meats, eggs and dairy, as well as from normal cholesterol production in your liver.

Your lipid profile
Your lipid profile helps determine your heart health and risk for cardiovascular disease. This profile includes your total cholesterol, low-density lipoprotein (LDL) cholesterol, high-density lipoprotein (HDL) cholesterol and triglyceride levels. There are standard healthy ranges for each of these elements. Use the chart on page 15 to track your personal goals and levels over time.

Eating the right foods and getting enough physical activity can help keep your numbers in a healthy range. Some people also need medication to control cholesterol levels. Your healthcare provider can help you create a plan for this.

Ask your doctor
1. How often should I have my lipid profile tested?
2. What are my goal cholesterol and triglyceride levels?

Types of cholesterol

LDL cholesterol
LDL (or “lousy”) cholesterol carries cholesterol from your liver out to your body through your blood vessels. When too much LDL cholesterol circulates in the blood, it can build up on the walls of your arteries that feed the heart and brain. It can combine with other substances in your body to create plaque, causing your arteries to narrow and become less flexible, which can increase your risk of heart attack.

LDL levels are affected by what you eat, especially saturated fats, trans fats and dietary cholesterol (see Chapter 6 for more information about how your diet can contribute to heart disease). High levels of LDL can indicate a higher risk for heart disease.

HDL cholesterol
HDL (or “healthy”) cholesterol carries cholesterol back to the liver to be eliminated from the body. This is good for keeping your blood vessels clear. You want this number to be high, unlike the other numbers in your profile. Low levels of HDL can put you at higher risk of heart disease. Losing excess weight, being more active, maintaining a heart-healthy diet and quitting smoking can help raise a low HDL level. (See page 30 in Chapter 9 for strategies on how to quit smoking).

Triglycerides
Triglycerides, a form of fat in the bloodstream, are an important piece of the lipid profile. Triglycerides make up most of the fat in your body and serve as storage for energy. They come from food, and your body also creates them. Being overweight, not enough physical activity, smoking cigarettes and aging can contribute to high triglyceride levels, which can increase your risk of heart disease. A healthy diet and medication (if necessary) can help lower your triglycerides. Limiting your consumption of sugars and alcohol also is important for a healthy triglyceride level.
Track your numbers

The status of your health is measured through a variety of tests and numbers. It’s important to understand what all of these numbers mean and what your personal goals are for each aspect of your health. Work with your healthcare provider to set goals for your blood pressure reading, cholesterol levels, body mass index (BMI) and waistline measurement.

Write down your target number for each category. With each doctor’s visit, write down your results for the following tests.

My target numbers

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<td>HDL cholesterol</td>
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<td>Triglyceride level</td>
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<td>Waistline</td>
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<td>BMI</td>
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Healthy numbers

Blood pressure (mm Hg)

Systolic (top number)
- Less than 120 = normal
- 120–139 = prehypertension
- 140 or higher = hypertension

Diastolic (bottom number)
- Less than 80 = normal
- 80-89 = prehypertension
- 90 or higher = hypertension

Total cholesterol
- Less than 200 mg/dL = normal
- 200–239 mg/dL = borderline high
- 240 mg/dL or higher = high

HDL cholesterol
The higher the number, the better.
- Men: 40 mg/dL or higher = desirable
- Women: 50 mg/dL or higher = desirable

Triglycerides
- 150 mg/dL or less = normal
- 150–199 mg/dL = borderline high
- 200–499 mg/dL = high
- 500 mg/dL or higher = very high

LDL cholesterol
The lower the number, the better.
- Less than 100 mg/dL = optimal for people with heart disease or diabetes
- 100–129 mg/dL = higher than optimal
- 130–159 mg/dL = borderline high
- Above 160 mg/dL = high

If you are at high risk of a heart attack or have a combination of heart disease and diabetes, your healthcare provider may set your LDL cholesterol goal to less than 70 mg/dL.

Waistline
- Men: 40 inches or more = high risk
- Women: 35 inches or more = high risk
# Blood pressure and cholesterol

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# Body mass index and waistline

**Figure out your BMI**

\[
\text{BMI} = \frac{\text{weight in pounds} \times 703}{\text{height in inches} \times \text{height in inches}}
\]

**Example**

\[
\text{Example} = \frac{(140 \times 703)}{(64 \times 64)} = 24
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<table>
<thead>
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<th>Date</th>
<th>Waistline</th>
<th>Weight</th>
<th>BMI</th>
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A heart-healthy diet

A healthy diet plays a key role in maintaining overall good health and preventing cardiovascular disease. Fats and cholesterol in foods can increase your risk of heart disease. Sodium (salt) also can raise your risk of heart disease if you have high blood pressure. Foods high in fiber can help lower your risk.

If you’ve been diagnosed with a heart condition, don’t worry. You can still eat the foods you love and keep your heart happy. A heart-healthy diet includes plenty of fruits and vegetables, whole grains, lean protein and low- or nonfat dairy products.

» **Eat fruits and vegetables** — Enjoy between five and nine (or more) servings of fruits and vegetables every day.

» **Eat foods with fiber** — Oat bran, oatmeal, apples, carrots and beans are especially good. This kind of fiber actually helps lower cholesterol. Foods high in fiber can also help you control weight because these foods make you feel fuller longer. Other sources of fiber include fruits, vegetables and whole-grain breads and cereals. Strive to eat 20 to 35 grams of fiber a day.

» **Eat foods that contain plant sterols and stanols** — These occur naturally in fresh fruits and vegetables, nuts, seeds and legumes, but you can find some foods that are fortified with them, including margarine, juice and yogurt. When consumed on a daily basis, plant sterols and stanols can lower total cholesterol and LDL cholesterol and reduce your overall risk for heart disease.

» **Avoid saturated and trans fats** — These raise your LDL (lousy) cholesterol. See more on fats on page 17.

» **Lower your sodium intake to less than 1,500 mg per day** — Sodium can sometimes make your body retain too much water, making your heart work harder and raise blood pressure. Try to purchase fresh food or plain frozen food as much as possible. Remove the salt shaker from the table and stove.

» **Season foods with herbs, spices, lemon juice or vinegar** — Limit your use of soy sauce and other bottled sauces, onion or garlic salt and packaged seasoning mixes.

» **Pay attention to food labels** — Choose foods that are low in fat and sodium and high in fiber.

» **Limit alcohol** — If you drink alcohol, limit your intake to one drink per day if you are a woman and two drinks per day if you are a man.

Understanding fats

Not all fat is the same. Some fats are better for you than others. Understanding the differences between fats is important to maintaining a healthy heart and arteries, and to feeling your best.

**Monounsaturated fats — use on a regular basis**

Monounsaturated fats can actually help lower LDL (lousy) cholesterol.

» Olive, canola and peanut oils

» Fat in avocados

» Fat in almonds, peanuts and pecans

**Polyunsaturated fats — use with moderation**

Polyunsaturated fats can be used in moderation without raising your total cholesterol.

» Safflower, corn, sunflower and soybean oils

» Squeeze-bottle and soft-tub margarine

» Sunflower seeds
What to look for on a food label

When shopping, take time to compare food labels so that you can make the healthiest choices. Here’s what to look for:

### Omega-3 fatty acids

Omega-3 fatty acids are polyunsaturated fats that are especially good for helping prevent hardening of the arteries, lowering triglyceride levels and reducing blood pressure. For heart health, omega-3s should be consumed on a regular basis through food sources such as:

- Albacore tuna, mackerel, salmon, sardines, Atlantic herring, swordfish and lake trout
- Flaxseed oil, soybean oil and canola oil
- Walnuts

*If you do not eat foods rich in omega-3s, then supplementation with fish-oil pills may be an option. Check with your healthcare provider.

### Serving size

Numbers on the label are based on this amount. If you eat more than a single serving, you’ll get more calories, fat, cholesterol and sodium.

### Saturated fat

Choose foods low in saturated fat.

### Trans fat

Choose foods with no trans fat.

### Cholesterol

Look for foods low in cholesterol.

### Fiber

Choose foods that are high in fiber. Eat 20 to 35 grams of fiber a day.

### % Daily value

Nutrition researchers recommend consuming a certain amount of nutrients each day. The percentages listed on food labels indicate how much of the recommended daily amount of a particular nutrient is in the food we are eating. Always choose foods that have lower percentages of total fat, saturated fat and sodium.

### Ingredients

Choose foods made with whole grains. Avoid foods that include hydrogenated oils. NOTE: If hydrogenated oils are listed as an ingredient, then “no trans fat” actually means “less than 0.5 grams.”

### Nutrition Facts

<table>
<thead>
<tr>
<th>Amount per serving</th>
<th>% Daily Value</th>
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<tbody>
<tr>
<td>Calories 45</td>
<td>Total Fat 0g</td>
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<tr>
<td>Calories from Fat 10</td>
<td>Saturated Fat 0g</td>
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<td>Trans Fat 0g</td>
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<td>Cholesterol 10mg</td>
<td>Sodium 130g</td>
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<td>Total Carbohydrate 8g</td>
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<td>Dietary Fiber less than 3g</td>
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<tr>
<td>Sugars 1g</td>
<td>Protein 2g</td>
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**Ingredients:** Enriched egg noodles (wheat flour, egg yolk, iron, folic acid), yeast extract, carrots, partially hydrogenated corn oil, salt, natural flavors.

*Percent Daily Values are based on a 2,000 calorie diet.*
Assess your habits

Ask yourself the following questions about your diet. You may already have eating habits that are good for your heart.

1. Do I eat at least five servings of fruit and vegetables each day?  □ Yes  □ No

2. Do I choose lean cuts of meat and low- or nonfat dairy products?  □ Yes  □ No

3. Do I compare food labels and choose items low in fat, cholesterol and sodium, and high in fiber?  □ Yes  □ No

4. Do I eat mostly fresh foods?  □ Yes  □ No

5. Do I get some physical activity most days?  □ Yes  □ No

If you answered yes to any of these questions, you are already making heart-healthy choices. If you answered no to any of them, think about what you can do to make these lifestyle changes. Work with your healthcare provider to set goals and make a plan that feels manageable.

Write down one dietary goal that you would like to work toward first:

_________________________________________________________________________

_________________________________________________________________________

Grocery list

Use the following list as a guide for making healthy food choices. Check off the foods that you already include in your diet on a regular basis. Experiment with adding some of the other items the next time you do your grocery shopping.

- Whole grains such as brown rice, barley, quinoa, whole-wheat couscous and whole-wheat pasta
- Whole-grain breads and cereals
- Wheat bran and oat bran
- Fresh or frozen vegetables — not in butter or cheese sauce
- Fresh, frozen or dried fruit
- Fresh fruit juice
- Canned fruit in juice or water
- Lean beef and pork
- Salads with fat-free or low-oil dressing
- Skim or nonfat milk
- Nonfat and low-fat yogurt
- Part skim and nonfat cheese
- Nonfat sour cream and cream cheese
- Beans, peas and legumes
- Peanuts, almonds and walnuts
- Sesame seeds and sunflower seeds
- Soybeans, soy milk, tofu and miso
- Fresh, frozen and canned fish, including salmon, cod or tuna (eat fish at least twice a week)
- Baked or broiled poultry (remove skin before eating)
- Egg whites or egg substitute — three to five egg yolks per week are OK
- Margarine, juice, yogurt and other foods that have been fortified with plant sterols and stanols
- Sandwiches made with whole-grain breads and lean meats, including tuna, turkey, chicken or vegetables
- Vegetarian burgers
- Low-fat soups and stews with more vegetables or beans than meat
- Frozen fruit bars and sorbets
- Low-fat, whole-grain crackers
- Air-popped or low-fat microwave popcorn
- Angel food cake
Daily food diary  
Making dietary changes can be difficult. Keeping a food log can help you see the big picture of what you are eating so that you can work toward a more balanced diet. Keep track of your food intake for each meal over the course of a couple of weeks, then share the information with your health coach or doctor. The log can be useful in creating a new diet plan.

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*Talk to your health coach about how many servings you need each day. For a quick calorie resource, please visit choosemyplate.gov.
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*Talk to your health coach about how many servings you need each day. For a quick calorie resource, please visit choosemyplate.gov.
Physical activity can improve your overall health — and specifically your heart health. Being active helps lower LDL (lousy) cholesterol and raise HDL (healthy) cholesterol, improves sleep and increases your energy during the day.

If you have cardiovascular disease, it’s important that you work with your healthcare provider to develop the best physical activity plan for your situation. Even if you have a serious health problem, physical activity can improve your overall quality of life. Some heart conditions require that you avoid strenuous activity, so moderate or light activity would be a better choice. Your doctor may want to give you a complete physical exam before making recommendations for physical activity.

In general, try to get about 30 minutes of physical activity on most days. Start slowly, and don’t overdo it. If you need to work up to this, experiment by breaking activity into three 10-minute sessions every day.

Also, try to build an activity into your normal routine. Take the stairs when you can, ride your bike or walk to work, and park farther away in parking lots.

When you start a new physical activity program, pay attention to how you feel while exercising as well as immediately afterward. Contact your doctor right away if you experience shortness of breath, chest pain, dizziness or severe nausea while working out.

What do you like to do?

Activity can take many forms. Look at the following list of movement activities and put a check next to the ones that you enjoy doing.
- Jogging
- Dancing
- Yoga
- Biking
- Walking
- Swimming
- Aerobics class
- Gardening/yard work
- Team sports, such as softball or kickball

Can you think of anything else?

Get the most out of your physical activity by following these guidelines:
- Wear comfortable clothes and shoes.
- Warm up before you start by walking slowly or in place and stretching.
- Choose an activity that you enjoy.
- Start with easy, short activities and build on them to avoid injury.
- Don’t push too hard. You should be able to talk during physical activity. If it takes longer than 10 minutes to recover from physical activity, you’re working too hard.
- Cool down and stretch again when you are finished.
- Drink plenty of water before, during and after your workout.
**Your activity goal**

List your physical activity goals. Be specific. Include how often and how long you will be active. Be sure your goal is meaningful and important to you and that it is something you know you can achieve. You can work up to more and/or harder activity as time goes on.

Next, fill in the activity journal so you can keep track of how you are doing with your goal.

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<tr>
<th>Date</th>
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<th>How long</th>
<th>How I felt</th>
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How to stay motivated

It’s hard enough to start a physical activity program, but sticking to it also can be a challenge. Ask a friend to start the program with you, and keep one another motivated. Encourage your family to be active — it’s a great way to spend time together and you’ll be helping them develop good health habits, too.

Do a variety of activities. Walk one day, swim the next, then go for a bike ride on Saturday. Learn a new sport or take lessons to improve one that you already enjoy. Doing different activities also benefits different parts of your body for overall good health.

If you live in an area where weather can be bad, think of alternative activities that you can do indoors. Join a gym, find an activity-based group, or rent an exercise DVD and work out in your living room. Walk at the mall if it is raining outside.

If you feel like giving up, remind yourself about why you started the program. Also, think about what you’ve already achieved and how the activity has made you feel.

If you have painful cramping in the hips, thighs or calves while you are walking, climbing stairs or exercising, let your healthcare provider know right away. This is the most common symptom of peripheral artery disease. PAD affects about 8 million people in the United States.
If you are diagnosed with cardiovascular disease, it’s possible that your doctor will prescribe some type of medication to help you manage your condition. You will have regular checkups to keep track of your weight, blood pressure and pulse, and to discuss any side effects you might be having. Be sure to ask questions and raise any concerns you have about your medication or your heart condition. During these visits, your doctor may decide to conduct additional blood work or other lab tests.

Cardiac drugs approved by the Food and Drug Administration (FDA) should be used only as part of a program that also includes diet, physical activity and behavioral changes.

**Take an active role**

Prevent drug interactions and other health problems by following these guidelines:

- Fill all your prescriptions at the same pharmacy.
- Make sure you understand how to take each type of medicine. Ask your doctor or pharmacist to explain anything you don’t understand.
- Tell your doctor and pharmacist about all other prescription and nonprescription medicines you take, including vitamins and other supplements.
- Tell your doctor and pharmacist if you have any medical conditions or allergies to any medicine or food.
- Tell your doctor if you are pregnant or breastfeeding.
- Keep a list of all your medications and their dosages with you at all times. The list should include the medication name, its purpose and when and how to take it.

Work with your healthcare provider or health coach to keep track of your medications. Always ask questions if you don’t understand something.
## Keep track of your medicine

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</table>
Other factors

So far, we’ve looked at how cholesterol and blood pressure numbers, eating habits and daily physical activity affect your heart health. A few other factors also play a role in cardiovascular disease.

Stress

Stress is your body’s response to change, and everyone experiences this differently. One person might find a situation stressful that is enjoyable to someone else — such as driving or rock climbing. Most people cannot avoid stress completely. We have busy lives, full of challenges and unexpected events that can be difficult.

Some stress is actually good for us, such as when we work to overcome fears or accomplish goals — speaking in public, for example. And some stress is actually fun — like riding a roller coaster or watching a scary movie.

However, some stress makes your heart work harder. It can raise blood pressure and cholesterol. It’s important to learn healthy ways of coping with stressful situations. Some people deal with stress by smoking a cigarette or binge eating. Neither of these approaches is good for your heart. Other people respond to stress with anger; these people tend to have more heart attacks.

How can you tell if your body is stressed?

This might seem like an obvious question, but sometimes stress sneaks up on us. Stress can affect you in a variety of ways:

- You might feel angry, afraid, excited or helpless.
- You might have trouble sleeping.
- It can give you aches and pains in your head, neck, jaw and back.
- It can lead to excessive eating, drinking, smoking or drug use.
- You may feel no effects at all, even though your body is experiencing it.

While you cannot change the outside forces that make you feel stressed, you can change the way you react to them. Try to accept the things you cannot change instead of worrying about how to “fix” them.

Here are some tips for reducing the effects of stress:

- Balance work and play every day.
- Don’t stuff your emotions — talk to a friend or family member about how you feel.
- Laugh more.
- Be physically active.
- Meditate or breathe deeply for 15 minutes each day, thinking about peaceful things.
- Look for the positive side in all situations.
- Limit your time spent in situations that, or with people who, upset you.
- Don’t take on more than you can handle. Learn to say “no” to requests that you know will be stressful or that will cause you to be too busy.
- Limit alcohol, don’t overeat and don’t smoke.
Sleep

Getting a good night’s sleep is important for overall good health, and heart health in particular. Recent studies have shown that people with sleep apnea have a higher risk of heart disease and that getting a good night’s sleep is just as important to heart health as diet and exercise.\(^1\)

- Stick to a sleep schedule. Go to bed and get up at the same time each day, even on weekends.
- If you are still awake after 20 minutes, get out of bed. Go to another room and do something relaxing.
- Relax before bed by taking a warm bath, reading or doing easy stretching activities.
- Avoid taking naps. If you do need a nap, keep it to less than one hour and never after 3 p.m.
- Do not have any caffeine after lunch.
- Do not have any alcohol within six hours of your bedtime. Alcohol may help you get to sleep, but it keeps you in lighter sleep stages.
- Do not have a cigarette or any other source of nicotine before bedtime.
- Don’t go to bed hungry, but don’t eat a large meal before bedtime, either.
- Avoid physical activity five to six hours before bedtime. Be sure to get your daily physical activity in earlier in the day.
- A good sleeping environment can help you go to sleep. Get rid of anything that might distract you from sleep, like noises and lights, a TV or a computer. Also, make your bedroom dark and a little bit cool.
- Have the right sunlight exposure. Daylight is key to regulating daily sleep patterns. Try to get outside in natural light for at least 30 minutes a day.
- Commit to getting a full night’s sleep as often as possible. For most people this means six to eight hours of sleep.

See a healthcare provider if you continue to have trouble sleeping. If you consistently find yourself feeling tired or not well-rested during the day despite spending enough time in bed at night, you may have a sleep disorder. Your healthcare provider or a sleep specialist should be able to help you.

\(^1\) American Heart Association, 2012

Smoking

Smoking harms almost every organ in your body, including your heart and blood vessels. According to the National Institutes of Health, cigarette smoking causes about one in five deaths in the U.S. each year.

**How to quit smoking**

One way to quit smoking is to keep track of when you smoke, why you smoke and how you feel about it. Understanding what motivates you to smoke, even though you know it is bad for you, can help you find more positive ways to manage the stress in your life. For example, if you feel agitated, taking a walk instead of smoking a cigarette can help you calm down.

Use the chart on page 31 to track your smoking habits. First, write down the reasons why you want to quit smoking. Wrap the sheet of paper around your cigarette pack with a rubber band. Each time you smoke, write down in the table the date and time of day, why you want to smoke and how important the cigarette is to you on a scale from 1 (not very important) to 5 (really important).

Why I want to quit smoking:

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________
Review your list of reasons for smoking and continue adding to the list. Find new ways of responding to these situations. For example, if you smoke after dinner to relax, consider taking a walk instead. Try to smoke less — if a cigarette isn’t as important to you on the scale from 1 to 5, don’t smoke it.

Next, set a target date to not smoke at all. Don’t buy a new pack after you finish the one you’re smoking. Set a manageable goal — try to stop smoking for just 48 hours.

When you are ready to quit completely, throw out all cigarettes, matches, lighters and ashtrays.

- Keep yourself busy — go to the movies, get involved in activities you enjoy, spend time with friends.
- Engage in physical activity — physical activity can help calm your nervous system, improve your mood and clear your mind.
- Talk to your friends and family for support.
- Avoid situations that you relate with smoking, such as going out for a drink.
- Find healthy substitutes for smoking, such as chewing sugarless gum, eating carrot sticks or doing crafts or other things with your hands.
- Find new ways to relax — try deep breathing or meditation, or listen to a relaxation CD.

Reward yourself when you get through a whole day or a week without smoking. Take yourself out to a movie or calculate the money you saved from not buying cigarettes and buy yourself something special.

**Other benefits of not smoking**

Besides a healthier heart, when you quit smoking, you are likely to experience other benefits:

- A greater sense of smell
- No more smoker’s cough
- Better digestion
- More physical energy
- Easier breathing
- Ease when climbing stairs

**Ready to quit?**

The National Tobacco Quit Line is a free, telephone-based assistance program that helps callers quit tobacco. It offers free information and confidential, evidence-based cessation counseling. Get help now by calling 1-800-QUIT-NOW (1-800-784-8669). Talk with your health coach about resources available to help you quit smoking, including other benefits that might be available to you.

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**Track your smoking habits**

<table>
<thead>
<tr>
<th>Date/time</th>
<th>Why I want to smoke</th>
<th>How important is the cigarette on a scale from 1 (not very important) to 5 (really important)?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example: 6/21, 7:30 p.m.</td>
<td>Smoking after dinner helps me relax.</td>
<td>1 2 3 4 5</td>
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</tr>
</tbody>
</table>
Your action plan

If you have been diagnosed with cardiovascular disease, you most likely have a lot of information to take in, and at first, it can be confusing. Ask your healthcare provider to help you understand your condition. Bring a list of questions to each of your regular doctor’s office visits. Be sure to take notes during your visit.

- Always ask “Why?” before agreeing to any medication, test or treatment.
- Know what medications you are taking, when to take them, what they do and any side effects they might cause.
- Know what blood tests you need to have and how often.
- Know your lipid profile and what your test goals are.
- Ask about all of your blood test results and what they mean for you.
- Ask whether there are other medications you need because of the blood test results.
- See your dentist twice a year for an exam and dental cleaning.
- See your healthcare provider every fall for a flu shot.
- Be physically active most days of the week.
- Monitor your daily food intake.
- Try to maintain a healthy weight. This could mean losing 5 to 10 percent of your current weight.

Work with your healthcare team to create the best plan for taking care of your heart health. Try to break your plan down into easy-to-follow steps, and take each step one at a time. Use this workbook to track your progress.
Resources

Contact the organizations below for more information, educational programs and other services.

**American Heart Association**
americanheart.org

**American Diabetes Association**
1-800-DIABETES
diabetes.org

**Mayo Clinic**
mayoclinic.com

**“Your Guide to Lowering High Blood Pressure”**
The National Heart, Lung, and Blood Institute (NHLBI)
nhlbi.nih.gov/hbp

**National Cholesterol Education Program**
The National Heart, Lung, and Blood Institute (NHLBI)
nhlbi.nih.gov/about/ncep
Questions? Call 877-277-7281 or visit modahealth.com.