

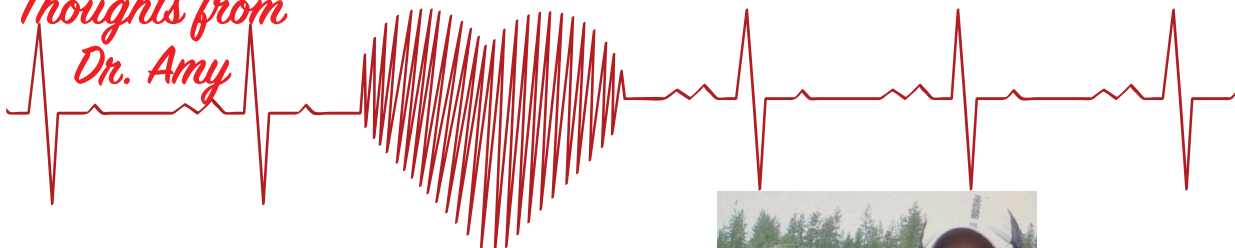
Heart TALK

Heart-healthy and Stroke-free Living with Dr. Amy L. Doneen, DNP, ARNP

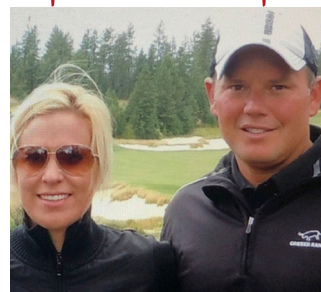
July 2019



*Thoughts from
Dr. Amy*



The Hidden Heart Attack and Stroke Risk Most Doctors Overlook



JP Moore and his wife, Katy.

J.P. Moore thought he was in perfect health until he suffered a “widow-maker” heart attack on July 4, 2014, while riding his mountain bike. The then-42-year-old auto dealer from Richland, Wash., was rushed to the hospital, where tests showed that one of his coronary arteries was 98% blocked and several others were partially blocked. Treatment with angioplasty and a stent saved the young dad’s life. “I left the hospital very confused about why this had happened and what more I could do to avoid another heart attack,” says Moore, a physically fit nonsmoker.

Moore had always passed his annual physicals with flying colors. In fact, a month before his heart attack, his doctor had pronounced him “as healthy as a horse.” Months later, he learned that a \$20 blood test would have revealed that he had a common, inherited cholesterol abnormality that greatly increases risk for heart attacks and strokes, often at a young age. Why wasn’t he checked for this dangerous disorder? Here is a look at this test, why the BaleDoneen Method recommends it, and how the information it provides could help you avoid a heart attack or stroke.

50% of Heart Attacks Happen to People with Normal Cholesterol

Like Moore, about 50% of people who are hospitalized for a heart attack have cholesterol levels classified as “normal” under national guidelines, according to a study of 150,000 people published in *American Heart Journal*. The blood test these patients usually receive certainly sounds comprehensive. Called a “lipid profile” or a “coronary risk panel,” this test checks levels of total cholesterol, LDL (bad) cholesterol, HDL (good) cholesterol, and triglycerides.

According to this test — and other standard methods of evaluating cardiovascular wellness during annual checkups — celebrity fitness trainer Bob Harper, famous for his starring role on the hit TV show “The Biggest Loser,” was the picture of health. Yet he suffered a massive “widow-maker” heart attack at age 52. Both Harper and his doctors were mystified about the cause. As [The New York Times recently reported](#), “His annual checkups had indicated he was in excellent health. How could this have happened to someone so seemingly healthy?”

The Dangerous Cholesterol that Most Doctors Don’t Check

The mystery of Moore and Harper’s seemingly inexplicable heart attacks was solved when they received a \$20 blood test that is not routinely used by medical providers in the United States. This test checks for a common, inherited cholesterol abnormality that has been shown to cause heart attacks: high levels of a blood fat called lipoprotein(a), or Lp(a).

The BaleDoneen Method calls this disorder “the mass murderer” because elevated levels of this cholesterol triple risk for heart attacks, according to three large studies involving nearly

CONTINUED ON PAGE 4



507 S. Washington, Suite 170
Spokane, Washington 99204

BaleDoneen.com



THE SURPRISING STROKE RISK THAT AFFECTS 50% OF AMERICANS OVER AGE 30

Nikki Carney is so dedicated to fitness that she gets up at 4 a.m. every day and runs several miles before heading to work. The second-grade teacher from Spokane, Wash., also eats a heart-healthy diet, has never smoked and gets regular medical checkups. Her doctor has consistently praised her excellent lifestyle and has often told her, “You are the healthiest patient I’ve seen all day.”

Yet in September 2015, Carney landed in the ICU after suffering a stroke at age 42. “Getting that diagnosis was surreal,” says the young mom. “Nobody could explain why it happened and after I left the hospital, I went from doctor to doctor, trying to get answers and do everything I could to stay alive.” Ultimately, she learned that one of the culprits was an often-undiagnosed infection that affects about 50% of Americans over age 30. Here’s a look at this condition, how to find out if you have it, and the best ways to protect your arterial health.



Solving a Medical Mystery in 15 Minutes

A painless 15-minute ultrasound scan of the largest arteries in Carney’s neck — an FDA-approved test called [carotid intima media thickness, or cIMT](#) — revealed one of the causes of her stroke: plaque deposits in her neck arteries. This test measures the thickness of the two inner layers — called the intima and the media — of the carotid arteries, the major arteries of the neck that carry oxygenated blood from the heart to the brain.

Most importantly, cIMT can detect cholesterol plaque growing in the wall of the artery, which is also known as atherosclerosis. If plaque deposits become inflamed, they can rupture explosively, like a volcano, leading to the formation of a blood clot that causes a heart attack or a stroke. The BaleDoneen Method also uses this test to screen seemingly healthy people for hidden signs of atherosclerosis, which often causes no symptoms until it becomes severe enough to trigger a heart attack or stroke. Indeed, 80% of strokes — and 70% of fatal heart attacks — occur in people who had no prior warning signs.

A Red Flag for Heart Attack and Stroke Risk

The plaque deposits in Carney’s neck were relatively small and did not obstruct the flow of blood to her brain. How did they become so inflamed that the athletic young mom of two suffered a stroke at such a young age? A comprehensive BaleDoneen Method evaluation identified a surprising culprit: Like about 50% of U.S. adults over age 30 — about 65 million Americans — she had periodontal disease (PD).

Also known as gum disease, PD is a chronic infection of the gums, connective tissue and bones supporting the teeth that can double or even triple risk for a heart attack or stroke. Symptoms include red, swollen, tender gums; bleeding while

brushing or flossing; receding gums; loose or sensitive teeth; and persistent bad breath.

A New, Potentially Treatable Cause of Heart Attacks and Strokes

A landmark, peer-reviewed [BaleDoneen study](#) recently published in [Postgraduate Medical Journal \(PMJ\)](#) was the first to identify PD due to certain high-risk bacteria as a contributing cause of atherosclerosis. These germs, which often enter the bloodstream and spread throughout the body, gang up to create a triple threat to arterial health that can lead to heart attacks and strokes:

1. People with gum disease have twice as much small, dense LDL cholesterol (the most dangerous kind) in their blood as those with healthy gums.
2. Chemicals produced by high-risk oral bacteria make it easier for bad cholesterol to invade artery walls.
3. These chemicals make the inner layers of the artery wall (where plaque forms) stickier, like Velcro, so that cholesterol is more likely to get trapped there and clump into plaque.

Healthy Gums Help Prevent Strokes and Heart Attacks!

The BaleDoneen paper, which draws on Level A scientific evidence, has potentially lifesaving implications by suggesting a new strategy to help prevent heart attacks and strokes. Very often, gum disease has no symptoms in the early stages. As a result, millions of people don’t realize they have a serious oral infection that can lead to tooth loss, heart attacks and strokes.

Poor oral health [has also been linked to many other serious health threats](#), including diabetes, chronic kidney disease, some forms of cancer and dementia. Here’s more motivation to get a dental checkup: In a study of nearly 6,000 people ages 50 and older, those who hadn’t seen a dentist in the previous year had a 50% higher death rate than those who went two or more times annually! The researchers also reported that those who brushed and flossed daily lived longer than people the same age with neither of these habits, even when other risk factors were taken into account.

July Recipe

Grilled Vegetable Skewers with Chimichurri Sauce

Ready in just 30 minutes, this easy, colorful recipe is packed with heart-healthy antioxidants and fiber, plus delicious flavor that is sure to delight your family and friends at a summer barbeque. If desired, also grill ears of corn separately as a side dish to serve with the veggie skewers. For a quicker version, use store-bought chimichurri sauce instead of homemade.



INGREDIENTS

For the skewers

6 baby red potatoes, quartered
2 zucchini, sliced into large circles
1 medium yellow bell pepper
1 medium red bell pepper
1 medium red onion, peeled and cut into large pieces
2 large Portobello mushrooms, cut into large pieces
2 tablespoons extra virgin olive oil (for brushing vegetables)
Black pepper
6 skewers

For the chimichurri sauce

1 bunch fresh, flat-leaf parsley, stems removed
1 bunch cilantro, bottom stems removed
½ cup diced red onion
3 cloves of garlic, peeled
3 tablespoons lemon juice or red wine vinegar
½ teaspoon freshly ground black pepper
¼ teaspoon red pepper flakes
3 tablespoons ripe avocado
1 tablespoon olive oil
3 tablespoons water

PREPARATION

Heat a prepared grill to medium-high. Place potatoes in medium pot and cover with water. Boil for ten minutes or until almost tender. They need to be firm enough to grill, but cooked enough that they won't require extra grill time. Drain and cool slightly. Thread potatoes, zucchini, red and yellow peppers, onion and mushroom on skewers. Brush with oil and season with pepper. Grill for about 15 minutes, or until browned and tender, flipping once at the halfway point.

Meanwhile, prepare chimichurri sauce by putting all ingredients in a food processor or blender. Process until thoroughly combined. Transfer to a serving bowl, serve with the vegetable skewers and enjoy! Serves six.

Adapted from minimalistbaker.com and gimmesomeoven.com.

CONTINUED FROM PAGE 2

A Revolutionary New Approach to Treating Gum Disease

The PMJ study could change how dental providers diagnose and manage gum disease, since it's important to find out if people with PD have the high-risk bacteria now known to be a contributing cause of arterial disease. Instead of only evaluating the severity of a patient's symptoms — such as how deep the pockets of infection are, how much the gums bleed, or how loose the teeth are — the BaleDoneen Method recommends using available tests from companies that measure oral pathogens through DNA analysis, including OralDNA, OraVital and Hain Diagnostics.

Finding out if PD is due to high-risk bacteria is important for providing optimal care to protect oral-systemic health. Treatments for PD include nonsurgical periodontal therapy, a daily program of oral care to follow at home, prescription mouthwashes, dental trays with antibacterial gel (PerioProtect) and, in some cases, a short course of antibiotics. Regardless of which treatment is prescribed, the BaleDoneen Method recommends repeating the DNA testing to make sure the treatment was successful.

The Lifesaving Importance of Optimal Oral Health

As [we recently reported](#), heart attacks and strokes are on the rise among young adults (those under age 55), particularly among women. In June, [The Wall Street Journal reported](#) that after decades of decreases in death rates for arterial disease, fatalities among people ages 45 to 54 are now going up. In fact, middle-aged Americans are more likely to die of arterial disease now than they were in 2011!

Working closely with both your medical and dental provider to identify and treat all of your cardiovascular risks — including gum disease — could save your life. In a recent study of 10,000 initially stroke-free people, published in the journal *Stroke*, those with PD were more than twice as likely to suffer heart attacks and strokes than those with healthy gums. However, getting regular dental care significantly reduced risk for both types of events.

"The BaleDoneen Method saved my life," says Carney. The personalized therapies she's getting for all of cardiovascular risks — including dental care four times a year — have lifted the fear of another stroke, she adds. "I'm no longer scared of every twinge and my levels of inflammation have improved dramatically. Four years after my stroke, I actually look and feel way better than I did when my doctor used to tell me I was the healthiest patient he'd seen all day."

CONTINUED FROM PAGE 1

45,000 patients. High levels of lipoprotein(a) also magnify the risk for having heart attacks and strokes at a young age. If untreated, this disorder packs a potentially deadly one-two punch: It speeds up formation of arterial plaque, and it promotes blood clots that can lead to a heart attack or stroke.

A Cholesterol Disorder that Doesn't Respond to Statins

Unlike LDL cholesterol, Lp(a) isn't affected by lifestyle nor can it be effectively treated with cholesterol-lowering statin drugs if it's elevated, according to [a 2018 study of more than 3,000 survivors of heart attacks and other cardiac events published in *Circulation*](#). The researchers report that patients with one copy of the gene responsible for elevated Lp(a) levels are 58% more likely to develop coronary heart disease (CHD) while taking a statin for prevention than those without the gene, while risk for CHD is more than doubled in statin users with two copies of the Lp(a) gene.

The study also found that aspirin therapy doesn't have much, if any, effect on Lp(a) levels. These findings suggest that the two drugs most likely to be prescribed for heart attack and stroke prevention are not protecting the 20% of patients with this inherited condition, most of whom are undiagnosed and unaware of their peril.

A Deadly Gap in U.S. Healthcare

In 2010, the European Atherosclerosis Society (EAS) issued a scientific statement calling for routine screening and treatment of elevated Lp(a) levels as "an important priority to reduce cardiovascular risk." Yet in the U.S., it's still not the standard of care to treat — or even measure — this dangerous form of cholesterol that is found at elevated levels in up to one-third of heart attack survivors.

The BaleDoneen Method often sees patients who have suffered a heart attack or stroke, or multiple events, and still haven't been tested or treated for a cholesterol problem that has been shown to actually cause these catastrophes. Have you ever had your Lp(a) levels checked? Has your health-care provider recommended this testing? If the answer is no, consider this: Being left in the dark about this test nearly cost Harper and Moore their lives.

What Your Lp(a) Numbers May Reveal and a Potentially Lifesaving Treatment

We recommend that everyone get the Lp(a) test, which can be performed at the same time as conventional cholesterol



testing. Each laboratory sets its own numbers for "normal" and "elevated" Lp(a) levels. Because this test checks for an inherited condition, if your levels are normal, there's no need to be tested more than once because your genes don't change

If your levels are elevated, the best treatment is niacin (vitamin B3), which should only be taken under medical supervision. The EAS reports that niacin therapy can lower Lp(a) levels by as much as 40% — a potentially lifesaving benefit. Decreasing Lp(a) was shown to reduce risk for cardiovascular events by about 75% in a recent study published in *Circulation*, highlighting the value of getting tested and treated if your levels are elevated. New treatments are on the horizon that show great promise for reducing Lp(a). If your levels are elevated, discuss therapy options with your medical provider.

An Independence Day Celebration

On July 4, 2019, Moore will celebrate five years of being heart attack and

worry-free, thanks to the personalized treatments he's received with the BaleDoneen Method. Along with detecting his Lp(a) disorder, our comprehensive evaluation also revealed that like 50% of Americans, he is a carrier of the [9P21 "heart attack gene."](#) As discussed more fully in the BaleDoneen book, [Beat the Heart Attack Gene](#), this genotype raises risk for heart attacks, often at a young age, by up to 102%. He is also a carrier of the Apo E4 gene, which raises risk for CHD and Alzheimer's disease, conditions that killed two of his grandparents, while his father has suffered multiple strokes and struggles with memory impairment.

However — as Moore and many other high-risk patients treated with our precision-medicine, genetically guided approach have discovered — their DNA doesn't have to be their destiny. "Now that I'm on the right medications, as well as niacin and a diet based on my DNA, we've seen a significant shrinkage of the plaque in my arteries," says the father of two children, who remains an avid mountain biker and back-country skier. "Without this deep dive into my medical situation to find and treat all of my risk factors, I probably wouldn't be here today."

To mark the five-year anniversary and his recovery, Moore plans to go mountain biking on the same path near his vacation home where his 2014 heart attack occurred. "After that," he said, "I'll be following our annual tradition of going to an Independence Day family picnic at our club with my wife and our daughters. After that we'll watch the fireworks light up the sky over the lake and appreciate how truly blessed we are."