

Classes for Your Health

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Call 916.453.4514 for dates and location

CHAMP®

Telephone-based education and medication management program to treat heart failure.

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Call 916.851.2793 for 6-week series

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Manage your condition better; reduce anxiety, fatigue and pain (free).

Call 916.851.2793 for 6-week series

Healthy Heart Education Classes

Topics include stress management, introduction to Congestive Heart Failure, cardiac and diabetic diet (free).

Call 916.537.5296 for monthly class

Heart Healthy Diet

Topics include heart healthy cooking and diet tips (free).

Call 916.453.4514 for monthly class

Smoking Cessation Class

Help for those committed to quitting for good. Cost \$70.

Call 916.453.4268 (MGH) or 916.537.5299 (MSJ) to register.

Dignity Health
Heart and Vascular Institute
of Greater Sacramento



3810 J Street
Sacramento, CA 95816
1.877.9HEART9
dignityhealth.org/heartandvascular
MERCY GENERAL HOSPITAL
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Cardiac Monitor

Winter 2017 | For the Community | dignityhealth.org/heartandvascular



New Treatments for Atrial Fibrillation

Atrial fibrillation (AF) is the most common type of irregular heartbeat, affecting an estimated three million Americans. With the aging population, that number is expected to rise to more than 12 million by 2030. There are more than 460,000 AF-related hospitalizations every year, and AF is becoming the most common reason for hospital visits, surpassing heart failure and heart attack.

The growing prevalence is concerning given that one out of every six ischemic strokes is believed to be related to AF, and a stroke related to AF tends to result in greater disability. These facts have led to increased urgency in the search for more effective treatment options.

Existing Treatment and Care Challenges

The standard of treatment for AF is medication, followed by ablation therapy if indicated; however, the risk of stroke remains a concern. “There is no clear evidence that treatment such as catheter ablation alone can effectively reduce the risk of stroke,” explains Dr. Arash Aryana, Dignity Health Heart and Vascular Institute Electrophysiologist. “Typically those patients then end up on anticoagulants, which is the mainstay in stroke prevention for AF patients.”

For many patients, dealing with anticoagulation (also known as blood thinning) medication is challenging. Anticoagulation medication involves frequent monitoring, dietary restrictions, knowledge of drug interaction, and a risk of bleeding.

As new therapies have been developed, Dignity Health Heart and Vascular Institute is implementing these treatments to reduce stroke risk by offering two new procedures for those living with persistent, permanent AF.

Epicardial/Endocardial Ablation Combination Procedures

For patients who have permanent, persistent AF with structural heart disease, Dignity Health Heart and Vascular Institute is among a few providers to offer a planned, staged approach using both Epicardial (surgical) and Endocardial (catheter) ablation. (Ablation treats irregular heartbeat by creating scar tissue in

(Continued on page 3)

AF Facts

Atrial fibrillation (AF) occurs when the heart’s electrical signals become very rapid and disorganized, causing the heart’s lower chambers to contract faster than normal and making them unable to pump enough blood to the lungs and body.

Symptoms of AF can include palpitations; shortness of breath; weakness or problems exercising; chest pain; dizziness or fainting; fatigue; and confusion.

In Paroxysmal AF, the faulty electrical signals and rapid heart rate begin suddenly and typically resolve within 24 hours. In Persistent AF, the abnormal heart rhythm continues for more than a week. It may stop on its own, or with treatment. Both paroxysmal and persistent AF may become more frequent and, over time, may lead to Permanent AF, which occurs when a normal heart rhythm can’t be restored with treatment.



Dairy: Friend or Foe for Heart Healthy Diet?

Leslie Kaneko, RD

If you are working toward eating a more heart healthy diet, you may be wondering whether milk and dairy products should be included.

For several years, consumers have questioned if dairy products are beneficial or harmful to our health. The sales and consumption of dairy alternatives made with soy or almond (milk, yogurt, frozen desserts) have sky-rocketed. Some consumers have switched due to health reasons such as food allergies, cardiovascular or renal diseases, or simply to be trendy.

This year, a group of researchers analyzed 31 studies, examining the association between dairy consumption and the risk of cardiovascular disease. Even though future studies need to be completed, the researchers concluded that milk products, fermented dairy

products (yogurt and cheese), and a number of specific components within these products appear to be good for your overall cardiovascular health.

Researchers identified several interesting connections between dairy products and reduced incidences of a variety of cardiovascular-related conditions including hypertension, obesity, diabetes, and inflammation. Specifically, Vitamin D had the potential to improve blood lipids, increase insulin sensitivity, and help reduce blood pressure. Calcium was linked to a decrease in vascular resistance and blood pressure while improving blood lipid profile. Dairy fatty acids were found to help with weight management; improvement



of blood lipid levels; reduce inflammation; and increase in insulin sensitivity.

Based on these findings and others, registered dietitians and other nutrition experts, who collaborate with the National Dairy Council, the DASH diet, and MyPlate, continue to recommend three daily servings of dairy, including fat-free or low-fat milk products, such as lactose-free milk, cheese, and yogurt.

Local Physicians Educate Peers Worldwide in 2016

Dignity Health Heart and Vascular Institute physicians traveled the globe in 2016, seeking to educate themselves and, often, helping to train others on the latest innovations in heart care.

Dr. Arash Aryana presented original research on the indications and methods for VT ablation to physicians around the world, including France and Brazil.

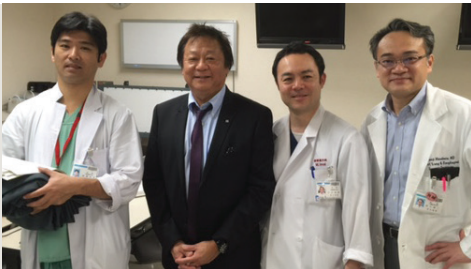
Dr. Michael Chang served as a proctor for a team of physicians in Japan learning the TAVR procedure.

Dr. Frank Slachman, along with Dr. Chang, visited several cities in China, educating physicians on valve repair and replacement.



Dr. Arash Aryana (far right) with a group of physicians in Brazil.

Dr. Michael Chang (second from left) with Japanese physicians learning the TAVR procedure.



Dr. Frank Slachman (blue gown) instructs a Chinese surgical team.

Atrial Fibrillation Treatments (continued from first page)

the area of the heart that is causing the problem.)

Candidates for the Epicardial/Endocardial ablation procedures include patients who have lived with AF for many years; have structural heart disease; have failed other AF treatments and have been diagnosed with persistent, long-standing persistent, or permanent AF.

This procedure begins with the surgeon using a minimally invasive approach to perform an epicardial ablation. If that does not resolve the AF, the electrophysiologist will perform an endocardial ablation via catheter to confirm that all of the abnormal electrical impulses are eliminated.

The patient will continue to be monitored by a cardiologist, who will determine if he or she still needs anticoagulant therapy. Most patients experience normal heart rhythm following this planned, staged approach and are able to stop taking some daily medications.

Watchman Procedure

Finding an AFib treatment that can eliminate the need for anticoagulation therapy has long been a priority. Looking ahead to the near future, the Watchman® Left Atrial Appendage (LAA) Closure Technology device offers a viable AFib treatment option with excellent potential for stroke prevention (comparable to warfarin). With an implant success rate of 95%, Watchman is the only FDA-approved LAA closure device that safely and effectively reduces stroke risk in patients long-term.

The Watchman is an implantable device designed to close the left atrial appendage. The goal of the umbrella-like device is to prevent blood clots from exiting and entering the bloodstream, reducing the risk of stroke and, over time, allowing patients to stop taking anticoagulants. In clinical trials, 92% of patients were able to stop taking warfarin at 45 days and 99% stopped at one year after the Watchman procedure.

The Watchman is performed under local or general anesthesia in the cardiac/hybrid catheterization lab. The procedure takes about an hour and requires an overnight hospital stay.

The Watchman device is recommended only for certain AF patients who are at increased risk for stroke and have been recommended for anticoagulation medication.

Save the Date!



Each year, more than 350,000 people experience cardiac arrest outside the walls of a hospital, often at home where loved ones have a chance to provide aid. This February – American Heart Month – come learn how two simple steps can turn your hands into lifesavers!

At this uplifting event, you will:

- Enjoy a healthy breakfast
- Learn hands-only CPR
- Hear tips on heart-healthy living from a cardiologist

Register today at **DignityHealth.org/HeartShaped.**

We hope to see you there!

9-11 a.m.
Saturday, Feb. 25
Milagro Centre
6241 Fair Oaks Blvd.,
Carmichael



Through the generosity of our donors, Mercy Foundation is proud to support programs and services of the Dignity Health Heart and Vascular Institute of Greater Sacramento.

For more than six decades, Mercy Foundation has partnered with the community to further the mission of the Sisters of Mercy. Together, we help feed the hungry, shelter the homeless, educate the underserved, and care for the sick at local Dignity Health hospitals and clinics.

To make a gift or learn more, call 916.851.2700 or visit supportmercyfoundation.org.