

Bears Be Well

TAKE CHARGE OF YOUR HEALTH



HEART HEALTH MONTH

Let's have a heart-to-heart about heart health and physical well-being. Your heart beats 60 – 100 times in a minute, pumping about 2,000 gallons of blood through your body every day. It's such an important muscle and because of that you need to take care of your heart. How can do that?

- Eat nutritious food such as whole grains and vegetables
- Increase your physical activity
- Manage your weight
- Reduce your stress
- Quit smoking
- Limit alcohol consumption

There are many resources available that can help you stay on top of exercising and eating healthy. Check out the podcast included in this newsletter to learn more!

HEART HEALTH & HYPERTENSION

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PODCAST

[Hypertension: The Silent Killer](#)

[Exercise? I thought you said extra fries?](#)

FEBRUARY CLINIC EVENTS:

EKG Screening

Employees can receive this screening by scheduling an appointment with KDMC Clinical Staff at the SSU Health Clinic.



Guard your heart

Be a heart disease hero



Like a true hero, you put your heart into everything you do. That's why it's so important to pay attention to your heart health. More than one in three adults in the U.S. has at least one form of heart disease. Could you be one of them?¹ Some forms of heart disease can't be prevented, but making healthy choices to improve your odds is truly heroic.

Check for signs of heart disease or heart attack

You might experience chest pain when you're active, excited or stressed. Sometimes it might show up after you've eaten a big meal or been outside in cold weather. It might feel like weight or pressure, aching, burning or even numbness.²

Other signs include:²

- Pain in your left shoulder, arms, neck, back or jaw
- Shortness of breath
- Irregular, faster or skipped heartbeats
- Weakness or dizziness
- Nausea
- Sweating

You may not have any symptoms at all. If you feel something isn't right, even if you don't have these symptoms, call your doctor.

**Hey hero, be sure to talk
to your doctor about your
risk of heart disease and
set up an appointment.
No superpowers needed —
just a phone!**



Sources

1 Centers for Disease Control and Prevention website: Heart Disease and Stroke Prevention: Addressing the Nation's Leading Killers (accessed November 2014): cdc.gov/chronicdisease/resources/publications/AAG/dhosp.htm.

2 Centers for Disease Control and Prevention website: Heart Disease Facts (accessed November 2014): cdc.gov/heartdisease/facts.htm.

3 World Heart Federation website: Different heart diseases (accessed November 2014): world-heart-federation.org.

4 American Heart Association website: Walk, Don't Run, Your Way to a Healthy Heart (accessed November 2014): heart.org.

5 Centers for Disease Control and Prevention website: Heart Disease/Prevention: What You Can Do (accessed November 2014): cdc.gov/heartdisease/what_you_can_do.htm.

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Are there heart problems in your family tree?

Some types of heart disease are hereditary — they run in families. Others are caused by unhealthy habits, such as lack of exercise or a poor diet. Not all types of heart disease are an emergency, but they're all serious. Talk to your doctor as soon as you can if you think you might have one of these conditions:³

- **Coronary artery disease:** the arteries get clogged or blocked and cause a heart attack.
- **Congestive heart failure:** the heart can't pump enough blood.
- **Arrhythmias or irregular heartbeats:** they feel like pounding or fluttering in your chest. They can make you feel dizzy, light-headed, short of breath, weak or tired.
- **Heart valve disease:** the valves don't work as they should.
- **Congenital heart disease:** the heart isn't formed properly.
- **Cardiomyopathy or heart muscle disease:** this causes the heart to enlarge or become less flexible.
- **Pericarditis:** the membrane around the heart gets inflamed because of infection, injury or disease.

To learn more about heart health, visit the American Heart Association at heart.org.

Visit anthem.com for more ways to get healthy — and stay healthy.

Take heart! You can lower your risk

Reducing your risk for heart disease is easy. In fact, it's a walk in the park! If you walk just 30 minutes most days, you reduce your chance of developing heart disease.⁴ You don't have to do it all at once, either. Taking three 10-minute walks works just as well.² Quitting smoking, losing weight, lowering blood pressure and cholesterol, and responding to stress in a healthy way can also help you avoid developing a heart condition.⁵



Risk factors for heart disease

Heart disease isn't just a random condition. There are a number of factors that can make you more likely to acquire this number one killer. Some are controllable, and some are not — but either way, you can take steps to increase your odds against getting heart disease.



You're more likely to have heart disease in your lifetime if you:



Have high blood pressure



Are physically inactive



Have high cholesterol



Have a family history of early heart disease



Have diabetes or pre-diabetes



Have a history of preeclampsia during pregnancy



Are a smoker



Have an unhealthy diet



Are overweight or obese



Are over 55

Remember, many of these factors are under your control. So take steps now to lower your risk — and live a healthier, happier life.

Source: www.nhlbi.nih.gov/health/educational/hearttruth/lower-risk/risk-factors.htm

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Awareness Matters

HYPERTENSION IS THE LEADING CAUSE OF HEART DISEASE

BREAKING DOWN THE COST OF UNMANAGED HYPERTENSION

THE HIGH COST OF UNMANAGED HYPERTENSION

\$8,000

MANAGED HYPERTENSION

Average cost for employer per member per year *with no other cardiovascular claims*

\$24,766

UNMANAGED HYPERTENSION

Average cost for employer per member per year *with other cardiovascular claims*

+200% (OR 3 TIMES MORE)

At HORAN, our mission is to help employers provide a better quality of life for employees and their families. This mission drives our investment in the HORAN Financial Analyst think tank. The think tank is fueled by the team's ability to analyze claims data to guide clients and drive action. We call this HORANalytics®.

Hypertension, or abnormally high blood pressure, is the most prevalent chronic condition found in HORAN's book of business claims data. Unmanaged hypertension, when high blood pressure is not controlled with lifestyle modifications or a prescription drug, increases the risk of cardiovascular conditions such as heart disease and stroke. HORAN's Financial Analysts found that when hypertension goes unmanaged and escalates into more severe cardiovascular conditions, the average additional cost for employers is \$16,766 per member per year.

To underscore these findings, HORAN interviewed John J. Szawaluk (*right*), MD, FACC, FAHA, FASH, FSCCT, Specialist in Clinical Hypertension at The Christ Hospital Physicians—Ohio Heart & Vascular Center. As a non-invasive cardiologist, he specializes in clinical cardiology, hypertension, echocardiography stress testing and nuclear cardiology. Dr. Szawaluk is passionate about helping patients control and manage their hypertension to help them lead a healthier and longer life.



Q: WHAT ROLE DOES GENETICS PLAY INTO THE RISK OF HYPERTENSION? IS THERE GENETIC TESTING AVAILABLE TO PREDETERMINE SOMEONE'S RISK FOR HYPERTENSION?

JS

JOHN SZAWALUK (JS): Genetics certainly plays a role. The exact role is not entirely clear, but genetics is certainly a part of this. As far as genetic testing goes, it hasn't been as successful with hypertension as it has with other diseases. There are many reasons for this including the fact that there are likely multiple genes involved and the fact that environmental factors and lifestyle choices also play a huge role. Because of that, there hasn't been much success with genetic testing at this point in time. However, I think there is more to come.

Q: WHAT ADVICE DO YOU SHARE WITH INDIVIDUALS TO PREVENT HYPERTENSION?

JS

Blood pressure screens are really important to make people aware so they can address it before it becomes a huge problem. You have to know your numbers for prevention. In coronary disease when you tell people to "know your numbers" you mean know your cholesterol—it's similar with hypertension and blood pressure. One of the other big issues with hypertension is that people don't often feel poorly with high blood pressure until they have a problem (e.g. stroke,

heart attack, etc.). By the time it comes to the forefront, you often have what we call end-organ damage (e.g. kidney disease) or other disease states as a result of the hypertension.

Q: WHAT IS YOUR TYPICAL TREATMENT PLAN FOR SOMEONE FIRST DIAGNOSED WITH HYPERTENSION?

JS

Initially we try lifestyle modifications to try to treat high blood pressure: diet, exercise and limit alcohol intake. Diet can't be overstated, specifically a low-sodium diet. If you look at the average American diet we all eat way too much salt—you can't get away from it. Usually you see peoples' eyes roll and they tell you, "I don't eat salt." Well, that's really hard to do. We've had some success with educating patients on how to read food labels. Once they buy into the low-sodium diet, they often see positive results including decreased blood pressure and weight loss.

Q: WHAT WOULD YOU RECOMMEND IF A PATIENT'S HYPERTENSION CANNOT BE MANAGED WITH LIFESTYLE MODIFICATIONS OR IF A PATIENT IS UNWILLING TO MAKE THOSE CHANGES?

JS

If lifestyle modification is unsuccessful and blood pressure is not controlled, depending on an individual's risk factor profile, medical therapy



DID YOU KNOW?

1 OUT OF EVERY 3
U.S. ADULTS HAS HIGH
BLOOD PRESSURE



HYPERTENSION RISK
FACTORS INCLUDE OBESITY,
EXCESSIVE ALCOHOL
CONSUMPTION, SMOKING &
FAMILY HISTORY

MORE WOMEN DIE
OF HEART DISEASE
THAN ALL OTHER
CANCERS
COMBINED

HIGH BLOOD PRESSURE
IS INCREASING IN
CHILDREN DUE TO THE
OBESITY EPIDEMIC

could be warranted. Lifestyle modification would continue to be a part of therapy as well. If you look at epidemiological data, (factors that determine the presence or absence of diseases) hypertension is the number one cause of heart attack, stroke, heart failure and kidney disease. Medication is used to try to prevent these resulting problems. However, I would say my patients' non-adherence rate (people not taking their prescribed medication) is 30%. There are a few reasons for this: side effects (or perceived side effects), cost and the fact that some people just don't like taking medicine. Recently, a cardiovascular polypill has become available for use in Europe to improve adherence and risk factor control. This pill includes the three main drug classes used to treat hypertension in one pill: a calcium blocker, an ace inhibitor and a diuretic. This polypill is not available in the United States at this time.

Q: WHAT DOES THE FUTURE OF HYPERTENSION LOOK LIKE?

JS

Hypertension is one of those things that if you live long enough you will most likely get it because it's a disease of aging. With people living longer, about 75-80% of people will deal with hypertension at some point in their life. We will only see the number of hypertension cases increase as a result of our country's obesity epidemic.

Q: WHAT CAN EMPLOYERS DO TO HELP COMBAT THE COSTS OF HIGH CLAIMS AS A RESULT OF HYPERTENSION AND RESULTING DISEASES?

JS

I would recommend that employers work to raise awareness about hypertension and its negative long-term effects. I would also encourage employers to drive their employees to get screened for hypertension.

BENEFITS: WHAT, LIKE IT'S HARD?



THE PODCAST THAT BREAKS DOWN THE TRUTHS AND MISCONCEPTIONS ABOUT ALL THINGS BENEFITS

HORAN welcomes you to the "Benefits: What, Like it's Hard?" podcast where we breakdown the truths and misconceptions about all things benefits. If you want a better understanding of your employee benefits package and tips on how improve your physical and financial wellness, this podcast is for you!

Join HORAN and Melanie Appel, MS, of Wellness Coaches USA for a conversation on hypertension:

- What is hypertension?
- Tips for hypertension prevention
- How to treat hypertension



Melanie has over 12 years of wellness experience in both hospital and corporate settings. She has designed and implemented health promotion programs for wellness areas such as weight loss, stress management, stretching and physical activity.

Visit bit.ly/Hypertension_Podcast to listen to our discussion about hypertension.

Subscribe today on your podcast app of choice, or visit www.horanassoc.com/tunein to learn more about the podcast.

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You're in control

You can do a lot to prevent high blood pressure



High blood pressure issues are more common than you may think. About one in three adults in the U.S. has high blood pressure or hypertension. Another one in three has prehypertension — blood pressure that is higher than normal, but not yet in the high range.¹ Learning if you're at risk can help you determine what you can do to help prevent high blood pressure.

What you can do to control your blood pressure

Because high blood pressure is so common, all of us should pay attention to our blood pressure numbers and try to keep them low. Here's how:²

- Have your blood pressure checked regularly, and know what's normal for you.
- Get to or stay at a healthy weight.
- Exercise at least 150 minutes each week.
- Be careful not to eat too much salt — ask your doctor how much sodium is safe for you.³
- Don't use tobacco products.
- Avoid saturated fat.
- Limit alcohol.



Helpful resources

Visit the American Heart Association at heart.org for information and tools, including a high blood pressure risk calculator.



Sources:

- 1 Centers for Disease Control and Prevention website: *High Blood Pressure Facts* (accessed April 2018): cdc.gov/bloodpressure/facts.htm.
- 2 Centers for Disease Control and Prevention website: *Preventing High Blood Pressure: Healthy Living Habits* (accessed April 2018): cdc.gov/bloodpressure/healthy_living.htm.
- 3 Centers for Disease Control and Prevention website: *Most Americans Should Consume Less Sodium* (accessed April 2018): cdc.gov/salt/index.htm.
- 4 National Heart, Lung, and Blood Institute website: *What Is High Blood Pressure?* (accessed April 2018): nhlbi.nih.gov/health/health-topics/topics/hbp.
- 5 Centers for Disease Control and Prevention website: *About High Blood Pressure* (accessed April 2018): cdc.gov/bloodpressure/about.htm.
- 6 Centers for Disease Control and Prevention website: *High Blood Pressure Risk Factors* (accessed April 2018): cdc.gov/bloodpressure/risk_factors.htm.
- 7 National Heart, Lung, and Blood Institute website: *Who Is at Risk for High Blood Pressure?* (accessed April 2018): nhlbi.nih.gov/health/health-topics/topics/hbp/atrisk.html.
- 8 American Heart Association website: *High Blood Pressure: Over-the-Counter Medications* (accessed April 2018): heart.org.

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How high blood pressure affects your body

Your blood pressure is the force of your blood pushing against the walls of your arteries as your heart pumps it through your body.⁴ Over time, if the force is too great, your arteries can harden. Less blood and oxygen passes through hardened arteries. Eventually your heart, brain and other organs can be damaged by the effects of high blood pressure.⁵

Normal blood pressure is below 120/80. This is read as “120 over 80.” The first number is the “systolic” and the second number is the “diastolic.” Even if only one of the numbers is higher than it should be, you could have prehypertension or high blood pressure.⁵

Know your risk

Anyone can get high blood pressure. Most of the time, though, it's found in people who are older than 35.

You're also more likely to have high blood pressure if you are:⁶

- African American.
- Pregnant, postmenopausal or taking birth control pills.
- Diabetic.
- Overweight or obese.
- A heavy drinker.
- A tobacco user.
- Eating a diet high in salt or sodium and low in potassium.⁷

High blood pressure can damage your body even if it doesn't cause any symptoms.⁴ That's why it is so important to have your blood pressure checked regularly. Talk to your doctor about your risk factors, and whether your blood pressure is healthy.

If you're diagnosed with high blood pressure, you may have to take medication. Be sure to follow your doctor's instructions. Ask your doctor before taking any over-the-counter medications or supplements.⁸ Also, pay close attention to the ingredients in any over-the-counter cough, cold or flu medicine you take. Decongestants can raise your blood pressure or interfere with blood pressure medications and can be very dangerous for a person with high blood pressure.



How to lower your blood pressure

High blood pressure has no warning signs or symptoms — but it's one health issue you can prevent or treat, as long as you know you have it. Have your blood pressure checked regularly!

If you do have high blood pressure, you can often control or lower it through the following lifestyle changes:

**1 OUT OF 3
PEOPLE IN THE U.S.
HAS HIGH BLOOD PRESSURE
— AND MANY —
DON'T EVEN KNOW IT.**

Normal blood pressure is less than 120/80. Anything over that is a concern. 140/90 or higher is considered high blood pressure.



LOSE EXTRA POUNDS

Losing just 10 pounds can help reduce your blood pressure. And watch your waistline. Carrying too much weight around your waist can put you at greater risk of high blood pressure.



EXERCISE REGULARLY

All types of exercise can help lower blood pressure — walking, running, cycling, dancing, swimming, even lifting weights. Aim for at least 30 min a day!



EAT A HEALTHY DIET

Research the DASH (Dietary Approaches to Stop Hypertension) diet, which is a popular eating plan including whole grains, fruits and vegetables.



REDUCE SODIUM IN YOUR DIET

Even a small reduction in the sodium in your diet can reduce blood pressure. Limit sodium to less than one teaspoon of salt a day (2,300 milligrams).



LIMIT ALCOHOL

In small amounts, alcohol can potentially lower your blood pressure. But that protective effect is lost if you drink too much — generally more than one drink a day for women and for men 65+, and no more than two drinks a day for men under 65.



QUIT SMOKING

Each cigarette increases blood pressure for many minutes after you finish. Quitting smoking helps your blood pressure return to normal. People who quit smoking, regardless of age, have substantial increases in life expectancy.



REDUCE YOUR STRESS

Chronic stress can make you more likely to overeat and skip exercise, which puts you at risk for high blood pressure. Try meditation, yoga or schedule some "you time."



MONITOR YOUR BLOOD PRESSURE

Blood pressure monitors are available widely and without a prescription. Talk to your doctor about home monitoring before you get started.



GET SUPPORT

Supportive family and friends can help encourage you to take better care of yourself, drive you to the doctor's office or embark on an exercise program with you to keep your blood pressure low.

This information is meant to be educational. It should not be interpreted as medical advice. Please talk to your doctor about changes that may affect your health.

Sources: National Heart, Lung and Blood Institute website: Your Guide to Lowering Blood Pressure (accessed January 2013); nih.gov. Centers for Disease Control and Prevention website: High Blood Pressure Prevention: What You Can Do (accessed January 2013); cdc.gov. American Heart Association website: Understanding Your Risk for High Blood Pressure (accessed January 2013); heart.org. Mayo Clinic website: 10 Ways to Control High Blood Pressure Without Medication, (accessed October 2015), mayoclinic.org.

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