

# HealthWorks

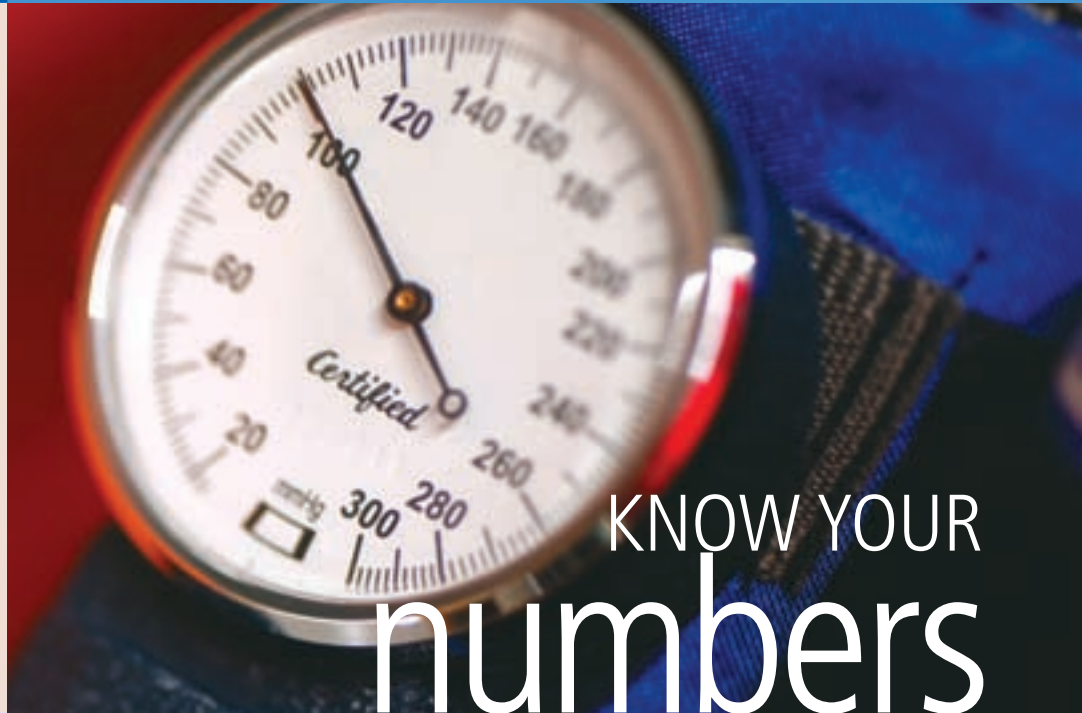
CARDIAC NEWS AND INFORMATION

## Blood pressure ups and downs

Your blood pressure rises and falls all day. It's lowest while you sleep, and it goes up when you're awake. Blood pressure also can rise if you're excited, nervous or active. When you're sitting or standing still, though, your blood pressure stays fairly steady.

It's best for blood pressure to remain lower than 120/80 mm Hg. If your pressure is higher, you'll want to work with your doctor to bring it back down to a healthy level.

*Source: National Heart, Lung, and Blood Institute*



## KNOW YOUR numbers

## Go easy on salt

For some people, sodium, including salt, increases blood pressure. So if you have high blood pressure, you'll want to limit your daily sodium intake to less than 2,400 mg. Your doctor may advise even less.

To cut back on sodium:

- Choose low- or reduced-sodium or no-salt-added foods.
- Limit convenience foods, such as frozen dinners and canned soups. These foods tend to be high in sodium.
- Use herbs, spices and salt-free seasoning blends for cooking and at the table.



*Source: National Heart, Lung, and Blood Institute*

BLOOD PRESSURE MEASURES THE force of blood against artery walls as the heart pumps blood through the body.

High blood pressure, or hypertension, means that your heart is working too hard. Left untreated, this potentially serious condition can lead to heart disease, stroke, kidney disease or blindness.

Blood pressure is measured in millimeters of mercury, or mm Hg. The top number (systolic) represents pressure during heartbeats. The bottom number (diastolic) is the pressure when the heart is relaxed between beats.

The National Institutes of Health puts blood pressure levels in these categories: ■ **Normal**—below 120/80 mm Hg. ■ **Prehypertension**—120-139/80-89 mm Hg.

■ **Stage 1 hypertension**—140-159/90-99 mm Hg. ■ **Stage 2 hypertension**—at or greater than 160/at or greater than 100 mm Hg.

For people with diabetes, high blood pressure starts at 130/80.

High blood pressure means that your heart is working too hard.

If you have high blood pressure, your doctor may suggest:

- Losing weight if you're overweight.
- Exercising regularly.
- Following a healthy, low-fat diet that includes plenty of fruits and vegetables.
- Quitting smoking.

In some cases, medication may also be needed.

# HEALTH facts

## SPOUSES OF SMOKERS AT RISK

If you're a smoker married to a nonsmoker, do something that will help both of you: Quit. Nonsmokers who are married to smokers are at high risk of having a stroke. The good news: If you quit, you'll lower the risk that your spouse will have a stroke. And you'll help protect your health as well.

—American Journal of Preventive Medicine

## WATCH OUT FOR ADDED SUGARS

One way to help control your weight is to cut back on beverages and foods with added sugars.

The calories in these products can add up quickly. Examples of added sugars include sucrose, glucose, fructose, dextrose and high-fructose corn syrup. Read the ingredient list on labels, and choose items that don't have added sugars in their first four ingredients.

—American Heart Association



# diuretics

## WHAT YOU NEED TO KNOW



**Your doctor can tell you what you need to know about taking a diuretic, including the best time to take one and what you should eat.**

SOMETIMES FLUID NEEDS A little help getting where it needs to go.

And in your body, a diuretic—or water pill—may be just the nudge your kidneys need to help excess fluid make an exit.

Diuretics work by helping your kidneys remove sodium and water from the bloodstream and convert them to urine. As that urine leaves your body (yes, via more frequent trips to the bathroom), it can:

- Help relieve the workload of your heart, since there's less fluid to pump throughout your body.
- Decrease the buildup of fluid in your lungs and other parts of your body, such as ankles and legs.

Besides frequent urination, diuretics can cause other side effects, including: ■ Dizziness. ■ Headache. ■ Thirstiness. ■ Muscle cramps. ■ Upset stomach.

To help get the frequent bathroom trips out of the way during the day (instead of at night), many people take their diuretic in the morning.

## A few cautions

Some types of diuretics remove potassium from the body, so you may need to take a supplement or eat more potassium-rich foods—such as bananas—or do both. Ask your doctor in order to be sure, though, because too much potassium can also be a problem.

Call your doctor if, while taking a diuretic, you develop: ■ A severe rash. ■ Trouble breathing or swallowing. ■ Gout, a condition that can cause pain and swelling in the joints (often the big toe). Your prescription may need to be adjusted.

Sources: American Heart Association; U.S. Food and Drug Administration



## HealthWorks

HEALTHWORKS is published as a community service for members of BLUE CROSS & BLUE SHIELD OF RHODE ISLAND, 444 Westminster St., Providence, RI 02903, telephone: 401-459-1000, website: [bcbsri.org](http://bcbsri.org). BLUE CROSS & BLUE SHIELD OF RHODE ISLAND is an independent licensee of the Blue Cross Blue Shield Association.

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HTN23452p

# legs

## PROVIDE WARNING SIGNS OF PAD

**Y**OU MAY THINK ONLY arteries that supply blood to the heart or brain can become blocked with plaque and cause problems.

But actually, arteries throughout the body can narrow and suffer reduced blood flow due to plaque. When that happens, the condition is known as peripheral arterial disease, or PAD. And the most common place for PAD to strike is in the arteries of the legs.

It's important to recognize warning signs of PAD and to get treatment for it, since it can put you at risk for heart attack, stroke and leg amputation.

Signs of PAD include: ■ Pain, cramping, fatigue or heaviness in the leg or hip muscles when you're active (such as walking or climbing stairs) but that goes away when you rest. ■ Sores on your feet or legs that don't heal well. ■ Pain, burning or aching in your legs or feet when you're resting. ■ Change in skin color on your legs. ■ Cooler spots on parts of your legs or feet.

Smoking is the No. 1 risk factor

PAD can put you at risk for heart attack and stroke.

for PAD, reports the American Medical Association. If you smoke, it is imperative that you stop; otherwise, treatment may not be effective.

Other risk factors include: age—PAD is more common after age 60; diabetes; high blood pressure; and high cholesterol.

### Treating PAD

An essential part of treating PAD is adopting healthy habits. Don't smoke. Keep your blood pressure, cholesterol and blood sugar under control. Exercise regularly. Eat more whole grains, vegetables and fruit, and eat less salt, trans fat, saturated fat and cholesterol. And try to lose weight if you're overweight.

Your doctor may also prescribe medication to help prevent blood clots or to keep pain at bay when you're on the move. You may also need medication to keep diabetes, blood pressure or cholesterol in check.

More severely blocked arteries may require a procedure to open the artery or to bypass it.

*Additional source: National Institutes of Health*

## Diagnosing PAD

If your doctor suspects that you have peripheral arterial disease, he or she will likely start with a few preliminary checks, such as:

- Asking about your medical history and any symptoms you have had.
- Examining your legs and feet for their pulse, color and temperature.
- Inspecting your lower limbs for any wounds that aren't healing well.

Other tests may be done as well, including:

### **Ankle-brachial index, or ABI.**

For this test, the blood pressure in your ankle on one side of your body is compared to the pressure in your arm on the same side. Those two numbers should be roughly equal. If the pressure in your ankle is significantly lower, it's a sign that the arteries in your leg are probably narrowed.

**Ultrasound.** Sound waves are used to show the structure of your arteries as well as blood flow.

**Angiogram.** This test uses an injected dye and x-rays to check for narrowed or blocked arteries.

*Source: Society for Vascular Surgery*

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# THE FACTS ABOUT fat

Most of the fat you eat should be unsaturated.

**FAT ISN'T JUST FAT**—THERE'S more to it than that.

Here's the skinny:

**Saturated fat** is the main dietary cause of high blood cholesterol. It's found mostly in animal products, such as high-fat cuts of meat, butter, cream, milk and cheeses. Certain plant products—palm oils, coconut oils and cocoa butter—also contain saturated fat.

**Trans fats**, or partially hydrogenated oils, are created during food processing when liquid oils are converted to solid fats. Trans fats are often found in commercially baked items, such as cookies, crackers and pies.

In the body, trans fats raise bad (LDL) cholesterol and lower good (HDL) cholesterol.

**Unsaturated fats**—when used in moderation and in place of saturated and trans fats—may actually help lower blood cholesterol.

There are two types: ■ Polyunsaturated fats are typically liquid at room temperature and when chilled. ■ Monounsaturated fats are typically liquid at room temperature but start to turn solid when chilled.

Unsaturated fats are found in fish such as salmon, mackerel and trout; nuts, such as walnuts and sunflower seeds; and vegetable oils, such as soybean, olive, canola, sesame, corn and safflower.

Most of the fat you eat should be unsaturated. But limiting your intake of all types of fat is best.

Sources: American Heart Association; U.S. Centers for Disease Control and Prevention



## Artichoke salad with baby greens\*

### Ingredients

- 1 cup of baby field greens
- 6 cherry tomatoes, halved
- ½ can (14 oz.) artichoke hearts, drained and cut into quarters\*\*
- 1 tablespoon rice vinegar
- 2 teaspoons extra virgin olive oil
- 1 small clove garlic, finely minced
- Salt and freshly ground black pepper, to taste
- ½ tablespoon grated Parmesan cheese

### Instructions

1. In serving bowl, arrange greens, tomatoes and artichoke hearts.
2. In separate small bowl, whisk together vinegar, olive oil, garlic, salt and pepper. Toss into salad, and garnish with cheese.

Preparation time: 15 minutes

### Nutrition information

Makes 2 servings.

**Per serving:** 91 calories, 5g total fat (<1g saturated fat), 9g carbohydrates, 4g protein, 2g dietary fiber, 318mg sodium

\* People with dietary restrictions should check with their physicians before trying the above recipe.

\*\*Remaining artichoke hearts may be refrigerated for up to five days or frozen for one to two months.

Source: Adapted from the American Institute for Cancer Research