

Vital Flow

News from the
Dignity Health
Heart and Vascular
Institute of Greater
Sacramento

FALL 2018 | FOR THE COMMUNITY

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Understanding and Recognizing PAD

By Jeanne G. Knapp, MS
Mercy General Hospital Cardiopulmonary Rehabilitation



As you get older, your chances of having Peripheral Artery Disease (PAD) increases: At the age of 50, your chance of having PAD is 5%. Just 20 years later, at the age of 70, that risk jumps to 20%. In the U.S., PAD affects 8.5 million people - roughly the population of New York City.

PAD occurs when atherosclerosis develops in arteries causing blockages to develop. These blockages can reduce blood flow through the torso, neck, arms and legs. Symptoms of PAD may include pain, numbness, tingling, skin discoloration, cold sensation in hands and feet, gangrene, poor wound healing, erectile dysfunction, and poor hair/nail growth on legs/feet.

Many different diseases or health conditions can cause these symptoms, including arthritis or neuropathy. But a classic symptom of PAD is leg discomfort, aching or cramps in the calves, thighs or buttocks. This occurs with walking, and resolves after a few minutes of rest. Some people living with PAD experience no symptoms at all.

Left untreated, PAD may require surgery to open the artery, amputation, or cause heart attack, stroke or death. "PAD is a medical disease that should be first treated with lifestyle modifications and medications," explains Inder Singh, MD, Interventional Cardiologist. "But if these fail to achieve the desired results and improvement in symptoms, then advanced treatment options may be considered."

Know Your PAD Risk

In addition to age, there are several significant factors that can increase your risk for PAD. These include:

- Diagnosed artery disease in any other part of your body including your heart
- High blood pressure and/or high cholesterol
- Diabetes
- History of smoking
- Overweight or obese
- Sedentary behavior
- Kidney disease
- Family history of artery disease, including PAD

It is important to note that thirty-three percent of people over the age of 50 with diabetes have PAD.

If you are at risk for PAD, talk to your doctor about the steps you can take to help prevent PAD from developing.

Strength Training Yields Strong Health Benefits

Regine Moncada, BS, Exercise Technologist
Mercy General Hospital Cardiopulmonary/PAD Rehabilitation



While aerobic exercise is beneficial, strength training is associated with a lowered risk for cardiovascular diseases including hypertension. Strength training can also reduce risk for other health conditions like osteoporosis and diabetes.

As we age, our musculature decreases, causing an increased risk for osteoporosis. To prevent osteoporosis, resistance training can help by increasing bone strength and muscle mass.

Diabetic patients can benefit from strength training because it can improve the body's response to insulin sensitivity. Studies have shown that adding resistance training into one's exercise routine improves body composition, which can lead to reductions in blood glucose and blood pressure.

The American College of Sports Medicine recommends we train each major muscle group two to three days per week to see improvement. With the proper training, regular strength exercises can improve cardiovascular and overall health, and make physical functions during day-to-day activities easier.

For patients diagnosed with or recovering from a cardiovascular condition or procedure, it may be helpful to work with an exercise physiologist (like the ones at the Dignity Health Cardiopulmonary/PAD Rehabilitation programs) to create an individualized exercise prescription designed specifically to help monitor progression and improvement. Cardiopulmonary/PAD Rehabilitation is a program with a team of exercise physiologists specialized in assisting individuals in proper technique and form to minimize the risk for injury during resistance training. Free weights and cable machines are two types of strength training equipment that are utilized in the clinic to help boost the strength of a patient.

Before starting any strength training or exercise routine, talk to your doctor.

To learn more about the Cardiopulmonary/PAD Rehabilitation Programs at Dignity Health Heart and Vascular Institute, talk to your doctor or contact the facility nearest you.

Mercy General Hospital

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Sierra Nevada Memorial Hospital

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Woodland Healthcare

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Heart Failure Success Story Profiled



In August, Dr. Munir Janmohamed and his patient Anthony Robinson were featured on the front page of the Sacramento Bee. The article described Janmohamed, Director of the Advanced Heart Failure and LVAD Program at Mercy General Hospital, as part of a growing subspecialty of cardiologists with a comprehensive knowledge of how best to optimize the complete spectrum of therapies to best treat patients.

Robinson, a 46-year old fitness trainer, had prepared himself to need a heart transplant due to unexplained heart failure. Dr. Janmohamed, however, prescribed three daily medications and the elimination of salt and caffeine. Robinson also wore an external defibrillator as a precaution.

The article described how, within several months, Robinson's symptoms improved and he was able to return to his normal activities – without any surgical intervention.

Peripheral Artery Disease (continued from first page)

Many of the diagnostic tests for diagnosing PAD are easy and painless. Ankle Brachial Index is a test that compares the blood pressures of the arms and legs. Doppler Ultrasound uses a wand over the skin to measure blood flow through the arteries. Computed Tomographic Angiography or Magnetic Resonance Angiography may be done if preliminary testing shows abnormalities.

Risk factor modifications may include eating a healthier diet, quitting smoking and controlling diabetes. Taking medications to better manage high blood pressure or high cholesterol or to prevent blood clots may also be part of a behavior modification plan.

In addition, Supervised Exercise Therapy (SET) may be recommended. SET has been shown to reduce symptoms and improve blood flow.

Dr. Singh believes the impact of SET can be profound. “A well-structured, supervised exercise rehab program, such as that offered at the Dignity Health facilities, can not only greatly improve symptoms and quality of life, but also has an impressive impact on preventing future cardiovascular problems.”

Medicare and many other health plans now cover SET for patients with active PAD symptoms. Talk to your doctor for more information.

2018 Heart & Stroke Walk

Thank you to everyone who joined us on Sept. 27 for the 2018 Heart & Stroke Walk! The Dignity Health teams included more than 1500 walkers – including employees, physicians, patients and friends. The Dignity Health teams raised more than \$118,000 for heart and stroke awareness and research.

Our “sea of orange” could be seen throughout William Land Park, both during the walk and in the Dignity Health “village” where attendees gained helpful insight into heart disease symptoms and risk factors.

Dignity Health is the major sponsor and Senior Vice President of Operations Laurie Harting will serve as chair of the Heart & Stroke Walk through 2020. Our organization's commitment to the walk is just one way we are working to improve awareness of heart disease and the steps we can all take to lower our risk.



Mercy General Completes EP Lab Project



In October, Mercy General Hospital completed its multi-year project to improve the electrophysiology labs (EP) and expand capacity as the demand for EP services grows. A new, third lab was opened last year (2017), and this year one of the existing labs was upgraded with improved imaging equipment and re-opened on Oct. 2. MGH now has three EP labs with state-of-the-art equipment and specialized monitors to meet the growing demand.

The EP Program at Mercy General treats over 1,700 patients every year and is one of the largest EP programs in California.

Demand for electrophysiology services is expected to continue to grow as an increasing number of people are diagnosed with arrhythmias. The increase is due to an aging population as well as an increase in risk factors like obesity and sleep apnea.

Members of the Mercy General Hospital physician, staff, and leadership teams gathered while Sister Clare Dalton, Vice President of Mission Services, provided a blessing for the space and for the clinicians who will be providing patient care.



Dignity Health™
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Cardiac and PAD Rehabilitation

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