

Heart to Heart

WakeMed Heart & Vascular News

WINTER 2020



Comfort and
Nourishment in
Winter Soups & Stew

How Sleep
Affects Your Heart

WakeMed
Heart Center
Gets ALL
the Love

TAKE with...

DEE DARKES,
MSN, RN, NEA-BC

Executive Director,
Heart & Vascular Services



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Dee Darkes began her career more than 35 years ago as a nurse, and today serves as the operational leader behind WakeMed Heart & Vascular's exceptional network of physician practices. Dee shares some insight into what it's like working with our physicians along with her passion for all things heart and vascular.

Q: How would your team describe you?

Hopefully, they would say that I'm WakeMed Heart & Vascular's cheerleader for the patient experience – as well as a passionate, decisive and committed leader. When the opportunity came for me to join the WakeMed team, I jumped in wholeheartedly because we share the same mission – and that's our shared passion for putting patients first.

Q: What exciting things are on the horizon for WakeMed Heart & Vascular?

We're poised for continued growth as we strive to make it easier for patients to get the highest level of heart and vascular care here in Wake County. With our aging population, we're continuing to add more services to help patients with multiple complex conditions (i.e. heart failure, COPD, etc.) so they can better navigate the various levels of care they need. We've grown our thoracic surgery and vascular programs immensely over the past few years and will continue to focus on our collaboration with Duke Health to improve the coordination of care in both heart and cancer care. Where those areas intersect is in WakeMed's growing lung health program, which brings together our thoracic surgery and pulmonology specialties to help patients detect lung cancer earlier. We expect that growth to continue as we help our patients with lung nodules navigate a complex pathway to diagnosis and if needed, treatment. It's a very exciting time for us!

Q: You have a big job of keeping 50+ physicians and advanced practice providers all on the same page – what's that like?

It's one of the most rewarding jobs in the world – and mostly because our physicians are an incredible group of big-hearted professionals who got into healthcare for all the right reasons. While no group of 50+ doctors will ever agree on everything – our shared passion for doing the right thing makes any major decision that much easier because we're all coming from the same place. We all know that patients come first – above all else.

Q: Why did you choose cardiology as your specialty area?

I've worked in many specialty areas over the years, but settled into cardiology more than 20 years ago because early in my career, I learned how heart health plays into so many areas of our overall health. Focusing on wellness and preventing disease by taking a proactive approach is truly the most powerful way to take control of our most precious gift – our health.

Q: What do you do to celebrate Valentine's Day and Heart Month?

Now that my four children are grown and out of the house, my husband spoils me rotten with a Valentine's Day spa weekend. Throughout February (and all year), I am committed to spreading the importance of living a heart-healthy lifestyle throughout my community. I speak at local churches, health fairs, civic and community events to help remind people of the importance of taking care of themselves. Sharing the knowledge I've acquired over the years and helping keep others healthy is part of what I love most about my job.

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What's Inside

INNOVATIVE THINKING

4-5

WakeMed Launches ECMO Treatment & More News

THE JOY OF FOOD

10-12

Winter Comfort Food – Soups & Stews

LIVING THE GOOD LIFE

6-7

A Good Night's Rest: How Sleep Affects Your Heart & Health

STORIES FROM THE HEART

13

A Shocking Journey to Feeling Better Than Ever

IN SIMPLE TERMS

8-9

Pericarditis – The “Other” Chest Pain

NEW + NOTEWORTHY

14-15

WakeMed Heart & Vascular Gets ALL the Love!

Top Tips for Controlling Heart Failure in 2020



Weigh yourself daily. Remember to report a weight gain of 2 pounds overnight or 3 pounds in a week to your cardiologist.



Keep track of your meds. Stay organized with a pill box and take daily meds every day. Bring all current meds to every doctor's appointment.



Reduce your sodium. Limit intake to no more than 2000 mg a day – and 500 mg or less per meal.



Watch your fluids. Avoid soda and sports drinks, which contain sodium. Choose sparkling water or Vitamin Zero Water®, and keep it to 64 ounces or less a day.



Maintain an exercise plan. Strive for 30 minutes of activity a day. If it's under 40 degrees outside, exercise indoors. Remember to stop and rest if you develop shortness of breath, chest pain, or dizziness.



Heart Failure Support Group – Upcoming Meetings

Monday, February 17
WakeMed Heart Center
3 pm
Topic: Getting Back on Track

Monday, May 17
WakeMed Heart Center
3 pm
Topic: Summer Strategies

WakeMed Launches ECMO Treatment



Multidisciplinary team huddles around the ECMO equipment.

Pictured (from L to R): Gina McConnell, BSN; Jason Wieland, PA-C; Dr. Dan Fox; Dr. David Kirk; Todd Smyre, MS; Dr. Trevor Upham; Crystal O'Neal, BSRT; Dr. Abdul Chaudry. Not pictured: Dr. Judson Williams, Dr. Atif Raja, Noel Hammond, Dr. Desiree Belladonna

WakeMed is proud to launch a comprehensive ECMO Program this month through our collaboration with Duke Health. ECMO stands for extracorporeal membrane oxygenation, and is a highly advanced life support technique used in critically-ill patients whose heart and/or lungs aren't working properly due to severe injury or illness. It's used when all other standard treatments for critical heart and/or lung injuries have been tried, but failed. ECMO can support patients for weeks – allowing the patients' heart and lungs time to rest and recover while physicians continue treating the underlying condition(s).



DAVID KIRK, MD
WakeMed Executive
Medical Director
Critical Care Medicine

"A successful ECMO program is an essential building block for bringing new and advanced therapies to our cardiovascular and thoracic programs," explains Dr. David Kirk, executive medical director, critical care medicine.

ECMO requires specialized training and the support of many areas within the hospital, including nursing, respiratory therapy, invasive cardiology, pharmacy, information services and our physician practices.

There are two types of ECMO – venous-venous (V-V) ECMO supports the lungs when the heart is functioning properly; and veno-arterial (V-A) supports both the heart and lungs at the same time – allowing both critical organs the opportunity to rest and heal. These therapies are often used in conditions such as acute lung failure, respiratory distress syndrome, pneumonia, heart failure, pulmonary embolism and pulmonary hypertension – among other life-threatening conditions. WakeMed's program begins with V-V ECMO.

"I am excited to leverage our expertise in pulmonary and critical care medicine with our top-rated heart surgery program to bring this innovative therapy to WakeMed," shares Dr. Judson Williams, executive medical director, Heart & Vascular. "This is one example of our Heart Care Plus+ collaboration with Duke Health that is impacting our patients right here in Wake County."



JUDSON WILLIAMS, MD
Executive Medical Director
WakeMed Heart & Vascular

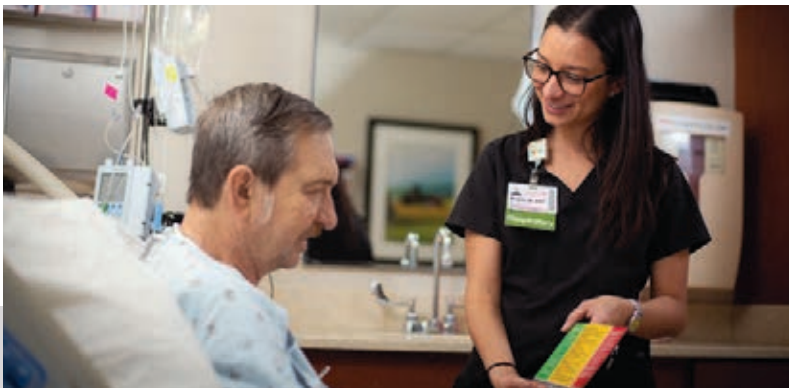
Artificial Intelligence (AI) Is Saving Lives at WakeMed

The use of artificial intelligence (AI) may sound futuristic and impersonal in the world of health care, but it's actually just the opposite. After all, what could be more personal than doing everything possible to save lives – by using technology to predict when a hospital patient may be taking a turn for the worse hours or days before it actually happens? By detecting subtle changes not yet evident to even the most skilled clinical care teams, that's exactly what a powerful algorithm known as the Rothman Index can do.

WakeMed began using this innovative algorithm at Cary Hospital in the spring of 2019 and recently expanded its use to both the Raleigh Campus and North Hospital. It's not only expected to save lives, but also to prevent the risk of severe infections such as sepsis, reduce readmissions, shorten our patients' hospital stay, and help clinicians make important care decisions.

Using predictive analytics to look at the mounds of data in any given patient's electronic medical record, the Rothman Index assigns each patient a simple score to create a real-time picture of a person's condition that has occurred over time.

If the Rothman Index indicates a likelihood that a patient could decline soon, his/her care team can intervene more quickly and change the course of treatment or shift strategies to avoid a medical emergency.



New Navigator Program for COPD Patients

WakeMed has launched a new COPD patient navigator program to help improve coordination of care and prevent patients from having to be readmitted to the hospital. What began as a pilot nearly a year ago was so successful that it has become a permanent program.

At WakeMed, pulmonary navigators are respiratory therapists charged with providing a full assessment of each patient in the hospital with a history of COPD to make sure they've had all the vaccines, testing/screenings, and medications, that are recommended based on the latest care guidelines.

New Treatment Option for Venous Thromboembolism (VTE)

The AngioVac System is a unique method for helping certain patients with venous thromboembolism (VTE), otherwise known as a blood clot that starts in a vein. In simple terms, the AngioVac is a tube hooked up to machine that works like a small vacuum. Using a one-way valve, it takes blood (and the offending blood clot) out of the body, and recirculates it (without the clot) for a seamless removal that can help prevent a pulmonary embolism or other life-threatening event.

"Many patients with a venous thromboembolism can't be successfully treated with anticoagulant therapy (blood thinners)," explains Dr. Damien Marycz, interventional cardiologist with WakeMed Heart & Vascular. "The AngioVac provides a new option for those patients who otherwise may have had to undergo open heart surgery for treatment. Using the AngioVac is a minimally-invasive procedure with far less risks than an open procedure, and offers much faster recovery for our patients."



Dr. Damien Marycz performs this procedure at the WakeMed Heart Center in partnership with interventional radiologist, Dr. David Sopko of Raleigh Radiology.

DAMIEN M MARYCZ, MD
WakeMed
Heart & Vascular

Focusing on education, nutrition, breathing and inhaler techniques, the navigator helps coordinate follow-up care and ensure patients have the information and treatment needed to better manage COPD at home.

In its first year, this program helped WakeMed significantly reduce readmission rates for patients with COPD – allowing them to stay healthier and out of the hospital.

A Good Night's Rest: How Sleep Affects Your Heart & Health

Sleep is critical for our physical, mental and emotional well-being. Over the years, hundreds of studies have demonstrated the importance that sleep plays in our bodies' ability to function.

Yet, according to the National Heart, Lung & Blood Institute (NHLBI), 50-70 million adults in the U.S. have a sleep disorder and one in three adults don't get the amount of uninterrupted sleep they need to protect their health.

How Sleep Impacts Your Heart

When it comes to heart health, sleep is one of the greatest things you can do to lower your risk for developing metabolic problems such as obesity, diabetes, high blood pressure, and stroke.



SENTHIL SUNDARAM,
MD, MPH
WakeMed
Heart & Vascular

"Virtually every system in your body needs to rest and reset in order to function – and sleep is what provides that important opportunity," explains Dr. Senthil Sundaram, WakeMed Heart & Vascular.

During non-REM sleep, your heart rate and blood pressure begin to slow down. In REM sleep, heart and breathing rates as

well as your blood pressure will fluctuate. Experts believe these changes throughout the night promote cardiovascular health. When you don't get enough sleep (often caused by an untreated sleep disorder), these peaks and dips don't occur.

Lack of sleep puts your entire body under stress and can cause the release of stress hormones,

which is bad news for your heart. Studies also show that sleep deficiencies may cause your body to produce proteins that may play a role in inflammation – which can lead to hardening of the arteries.

That's why it's important to talk to your primary care doctor if you're having trouble sleeping or feeling fatigue or excessive daytime sleepiness.

Common Sleep Problems

If you wake up every day feeling well-rested and don't have any daytime sleepiness – chances are, you're getting the sleep you need to stay healthy. Unfortunately, many people have problems with sleep at some point in their lives – whether it's a short-term problem or a long-term condition. Some signs you may have a sleep problem include (but are not limited to):

- Taking more than 30 minutes to fall asleep.
- Waking up multiple times during the night or for long periods of time each night.
- Feeling sleepy during the day or falling asleep at inappropriate times throughout the day.

The top three sleep disorders are:

Insomnia – Recent research estimates this common disorder may affect one in four Americans each year. If you have trouble falling or staying asleep, or you feel unrested after a full night's sleep, you may suffer from insomnia.

Obstructive Sleep Apnea – More than 18 million Americans suffer from Obstructive Sleep Apnea (OSA), which is a serious sleep disorder that causes your breathing to stop for 10 seconds or more multiple times throughout the night – which often causes loud snoring (a top symptom!). This causes a lack of oxygen in the blood which can cause you to briefly wake (often without you knowing it).

Restless Legs Syndrome – This common condition affects an estimated five to ten percent of adults and is a disorder of the nervous system that causes an uncomfortable sensation in the legs when at rest, that urges people to move them. It's more common in women and symptoms range from mild to intolerable for some.



Diagnosing Sleep Problems

“A sleep study is the best way to determine if you have a sleep disorder,” explains Dr. Alberto Santos, board-certified neurologist and sleep medicine expert. “This non-invasive, overnight diagnostic tool allows your doctors to see what’s happening in both your body and brain while you’re asleep.”

Most sleep labs look just like a regular hotel room with a private bathroom. Patients “check-in” around 8 pm, get ready for bed and a technician will place sensors on your body that monitor your sleep activity overnight. The technician records your sleep patterns and makes sure your sensors stay in place. In the morning, patients leave and the recorded study is sent to a board-certified sleep medicine physician for review. If a diagnosis is made, your physician will share the results with you and can recommend the best treatment option.



ALBERTO SANTOS, MD
WakeMed Pulmonology
& Sleep Centers

WakeMed Sleep Centers

If you think you or a loved one might have a sleep disorder, have your physician refer you for consultation with WakeMed’s sleep specialist.

Schedule an appointment by calling (919) 782-7240.

Tips From WakeMed Sleep Experts

Changes in sleep patterns are a normal part of aging. Unfortunately, these changes aren’t always for the good – many people have a harder time falling or staying asleep. Here is some advice to get the sleep you need.

- **Keep a consistent schedule.** Go to bed and wake up at the same time every day (within an hour) – regardless of whether it’s a weekday, weekend or holiday. Fluctuations can disrupt your body’s circadian rhythm.
- **Be active throughout the day.** Spending time outside and incorporating exercise into your daily routine can help improve your ability to sleep. Don’t exercise at night to avoid high levels of adrenaline and body temperature before bedtime.
- **Avoid large meals, caffeine and alcohol before bed.** These can impact your ability to fall and/or stay asleep.
- **Reserve your bedroom for sleep.** If you use your bedroom for your office or workout room, you may find it harder to sleep in there.
- **Focus on the environment.** Keep your bedroom quiet, dark and cool (experts recommend between 60 and 67 degrees).
- **Wind down before bed.** Spend your last hour awake preparing your body and mind for sleep. Try a warm bath, dimming the lights, or light reading to wind down. Experts recommend no TV or devices for the last 30 minutes before sleep.



A Closer Look at Sleep Apnea

Sleep apnea is incredibly common and goes widely undiagnosed. It is caused by relaxation of the throat muscles, which can block your airway while you’re sleeping.

COMMON SIGNS & SYMPTOMS

- Loud snoring
- Daytime sleepiness
- Stopping breathing during sleep
- Waking up suddenly, gasping or choking
- Trouble concentrating
- Morning headaches
- Mood changes, depression, irritability
- High blood pressure
- Decreased libido
- Nighttime sweating
- Dry mouth or sore throat in the morning



If diagnosed, options range from mechanical oral devices to continuous positive airway pressure (CPAP) devices, or surgery.

RISKS OF UNTREATED SLEEP APNEA

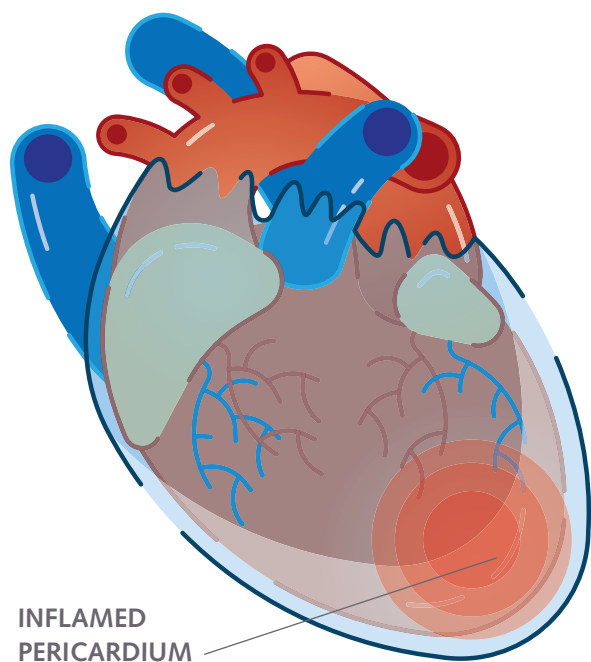
- High blood pressure
- Heart disease
- Type 2 diabetes
- Weight gain
- Cardiac arrhythmias
- Stroke
- Acid reflux
- Car accident or injury

Pericarditis – The “Other” Chest Pain



One frequent cause of chest pain has nothing to do with plaque buildup or “traditional” heart disease, nor is it widely known. Pericarditis is a common condition caused by inflammation of the sac that surrounds your heart. When it strikes, feelings of acute pain in the chest come on suddenly, mimicking the most common sign of a heart attack. Because it’s more common in those with a history of heart problems, knowing the signs and symptoms can help those with pericarditis get the treatment needed to prevent further discomfort and/or complications.

While symptoms often occur without warning, there is good news—once diagnosed, the condition can typically be treated easily with medication.



The Protective Pericardium

The pericardium, a double-layered sac surrounding your heart, is a protective membrane. It safeguards your heart in several ways, such as helping it to stay in place and preventing infection. It also adds lubrication to your heart, preventing it from rubbing against other organs. Inflammation of this lining is what causes pericarditis.

The Basics of Pericarditis

There are several types of pericarditis – with the most common being *acute pericarditis*. This kind comes on quickly and typically lasts less than three weeks. The most common sign is a stabbing chest pain, often on the left side or center of the chest. Other signs may include weakness, shortness of breath, coughing, general feeling of being unwell, fever, or abnormal heart rhythm/palpitations. Fifteen to 30 percent of people who have pericarditis will experience it again in the future.

“The vast majority of patients with acute pericarditis will complain of sudden chest pain. This is typically sharp and can change based on your position,” says Dr. Tapan Godiwala, WakeMed Heart & Vascular. “Some patients may have fever or a preceding flu-like illness. Symptoms can worsen when you breathe deeply, swallow or lie down, but improve when you sit up straight and incline forward.”

Chronic pericarditis is when you have symptoms for more than three months and in this case, it’s usually associated with chronic inflammation which may result in fluid around the heart (pericardial effusion). While it’s rare, this can cause life-threatening complications such as cardiac tamponade, an emergency condition in which the ventricles of the heart cannot circulate blood to the rest of the body.

Lastly, *chronic constrictive pericarditis* takes time to develop and therefore may occur if pericarditis goes untreated. This condition causes scar tissue to build up around the pericardium, which can compress the heart and prevent it from functioning optimally. “The biggest risk of untreated pericarditis is an increased potential for recurrence or chronic pericardial disease,” explains Dr. Godiwala. “Very rarely (less than 1%), patients can develop cardiac constriction as a long-term complication.”

Determining the root cause of pericarditis isn’t always possible. It can develop shortly after a heart attack or heart surgery, or for a number of other reasons. Common causes include a virus, autoimmune disease, kidney failure, tuberculosis, trauma to the heart or chest, or cardiac procedures that involve manipulation of the pericardium. While pericarditis is more common in men, it can impact anyone.

Diagnosis is the Key

While pericarditis isn’t typically serious, getting it diagnosed and treated early is always best.

Experts believe that pericarditis accounts for approximately five percent of emergency room visits for chest pain. If you have symptoms, whether you visit the ER, your primary care doctor or cardiologist, diagnosis is fairly straightforward.

A doctor will examine your heart by listening to it with a stethoscope. He or she will check your heart for “pericardial rub,” a noise made when the expanded pericardium moves against the heart. To determine the extent of the inflammation, your doctor may order several tests, such as x-rays and electrocardiograms.

Echocardiograms, CT scans, and cardiac catheterization tests can reveal whether the pericarditis is constrictive, which is the chronic, long-term type. To identify any fluid in the chest, doctors may use cardiac MRIs or CT scans. Blood tests are useful for ruling out a heart attack and pinpointing why pericarditis is occurring.

Treating Pericarditis

EXPERTS BELIEVE THAT
PERICARDITIS ACCOUNTS FOR

5% OF EMERGENCY
ROOM VISITS
FOR CHEST PAIN

THE GOOD NEWS

IS THAT CHEST PAIN CAUSED BY
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“The vast majority of patients with acute pericarditis will complain of sudden chest pain. Some patients may have fever or a preceding flu-like illness.”

TAPAN GODIWALA, MD
WakeMed Heart & Vascular



If pericarditis is confirmed, most cases are treated with nonsteroidal anti-inflammatory drugs (NSAIDs), such as aspirin or ibuprofen, and colchicine, which can help to keep inflammation at bay for weeks or months. If pericarditis is caused by a virus or fungus, other medication may be necessary. In rare cases, steroids can be part of the treatment.

Once you’ve been diagnosed with pericarditis, keep an eye out for future symptoms since recurrence is fairly common. Dr. Godiwala concludes, “While chest pain is never a pleasant symptom or one to take lightly, the good news is that chest pain caused by pericarditis is fortunately one of the more easily treated conditions we manage as cardiologists.”

Winter Comfort Food – Soups & Stews



The comforting and nourishing benefits of soup are plenty – most everyone can agree that there's little more soothing than a warm bowl of chicken soup on a cold day or when you're feeling under the weather. Whether you prefer a basic vegetable soup or a hearty stew, take comfort in learning the many benefits of making and indulging in homemade soups and stews all year long. "Soups and stews make it easy to incorporate a variety of nutrient-dense ingredients into one serving," explains WakeMed dietitian Parul Kharod, MS, RD, LDN. "While it would be hard to eat 10 different vegetables separately, they can all come together beautifully in one soup or stew. I encourage my patients to enjoy the wide variety of flavors, textures and styles of cooking that can be used when making soups or stews – and the fact that you can control the sodium, fat and nutrient content when you make them yourself."

Six Benefits of Soups & Stews

- 1 They are easy on your digestive system. Stock-based soups contain gelatin, which aids in digestion and provides a wealth of benefits for joint problems such as arthritis.
- 2 Soup holds onto water-soluble vitamins, so adding green veggies like kale or swiss chard is a great way to get more nutrients.
- 3 They're easy to make. Most soups and stews need little supervision once the prep work is done – making it easy for those who don't consider themselves a savvy chef.
- 4 They can provide a full meal in one bowl with no need to stress over side items. If needed, add some healthy crackers or whole-grain bread and your meal is complete.
- 5 They store well. You can prepare soups and stews in large batches and freeze – making meal prep fast and easy.
- 6 They can support healthy weight loss. There are several studies that highlight low calorie soup's ability to promote weight loss – demonstrating that people who eat soup may consume up to 20% less calories than those who don't.

"Soups and stews make it easy to incorporate a variety of nutrient-dense ingredients into one serving."



PARUL KHAROD, MS, RD, LDN
WakeMed Dietitian

Making the Case for Making Your Own

As a general rule, making soup from scratch is the healthiest option. Canned foods are often packed with sodium, preservatives and other unhealthy ingredients. With some quick planning and basic prep, making homemade soup/stew is an easy way to control the fat, sodium and calorie content. If you're short on time, here are some ways to streamline your prep.

- Buy frozen, pre-cut or ready-to-use veggies such as butternut squash cubes, spinach, sliced mushrooms, celery, onions and carrots.
- Use store-bought, low-sodium broth.
- Try canned chicken (be sure to check the sodium!) or buy a pre-cooked rotisserie chicken.

Mix & Match for the Perfect Soups & Stews

No recipe? No problem. You can reference this chart for some ideas on how to mix and match ingredients you probably already have in your pantry or fridge for a quick, healthy meal.

VEGETABLES



BENEFITS

Veggies provide a variety of vitamins, minerals, fiber and flavor. They are an easy way to “eat the rainbow,” which dietitians recommend for getting the antioxidants you need for optimal health.

TIPS

You can use fresh, canned or frozen – but if you choose canned, be sure to get the “no sodium added” kind. Common vegetables for soups include: leafy greens, all varieties of squash, carrots, onions, bell peppers, mushrooms, cabbage, tomatoes, cauliflower and broccoli.

PROTEIN

BENEFITS

Whether you choose to add plant or animal protein, doing so will help stabilize your blood sugar levels, support your muscles and bones, help you maintain and lose weight, and provide you energy to get through the day.



TIPS

Beans: Popular choices include kidney beans, lentils, northern beans, black beans and navy beans. Canned is fine, but be sure to drain and rinse.

Meat: Chicken and turkey are heart healthy options. Limit/use red meat and processed meats sparingly. Avoid using bacon grease, lard, ham hock or other animal fats to flavor your soup.

Seafood: Crab and clams are popular – and add flavor and texture.

Tofu: High in protein and low in fat, tofu comes in a variety of textures and absorbs the flavor of the other ingredients.

STARCH

BENEFITS

Adding healthy carbohydrates can help fuel the body. Whole grain starches and starchy vegetables can also provide fiber, which makes the dish more filling.

TIPS

Noodles: Try whole wheat, rice, or buckwheat.



Rice: Choose white, brown, or wild rice.

Grains: Quinoa, barley, or farro are great options.

Starchy Vegetables: Potatoes, sweet potatoes, green peas, or corn.

STOCK/BROTH

BENEFITS

Stock/broth is often the “base” of your soup and can provide flavor and other health benefits.

TIPS

You can choose chicken, beef, vegetable broth or bouillon. Use homemade or low sodium varieties.



SPICES/FLAVORING AGENTS

BENEFITS

These tasty ingredients can add depth of flavor and color – and can have a huge impact on the taste of your dish.

TIPS

Choose fresh or dried herbs. Popular options include garlic, parsley, pepper, basil, bay leaves, ginger, among others. For a pop of flavor – add hot sauce, low sodium soy or Worcestershire sauce, lemon juice, or cooking wine.





SERVES 4-6

Roasted Vegetable Soup Recipe

INGREDIENTS

1 medium butternut squash, peeled and cut into 1-inch pieces
 1 large red bell pepper, seeded and cut into 1-inch strips
 2 large carrots, peeled and cut into 1-inch pieces
 1 large red onion, diced
 2-3 cloves garlic, minced
 2 tbsp. olive oil, divided

1 14.5 ounce can low-sodium diced tomatoes, undrained
 4-5 cups water or low sodium broth; more if needed
 1 tsp. freshly grated ginger
 1/2 tsp. each ground turmeric, cumin and coriander, or more to taste
 Salt and pepper to taste

INSTRUCTIONS

- Put the first 3 ingredients on a sheet pan in a single layer.
- Drizzle 1.5 tbsp. olive oil over the vegetables.
- Bake in a preheated oven for 400 degrees for 30-45 minutes until the butternut squash is cooked and the vegetables are roasted. Let cool.
- In a large soup pot, heat remaining 1/2 tablespoon oil over medium heat. Add onions and sauté until tender. Stir in garlic, ginger, turmeric, cumin and coriander; cook until fragrant, 1 to 2 minutes.
- Add diced tomatoes, roasted vegetables and water/broth.
- Working in batches, puree soup with an immersion blender, adding more liquid if needed to reach desired consistency. Return soup to the pot and reheat. Serve soup warm topped with a dollop of yogurt, chopped parsley or other fresh herbs.

NUTRITIONAL INFORMATION PER SERVING: Calories: 220; Total fat: 9.9 g (1.4 saturated fat); Cholesterol: 0 mg; Sodium: 379 mg; Carbohydrates: 34.1 g; Fiber: 7.1 g; Sugars: 12.8 g; Protein: 3.9 g



SERVES 6

Chicken Lentil Barley Stew

INGREDIENTS

1/2 cup green or brown lentils
 1/2 cup pearl barley
 1 1/2 cups cooked chicken or turkey (diced or shredded)
 1 14.5 ounce can low-sodium diced tomatoes
 8 ounces sliced mushrooms
 1 green bell pepper or celery, diced
 3 carrots, peeled and chopped
 1 yellow onion, diced

3 garlic cloves, minced
 2 tbsp. olive oil
 2 cups diced tomatoes – if using canned, get no salt added
 5 cups vegetable/chicken broth (low-sodium)
 2 tbsp. Italian seasoning; add fresh herbs if desired
 Salt & pepper to taste

INSTRUCTIONS

- Rinse the lentils under cold running water and drain; set them aside.
- In a large saucepan or Dutch oven, add olive oil. Sauté the onions, celery/bell pepper, carrots, mushrooms, and garlic for 2 minutes.
- Add the broth, lentils, barley and Italian seasoning. Bring the mixture to a boil. Reduce heat and simmer, covered, for 20 minutes.
- Stir in the chicken or turkey.
- Simmer, covered, for about 20 minutes.
- Add the diced tomatoes.
- Cook for 10-15 minutes and serve.

Nutritional Information Per Serving: Calories: 298; Total fat: 7.2 g (1.1 saturated fat); Cholesterol: 29 mg; Sodium: 118 mg; Carbohydrates: 37.8 g; Fiber: 7.6 g; Sugars: 7.5 g; Protein: 21.1 g



A Shocking Journey to Feeling Better Than Ever

When it comes to heart disease, there's no discrimination – and family history is one of the toughest risk factors to overcome. That's why at age 45, a seemingly healthy Michael Blouin had a very shocking day that reminds us all of the importance of listening to our bodies.

It was May 30 – a regular day at work where Michael serves as a section manager for the local Caterpillar plant when he first started to notice something was off. After eating a spicy lunch, symptoms like heartburn and indigestion didn't seem too unusual. But, since they were paired with some mild shoulder pain and tingling in his hand – Michael might have thought twice about what he was feeling. The symptoms came and went throughout the day, but since they were mild, Michael went about his routine.

That night, with little appetite (another red flag), Michael skipped dinner and fell asleep in his recliner – until feelings of intense chest pressure woke him abruptly. After waking his wife and drinking some water, he started to feel better. Instead of seeking treatment, Michael did what so many patients do – ignored the potential seriousness of what was happening and went back to sleep. A few hours later, his body gave no mixed signals – Michael woke suddenly to the most intense pressure he'd ever felt and severe nausea.

His wife quickly got them on the road to WakeMed from their home in Clayton. Halfway there, he couldn't take the pain, so they pulled over and called an ambulance. Paramedics gave him nitroglycerine and monitored his vitals along the way. Just as they were nearing the WakeMed exit, he heard the crew say, "Pull over and charge the paddles." Michael had suffered his first cardiac arrest, which is a life-threatening event that occurs when your heart suddenly stops – often due to a heart attack or blockage.

The EMTs quickly shocked his heart back into rhythm using a defibrillator and upon arrival to WakeMed, Michael was taken to the cardiac catheterization lab where they found a 100% blockage of his left anterior descending artery – often referred to as the widow-maker.

He had a stent placed and a few hours later, while Michael was recovering, he unexpectedly suffered another cardiac arrest. Fortunately, WakeMed's Code Blue team was able to get his heart back into normal rhythm with the defibrillator. From there, Michael underwent another procedure and continuous monitoring to ensure his heart and arteries were healthy enough to go home.



THE ROAD TO RECOVERY

Michael went home less than a week after the incident, but took two months off work to recover and focus on his health. He wore a LifeVest monitor and defibrillator for three months, which allowed Michael's care team to continuously monitor his heart for life-threatening problems.

Michael was also referred to cardiac rehab where he overcame his legitimate fear of the treadmill. Sadly, Michael's father (who also suffered from heart disease) experienced a fatal cardiac arrest while exercising on a treadmill at the young age of 56.

"I took my recovery very seriously – and I'm glad I did because I'm feeling better than I can ever remember feeling. Cardiac rehab helped me tackle my fears and build my strength," explains Michael.

He hasn't had red meat, pork, caffeine, alcohol or fried food since his cardiac events and consistently works out three to four times per week. "Sure, these changes might have been hard at first – but my health and being here with my family makes it easy not to 'cheat' – and that's my plan for the long-term."

Today, Michael is thrilled to have the energy to keep up with his kids – attending his son's basketball games and teaching his daughter to drive. He takes nothing for granted and feels fortunate to be here.

"My outlook on life is definitely more positive and I'm learning how to take one day at a time, which is good for my stress."

MICHAEL BLOUIN



WakeMed Heart & Vascular Gets ALL the Love!

From the bottom of our hearts, we thank the patients and their families who take a moment to send us a card or note to express their appreciation or tell us how they are doing. Here are a few:

Below is an edited excerpt from a five-page thank you letter from our very own Heart Center nurse, Donna Sharifyazdi after the Heart Center team helped care for her husband who suffered a major heart attack on Christmas Day.

At dawn on Christmas Day, I woke up to my husband complaining of chest pain. From my 27 years in cardiac nursing, I knew that look all too well. We go to the emergency room quickly. Before we know it, testing confirmed he had a massive heart attack and he's in the cath lab. After an eventful start including a Code STEMI and a Code Blue (which means his heart stopped beating completely), the Cath Lab team and Dr. Frances Wood worked tirelessly to clear his blockage.

My husband's nurses, educators and care team were there with us every step of the way. Dr. Wood took the time to explain everything to my daughter and even sat with us and provided comfort. As a nurse who's never been on "this side" of our cardiac care, I couldn't be more proud of where I work and what I do than I am today.

*Dear Dr. Williams, Dr. Boulton
and the CT Surgery Team-*

We are so grateful for your excellent surgical efforts and teamwork that saved a wonderful wife, a great mother, and a loving grandmother. Words cannot express our appreciation and loving care.

-A Thankful Family

Dear Heart Center Staff,

You are the most awesome medical team! Without exception, every staff member from the receptionist to the surgeon, has shown me dignity and professionalism like I have never experienced before. "How" you do your job really does matter. Thank you bunches!

*-Shirley
A Grateful Patient*



WakeMed Named TCAR Center of Excellence

WakeMed was named a 2019 TCAR Center of Excellence for improving carotid artery disease treatment using a new procedure called TransCarotid Artery Revascularization (TCAR). TCAR is a minimally invasive approach for high-risk patients to reduce their risk of stroke. TCAR developer, Silk Road Medical, reviewed hospitals across the country to recognize the centers that have demonstrated excellent patient outcomes. Congratulations to the TCAR team!

WakeMed Named Top Cardiovascular Hospital

This fall, WakeMed was named one of the nation's 50 Top Cardiovascular Hospitals by IBM Watson Health™. The study spotlights the top-performing cardiovascular hospitals in the U.S. based on a balanced scorecard of publicly available clinical, operational and patient satisfaction metrics and data. Indicators include rates for mortality, complications, readmissions and much more. Way to go!

February is Month

Join WakeMed as we celebrate and raise awareness about the importance of heart health and cardiovascular disease prevention.



CPR Anytime Programs

Learn hands-on CPR from WakeMed experts – plus, hear from our expert cardiologists about sudden cardiac arrest. Learn signs to look for and what to do if you or someone experiences a cardiovascular event.

Alexander YMCA,
Raleigh
Thursday, February 13
6:30 pm

WakeMed Cary Hospital
Wednesday, February 19
6:30 pm

WakeMed North Hospital
Wednesday, March 4
6:30 pm



Mended Hearts

Mended Hearts of the Triangle – Upcoming Events

Mended Hearts of the Triangle at WakeMed offers support, education and activities for cardiac survivors, their family, and medical professionals.

Monday, February 17

WakeMed Heart Center
Conference Center (3rd Floor)
11:30 am to 1 pm

Topic: Heart Month & Survivor Celebration

Monday, March 16

WakeMed Heart Center
Conference Center (3rd Floor)
11:30 am to 1 pm

Topic: Stress Management



LOVE YOUR HEART DAY

Friday, February 7 • 11 am to 3 pm

WakeMed's Mobile Wellness comes to Cameron Village for free screenings and heart healthy fun!

Heart disease is the number one killer of women in the United States.

Cameron Village and WakeMed Heart Center are partnering to increase awareness among women about heart disease. Shop and spend \$250 in a single day to receive your choice of gift PLUS, receive a certificate for a free total & HDL cholesterol test and blood pressure check – available by appointment at a WakeMed location near you. Visit wakemed.org/love-your-heart for more details.

cameron village

WakeMed 
Heart & Vascular



Sharing A Heart for Health



Presented by The Links Inc. and Southeast Raleigh YMCA

Southeast Raleigh YMCA

Saturday, February 22
8 am to 12 pm

WakeMed is partnering with The Raleigh NC Chapter of the Links Inc. and Southeast Raleigh YMCA to offer free heart-health screenings and education. Screenings are offered first-come, first-served while supplies last.

For more information or to register, visit events.wakemed.org

Your children.
Your family.
Your health.
Your well-being.
Your place.

WakeMed Women's

From pregnancy and childbirth to mammograms, menopause and more, the care is both comprehensive and compassionate. Covering everything and anything female. All provided by experts specializing in OB-GYN, general and breast surgery, urogynecology, cardiovascular disease, weight loss, primary care and more. Because, when it comes to your health and the health of your family, you're the decision maker. And the decision is clearly WakeMed Women's.



Download today.

WakeMed 
Women's

wakemed.org/womens-services