Nearly 4 in 10 Blacks have high blood pressure.

More
Black women
than men
have high blood
pressure.

Blacks
with high blood
pressure often
do not know it
or have trouble
keeping it under
control.



VOLUME 22, NUMBER 2 SUPPLEMENT P1 WINTER 2012

Patient Supplement: You Have Only One Heart – Keep It Healthy

- How to Take Your Heart Health into Your Own Hands
- Know What the Experts Say about Treating High Blood Pressure
 - The Language of Heart Disease 3
- Tests for Heart Disease
 Glucose (sugar)
 Body Mass Index (BMI)
 Cholesterol (fat-like substance in your blood)
 - How to Take Action

 At Home, Before Your Visit to the Doctor

 At the Doctor's Office

 Back at Home

 Your Diet: It May Be Time for a Change
- Reasons to Get Proper Health Care 6
 - It's All About Your ABCs 8



Welcome

It is health that is real wealth and not pieces of gold and silver.

- Mahatma Ghandi, philosopher, political and ideological leader of India



Thank you for taking the time to read this patient supplement of *Ethnicity & Disease*, the peer-reviewed medical journal of the International Society on Hypertension in Blacks (ISHIB). As you turn the pages, we hope you will learn that the most important person to control high blood pressure is YOU! Your doctors, nurses, family and friends can all help, but it's up to you to have your blood pressure measured regularly, to stay away from foods that may raise your blood pressure, and to take your medicine faithfully if prescribed.

Talk about the information in this supplement with your doctors. I'm sure that they will be happy that you are interested in your health.

Wishing you good health,

Dank S&

David S. Kountz, MD President, ISHIB





Since 1991

Ethnicity & Disease, the official journal of the International Society on Hypertension in Blacks, is an international journal that publishes information on the ethnic patterns of disease. This peer-reviewed journal releases research four times/year along with special supplements for targeted studies and populations. To subscribe to Ethnicity & Disease or for more information, visit www.ishib.org or email ethndis@ishib.org. ©2012 ISHIB

For physicians, health educators and others, additional copies can be ordered by calling 770.898.7910 or emailing ethndis@ishib.org.

Acknowledgments

ISHIB/Ethnicity & Disease thanks the following for the production of this patient supplement:
Inside Edge Consulting Group, management of the ISHIB IMPACT campaign, the source of much of this supplement's information and Dubois Betourné & Associates, graphic design and editorial services.

Editor-in-Chief

Keith C. Norris, MD Charles Drew University of Medicine & Science Los Angeles, California

Associate Editors

Sharon K. Davis, PhD W. Dallas Hall, MD Sandra A. Harris-Hooker, PhD Anne E. Sumner, MD Carla Yunis, MD, MPH

Managing Editor

Anne M. Dubois

How to Take Your Heart Health into Your Own Hands

Since 1986, the International Society on Hypertension in Blacks (ISHIB) has studied ethnicity and heart health. ISHIB has learned some of the best ways to keep your heart healthy and is happy to share these facts with you.

In 2010, a team of doctors from ISHIB wrote a medical report that identified new goals for blood pressure levels among Blacks. For healthy African Americans, ISHIB doctors recommend that blood pressure levels should be at or below 115/75 mm Hg. Blacks who are at-risk for hypertension should aim for a blood pressure level of 135/85 mm Hg. Blacks at greater risk for hypertension (that is, if they have organ damage and/or a history of cardiovascular disease) should set 130/80 mm Hg as target goal. See Box 1 for these newly re-defined categories.

Your doctor will recommend lifestyle changes to keep your blood pressure at or below 115/75 mm Hg. If your blood pressure level is higher, your doctor may recommend lifestyle changes and medicines to control your blood pressure to the goal levels mentioned above.

Source: Flack JM, Sica DA, Bakris G, et al. ISHIB Consensus Statement. Management of High Blood Pressure in Blacks. *Hypertension*. 2010;56:760-800.

Get to know the terms you'll hear at the doctor's office when talking about heart disease.

A1C. A blood test that shows your average blood sugar (glucose) level during the past two or three months. The American Diabetes Association recommends an A1C of less than 7%.

BMI. Body mass index is an estimate of your relative body fat, calculated from your height and weight. If your BMI is 25 or greater, you fall into the overweight or obese category.

BP. Blood pressure is the pressure of the blood against the walls of your arteries as your heart pumps blood through your body.

CVD. Cardiovascular (heart) disease.

DBP. Diastolic blood pressure, the amount of pressure in your blood vessels when your heart is resting between heart

beats. It is the second number of your blood pressure reading. For example, in the recommended blood pressure value of 135/85 mm Hg, 85 is the diastolic blood pressure.

Glucose. A type of sugar in your blood. It comes from carbohydrate foods and is the main source of energy for your body. The American Diabetes Association has set normal glucose levels to be between 70-125 mg/dL.

HTN. Hypertension, the medical term for high blood pressure.

SBP. Systolic blood pressure, the amount of pressure in your blood vessels when your heart is beating. In the recommended blood pressure value of 135/85 mm Hg, 135 is the systolic blood pressure.

What the Experts
Say about Treating
High Blood
Pressure

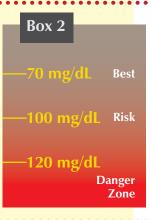
Box 1

| Normal | SBP less than 115 DBP less than 75 | Goal |
|-------------------------|--|-----------------|
| Pre- Hypertension | SBP 115-134 DBP 75-84 | Warning Zone |
| Stage 1 Hypertension | SBP 135-160 DBP 85-100 | Risk Zone |
| Stage 2 Hypertension | SBP more than 160 DBP more than 100 | Danger Zone |

The Language of Heart Disease

Tests for Heart Disease

Know Your Glucose Levels



Your doctor will give you a blood glucose test to find out the amount of glucose, a type of sugar, you have in your blood. The American Diabetes Association has set normal glucose levels to be between 70-125 mg/dL. Levels change depending on if the glucose test was done after you had fasted when lower levels would be normal, or after you had eaten when higher levels would be considered normal. Use the information in Box 2 as your guidelines for glucose levels.

Know Your BMI

You have probably heard your doctor or nurse say that it's important to have a healthy BMI. BMI stands for body mass index and is a measure of your body fat based on your height and weight. Use the table in Box 3 to get a rough idea of your BMI.

Box 3

| | weight | | | | | | | | |
|--------------|-------------|------|------|--------|------|------|------------|------|-------|
| height | 100 | 120 | 140 | 160 | 180 | 200 | 220 | 240 | 260 |
| 5' 0" | 19.5 | 23.4 | 27.3 | 31.2 | 35.2 | 39.1 | 43.0 | 46.9 | 50.8 |
| 5' 2" | 18.3 | 21.9 | 25.6 | 29.3 | 32.9 | 36.6 | 40.2 | 43.9 | 47.5 |
| 5' 4" | 17.2 | 20.6 | 24.0 | 27.5 | 30.9 | 34.3 | 37.8 | 41.2 | 44.6 |
| 5' 6" | 16.1 | 19.4 | 22.6 | 25.8 | 29.0 | 32.3 | 35.5 | 38.7 | 42.0 |
| 5' 8" | 15.2 | 18.2 | 21.3 | 24.3 | 27.4 | 30.4 | 33.4 | 36.5 | 39.5 |
| 5' 10" | 14.3 | 17.2 | 20.1 | 23.0 | 25.8 | 28.7 | 31.6 | 34.4 | 37.3 |
| 6' 0''' | 13.6 | 16.3 | 19.0 | 21.7 | 24.4 | 27.1 | 29.8 | 32.5 | 35.3 |
| 6' 2" | 12.8 | 15.4 | 18.0 | 20.5 | 23.1 | 25.7 | 28.2 | 30.8 | 33.4 |
| 6' 4" | 12.2 | 14.6 | 17.0 | 19.5 | 21.9 | 24.3 | 26.8 | 29.2 | 31.6 |
| 6' 6" | 11.6 | 13.9 | 16.2 | 18.5 | 20.8 | 23.1 | 25.4 | 27.7 | 30.0 |
| BMI category | underweight | | | normal | | | overweight | | obese |
| | | | | | | | | | |

Know Your Cholesterol

Box 4

Levels

Best level that puts you at lower risk for heart disease.

> --- 200 mg/d Borderline high

At this level, you are more than twice as likely of having heart disease than someone whose cholesterol is less than 200 mg/dL. Too much cholesterol (a fat-like substance) in your blood can build up on the walls of your arteries. In time, the arteries may become narrow and limit the flow of blood to your heart.

Your doctor will likely give you a blood test that shows your total cholesterol, LDL (bad) cholesterol, HDL (good) cholesterol and triglycerides at least once every five years.

Source: National Heart Lung and Blood Institute. What You Need to Know About High Cholesterol. NIH Publication No. 09-7424. August 2009. www.nhlbi.nih.gov/health/public/heart/chol/cholesterol_atglance.htm

How to Take Action

Your action plan to achieve your doctor's recommended goal for blood pressure, BMI, cholesterol and glucose levels may include a combination of medicines and lifestyle changes. Here are a few tips for building and using an action plan.

1. Keep track of your numbers. See box 5 for a chart that can help you keep your records.

At Home

- 2. Before going to the doctor:
- Make a list of all your questions or concerns.
- \heartsuit Make a list of all the medicines you are currently taking.
- Pring the chart you made in step 1.



| SOX | 5 | |
|------------|---|--|
| | | |
| | | |

| Date | Weight | BMI | Blood Pressure SBP/DBP | Blood Sugar |
|------|--------|-----|---------------------------|----------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

- 3. Remember to ask:
- What are my personal goals?
- What do these numbers mean to me?
- What lifestyle changes should I make to get better?
- \heartsuit What blood pressure treatments will work for me?
- Y How will my blood pressure medicine interact with other medicines I take?
- 4. Write down your doctor's instructions and answers.
- 5. Ask your doctor for tools that can help manage blood pressure, such as: pedometer, blood pressure monitor, food portion control plates or placements, etc.
- 6. Leave the doctor's office with a written action plan that includes at-home action steps (diet, exercise, and other lifestyle choices) and, if needed, doctor-prescribed medicines.

At the Doctor's Office



How to Take Action

Back at Home



- 7. Refer to your action plan often.
- 8. Add these items to the plan, if needed:
- Maintain a healthy body weight; lose weight if needed.
- Be active. Exercise at least 30 minutes most days of the week walk, don't ride!
- Use less salt (often listed as sodium on nutrition labels). Lower your salt intake to no more than 1500 mg per day.
- Eat more potassium-rich foods (such as dried fruit, bananas, raw vegetables).
- Follow a healthy eating plan. Use the DASH diet (See Box 6).
- C Limit your alcohol to no more than one drink/day for women and 2 drinks/day for men.
- Quit smoking.

Reasons to Get Proper Health Care

Schedule regular checkups with your doctor who can monitor your blood pressure. Here's why:

- 1 High blood pressure is a "silent killer." You may not have any signs.
- 2 Blacks have many more complications with high blood pressure such as stroke, heart failure and kidney disease.¹
- 3 Blacks are less likely to seek treatment for high blood pressure.²
- 4 If your doctor prescribes medicine, follow these tips:
 - Don't skip a day or a dose.
 - Refill your prescription before you run out.
 - Ask your pharmacist if a low-cost substitute is available.
 - Know that it might take more than one type of medicine to get proper control of your blood pressure.

Sources for "How to Take Action": Adapted from Your Guide to Lowering Blood Pressure. US Department of Health and Human Services, National Institutes of Health. National Heart, Lung, Blood Institute; and Dietary Guidelines for Americans. Released 1/31/11 from USDA Center for Nutrition Policy and Promotion. www.cnpp.usda.gov/DGAs2010-PolicyDocument.htm. Accessed January 16, 2012

Sources for "Reasons to Get Proper Health Care": ¹Roger VL, Go AS, Lloyd-Jones DM, et al on behalf of the American Heart Association Statistics Committee and Stroke Statistics Subcommittee. Heart disease and stroke statistics - 2012 report: a report from the American Heart Association. Circulation. 2012. epub ahead of print Dec 15, 2011. ²National Health and Nutrition Examination Survey, 1999-2007. wonder.cdc.gov/cmf-icd10.html. Accessed January 25, 2012.

How to Take Action

Before you make a change on your plate, first make a change in your head. When you think of a new diet, your first thought might be, "I'll always be hungry."

Let's change that. Use "diet" to mean what you eat every day – not shakes, pills or the latest fad. Your diet will be a lifestyle change, and just like quitting smoking and beginning exercising, this change could save your life.

ISHIB doctors recommend using the DASH diet. It was developed by the National Institutes of Health and even its name means lowering blood pressure: Dietary Approaches to Stop Hypertension.

On the DASH diet, you'll eat between 1600 and 3100 calories, depending on your weight. Of those calories, 27% will come from fat and you'll eat less than 1500 mg of salt each day. You'll eat foods rich in potassium, calcium and magnesium — all foods that can add up to lower blood pressure. See Box 6 to find out the different types of foods and the number of servings you can have of each.

Your Diet: It May Be Time for a Change



Box 6

| Food Group Daily Recommendations | 1,600 calories/ day | 2,600 calories/ day | 3,100 calories/ day |
|--|------------------------|------------------------|------------------------|
| Grains* | 6 | 10-11 | 12-13 |
| Vegetables | 3-4 | 5-6 | 6 |
| Fat-free or low-fat milk and milk products | 2-3 | 3 | 3-4 |
| Lean meats, poultry and fish | 3-6 | 6 | 6-9 |
| Nuts, seeds and legumes | 3/week | 1 | 1 |
| Fats and oils | 2 | 3 | 4 |
| Sweets and added sugars | 0 | 2 or less | 2 or less |

*Whole grains are recommended for most grain servings as a good source of fiber and nutrients.

Source: Your Guide to Lowering Your Blood Pressure with DASH. US Department of Health and Human Services. NIH, National Heart, Lung, and Blood Institute. NIH Publication No. 06-4082. Revised April 2006. www.nhlbi.nih.gov/health/public/heart/hbp/dash/new_dash.pdf. Accessed Jan 16, 2012.

It's All about Your ABCs

Remember these tips for keeping your heart healthy.

- A Aspirin for high-risk patients. Ask your doctor if you should take aspirin daily to help your heart health.
- B Blood pressure control.
- C Cholesterol management.
- S Smoking. If you don't smoke, don't start. If you smoke, ask your doctor for help quitting.

*The ABCs are part of the Million Hearts initiative. Details at: millionhearts.hhs.gov



Automated BMI Calculator

For an automated BMI calculator, visit the National Heart Lung and Blood Institute site: www.nhlbisupport.com/bmi/

For More Information



Scan QR code to the left with your smartphone to download a pdf of this patient supplement.

Visit these websites:

www.ishib.org

www.nhlbi.nih.gov/health/public/heart/other/chdblack/aariskfactors.pdf www.choosemyplate.gov

www.nhlbi.nih.gov/health/public/heart/hbp/dash/new_dash.pdf www.nhlbi.nih.gov/health/healthdisp/index.htm www.stroke.org/symp

www.cdc.gov/bloodpressure/docs/African_American_Sourcebook.pdf www.cdc.gov/socialdeterminants/

Sponsors

ISHIB IMPACT is supported through unrestricted educational grants from:







