better you

ISSUE 1
2019

TOGETHER WE'RE HEALTHIER

- Common questions about heart surgery answered
- Getting the most out of fitness and health devices
- The latest in heart treatment technology

circuit of life

Medical devices treat heart failure, save lives and more

CHI St. Vincent
Heart Institute

ON TRACK

What you need to know about wearable, heart-monitoring devices

If you are looking for a new gadget to help you track your heart, you have a wide range of choices. Most monitor your heart rate and some can even determine your blood pressure. These devices can be found in many forms, including:

- Smartwatches (such as FitBit or Apple Watch)
- Ring monitors
- Clip-ons (Can be worn on a bra strap or waistband)
- Bracelets
- Chest bands
- Bluetooth earbuds
- Arm bands
- Arm or wrist cuffs (For blood pressure)
- Clothing (Such as hats, shirts or bicycle helmets with embedded sensors)

However, before you buy, you have to determine what kind of information you want—and why. Here are some aspects of the different devices you might want to consider.

Upping your exercise. If you are starting or expanding an exercise program, fitness trackers that incorporate a heart rate monitor will help you understand some basic information: resting heart rate, target heart rate for exercise goals and recovery rate, which is how quickly you resume a normal rate after you cool down.

Some devices can present the data in a way that is easy for you to read and share.

Learn more about heart health at **chistvincent.com/betteryou**.

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A cutting-edge pacemaker alternative and our continuing commitment to excellence

IMAGE COURETSY OF ADIDAS

Heart-monitoring Techfit shirt

Monitoring medical conditions. People who want to capture more specific data to monitor a diagnosed or possible heart condition should look for a device that is as accurate as possible. Devices that measure your heart rate, heart rhythm, blood pressure or blood oxygen level should offer near clinical accuracy to help determine if you should see a doctor. Some devices can even present the data in a way that is easy for you to read and share with your health care provider, either online or via email.

No replacement for a visit. As with any new technology, learning how to use heart-monitoring devices is important. On the one hand, an accurate device can alert you to a condition, such as the rhythm disorder atrial fibrillation, that was previously undiagnosed. However, inaccurate information could send you to the doctor unnecessarily. Whether you're using a simple heart-rate monitor or a more advanced device such as a blood pressure cuff, talk to your doctor about how you should use it and its accuracy.

MIND YOUR HEART

Conditions that can lead to heart disease, or make heart disease worse

There are many different conditions that fall under the umbrella of heart disease, and each one comes with its own unique set of symptoms and complications. However, many people who have heart disease have one thing in common: complications due to another chronic condition.

People with heart disease often have one or more additional chronic diseases. These could include:

- Chronic kidney disease
- Chronic obstructive pulmonary disease (COPD)
- Depression
- Diabetes
- Iron deficiency and anemia
- Obesity
- Sleep apnea

While chronic diseases aren't always related to one another, the different symptoms of each condition can work together to negatively impact your health. For example, according to the American Heart Association, diabetes greatly increases the risk for stroke and heart disease complications, even when glucose levels are under control.

Having one or more chronic conditions can affect the treatment and outcome of your heart disease management, as well as lead to poorer quality of life, increased hospitalizations or earlier mortality. It's important to discuss each condition with your doctor, especially if symptoms are limiting function or affecting your everyday life. Your doctor can help you find ways and treatments to manage everything that is affecting your health. Together, you and your doctor can improve your overall health.

A DOSE OF RECENT RESEARCH

New research published in the New England Journal of Medicine throws into question long-standing advice that supports the health value of taking a daily baby aspirin. The study followed more than 19,000 older people for an average of 4.7 years before assessing their results. Previously, many doctors have recommended taking a baby aspirin each day to help reduce the risk of certain types of heart attacks. This new research shows that, for some people, that daily aspirin could be doing more harm than good and the associated risks could outweigh any potential benefit.

CHI St. Vincent cardiologists recommend that patients have an open conversation with their physician about their unique situation. This is especially important for patients who have already suffered a heart attack or stroke and want to avoid another one. For these patients there may still be some benefit from that daily aspirin.

For more recommendations, visit **chistvincent.com/betteryou**.

A BRIDGE to life

How one device helps patients survive advanced heart failure

The LVAD helped Troy Roberts, here with his wife Debbie, survive long enough to receive a heart transplant.

Troy Roberts, a 66-year-old from Bald Knob, Arkansas, and his wife, Debbie, received a phone call that changed their lives. They were sitting in a hotel room in Nashville, Tennessee—a five-hour drive from their home—and on the other line was a nurse from Vanderbilt University who informed Debbie that they had a heart that could be transplanted into Troy.

"She said 'Can you be here in an hour and a half, because we have a new heart?'" says Debbie Roberts. "And I just started crying. I couldn't believe it."

EXTENDING THE JOURNEY

Even though Troy Roberts lived a mostly healthy life—working, coaching youth baseball, performing chores like mowing the lawn—he experienced his first heart attack at age 38. While his lifestyle wasn't the cause, he did have a long family history on his mother's side of heart disease, including cousins who passed away as young as 33.

To learn more about heart disease, or to schedule an appointment with a CHI St. Vincent doctor, visit **chistvincent.com/heart**.

After having four heart attacks throughout his late 30s and 40s, Troy walked every day to stay in shape. However, his condition continually worsened and on January 17, 2018, he collapsed at work and was rushed to a local hospital. After a few weeks of testing and treatment, Troy was sent to CHI St. Vincent in Little Rock—the largest hospital in the Heart Institute's network—in an ambulance to be treated by cardiologist Muhammad Waqas, MD.

Dr. Waqas recommended that Troy receive a left ventricular assist device, or LVAD, to get his heart pumping properly again and to help him survive until he could get a heart transplant.

"It's such a wonder," says Debbie. "If he wouldn't have had that procedure, he would never have lived long enough to get a heart transplant."

"It's such a wonder. If he wouldn't have had that procedure, he would never have lived long enough to get a heart transplant."

—Debbie Roberts

Robert Laster and CHI St. Vincent heart surgeon Thurston Bauer, MD.

PASSIONATE PROVIDERS

"The LVAD is for advanced heart failure patients," says Dr. Waqas. "Patients who have gone through directed medical therapy for years and their heart function has deteriorated to the point where those therapies can't maintain their normal heart function anymore."

Dr. Waqas explains that in general only about 5–7 percent of heart failure patients are in an advanced enough stage to receive the LVAD. It is used as both a temporary measure to keep patients alive until they can receive a heart transplant or as destination therapy, which means it is a permanent fix for the patient's heart.

CHI St. Vincent Heart Institute was recently recognized as a Center of Excellence for its LVAD Program by the Joint Commission, a distinction that reinforces the commitment Dr. Waqas and his partner, cardiovascular surgeon Thurston Bauer, MD, have to providing the best treatment for every patient.

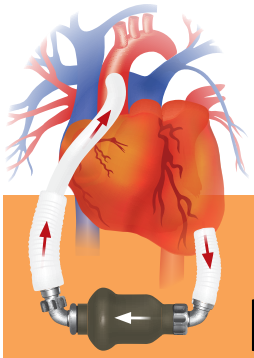
"Dr. Bauer and I came out of fellowship at the same time and started this new LVAD Program from scratch," says Dr. Waqas. "Defying the odds, the program was a huge success. We're very proud of the team and, more importantly, extremely proud of our patients who give us a chance to be a part of their lives. That is how we function—at a family level."

ALL IN THE FAMILY

Robert Laster, a 75-year-old who lives just outside of Warren, Arkansas, with his wife, Laverne, felt the warmth that Dr. Waqas and Dr. Bauer bring to their care firsthand.

"Dr. Waqas—that guy is a super human being; he loves people and he does everything he can to help them," says Laster. "And Dr. Bauer is my human Superman. I haven't got words to express how good that man is. [Before the procedure,] he said 'Look in my eyes and see if you see any doubt…you're going to get up and you're going to walk out of this hospital,' when I didn't even believe it myself."

Dr. Bauer notes that Laster was a high-risk and complicated patient due to his previous surgeries. "It was one of the most difficult LVAD implants I have ever done," he says. "Every time I see him, I am overwhelmed with gratitude that he has recovered >



PREVENTION IS THE BEST TREATMENT

Muhammad Waqas, MD

The left ventricular assist device, or LVAD, can save the life of someone with advanced heart failure. However, the LVAD is only used on 5–7 percent of the heart failure population. For other people who have heart failure, or even other heart conditions, living a healthier lifestyle is often the best medicine.

"We define different categories of heart failure as A, B, C and D," says Muhammad Waqas, MD, cardiologist at CHI St. Vincent Heart Institute. "Stage A patients do not have heart disease and Stage D is the advanced stage. Unfortunately, it's a one way street: once you develop heart damage, you have it."

Dr. Waqas explains that ideally prevention should start at Stage A. That's why early identification of risk factors, such as diabetes, preeclampsia during pregnancy, smoking, high blood pressure, family or personal history of heart disease, among others, is key.

"Part of my bucket list has always been seeing my granddaughter graduate from nursing school."
—Robert Laster

so well. He is a fighter, and we spent many long days and nights together in the OR and the ICU after his surgery. Whenever I see him I just can't help giving him a big bear hug."

Similar to Troy Roberts, Laster is an active man who suffered from a series of heart issues over about a ten-year period, including three separate operations. He visited his doctor just before Christmas in 2017 and exhibited telltale signs of advanced heart failure—extreme fatigue, severe shortness of breath and a complete loss of appetite—and was taken by ambulance to CHI St. Vincent in Little Rock, the same hospital where Roberts was treated.

The doctors at CHI St. Vincent stabilized his condition and allowed him to go back home for the Christmas holiday. However, they told him he would have to come back for more treatment in January.

"I remember sitting at my daughter's table and saying that this was probably the last Christmas I'll have, because I really didn't think I was going to recover," says Laster.

On January 8, 2018, Laster was back at CHI St. Vincent Heart Institute and ended up going through six operations in the span of a week, including the implantation of an LVAD. He spent the next three months in rehab and by the first week of May he was healthy enough to return home to his family.

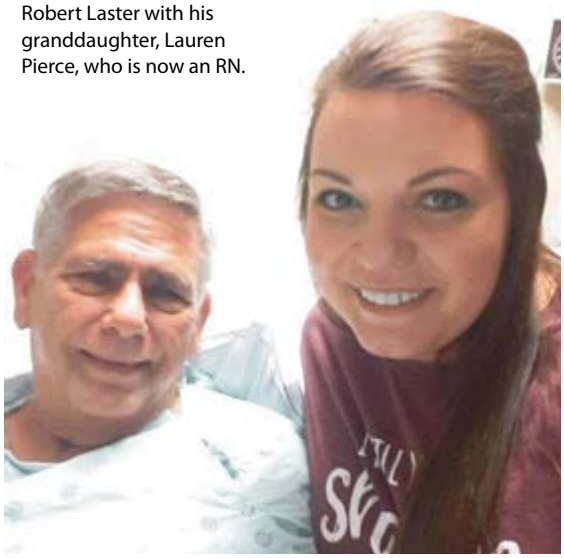
"I am continually amazed by the courage and fortitude that our patients and their families demonstrate on a regular basis," says Dr. Bauer. "When we deliver a patient through their LVAD recovery and we see them return to the things in their life that matter most to them, it provides us with a sense of purpose and unparalleled joy and satisfaction. Dr. Waqas and I are 'all-in' for our patients."

FRESH BEGINNINGS

Recovering from open heart surgery is not easy, and nobody knows that more than Troy Roberts and Robert Laster. For both men, the most important part of getting a second chance at life was what it allows them to do.

"Part of my bucket list has always been seeing my granddaughter graduate from nursing school," says Laster. "She'll come down and change my dressing for me and lay out my medicine—which she doesn't have to do—and we were talking and she teared up and said how much this graduation means to her now that she's going to be able to look out there and see me when she receives her diploma." Similarly, after Troy Roberts gets back to full strength after his heart transplant, he intends to spend more time with his grandchildren, in particular going hunting, and also in his community. Coaching youth baseball is a passion of his and he is looking forward to getting back out on the field.

"I've got one grandson that hasn't yet killed a deer," he says. "And I'd like to help my other two grandsons learn how to play baseball. Of course, I haven't met a coach that's as smart as me yet." ♥

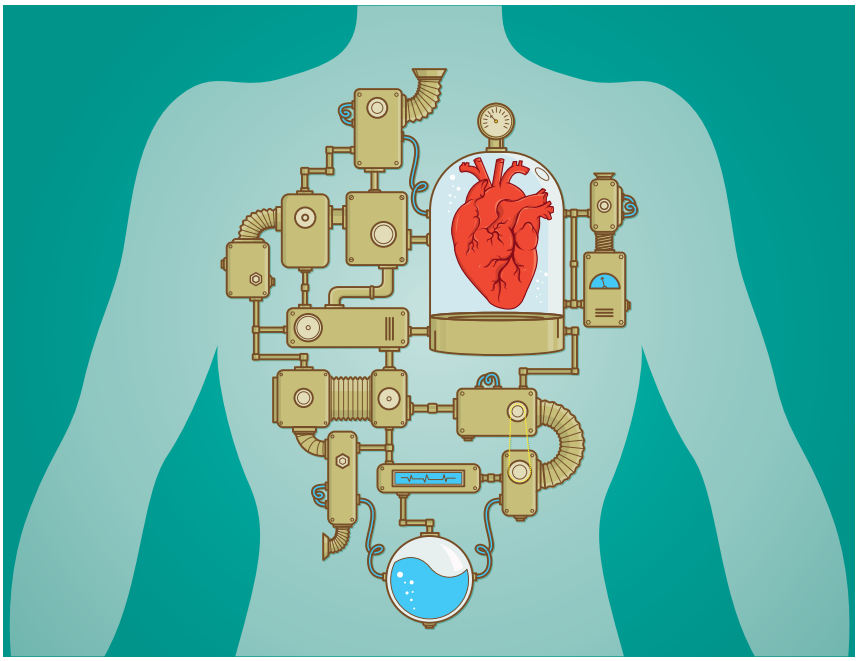


Robert Laster with his granddaughter, Lauren Pierce, who is now an RN.

Troy Roberts with his granddaughters, Sydney and Taylor.

THE RIGHT DEVICE

Therapeutic devices enhance heart function



When your heart needs a little extra help, CHI St. Vincent Heart Institute offers the most advanced therapies and devices available. Some of the most important treatments include heart pumps, which help your heart move blood throughout your body, and valve repair and replacement.

HEART PUMPS

Left Ventricular Assist Devices (LVAD) are used for patients with heart failure. These devices sustain a weakened heart by helping it pump oxygen-rich blood throughout the body. This allows the heart to rest, heal and grow stronger. An LVAD also enables patients to recover more quickly from a massive heart attack and significant heart muscle damage. CHI St. Vincent Infirmary is recognized as a Joint Commission Certified Center of Excellence for its LVAD program. Learn more about patients' experiences with LVADs in "A Bridge to Life" on page 4.

Extracorporeal Membrane Oxygenation (ECMO)

Extracorporeal Membrane Oxygenation (ECMO) is a mechanical device that supports the heart or lung function temporarily. This therapy supports patients in cardiac and respiratory failure. ECMO is used during life-threatening conditions such as severe lung damage from infection, or shock after a massive heart attack. Typically, people are supported by an ECMO machine for only a few hours to days, but may require it for a few weeks, depending on how their condition progresses.

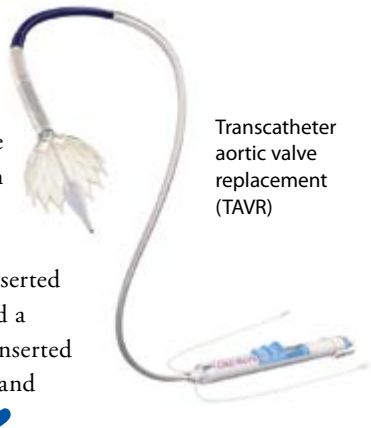
The **Impella® heart pump** is the world's smallest heart pump. This device is inserted into the heart using minimally invasive surgery. It provides temporary support for patients who have heart failure or are in cardiogenic shock as the result of a heart attack. CHI St. Vincent has implanted more heart pumps than any hospital in the state of Arkansas.

Impella® heart pump

VALVE REPAIR AND REPLACEMENT

Each of the four valves of your heart play an important role in delivering blood, oxygen and nutrients to your body. Properly working valves open and close all the way to regulate blood flow. If the valve is not working properly, it may be replaced or repaired. At CHI St. Vincent, many of these surgeries are done using minimally invasive surgery, where only a small incision is required.

Transcatheter aortic valve replacement (TAVR) is a less invasive procedure we offer for patients with severe heart valve disease of the aortic valve. A catheter is inserted in the leg or chest and a replacement valve is inserted through the catheter and guided to the heart. ♥



Transcatheter aortic valve replacement (TAVR)

A SURGICAL SOLUTION

Our specialists explain what you need to know about heart surgery

How do you determine if surgery is right for a patient with a heart condition?

Before we recommend heart surgery, we make sure that all other alternatives, such as medications, lifestyle changes and other therapies have been considered. There is always some risk with surgery and this varies by patient. However, with the advancement in heart surgery techniques, options have increased, especially for minimally invasive surgery, and the risks are much lower.

When surgery is an option, what are some of the considerations you discuss with patients?

If surgery is the best option for the patient, we always inform them of the risks associated with the procedure. No surgery is risk-free, so both our medical team and the patient need to be as transparent as possible when discussing the procedure. We always make sure the patient knows what to expect from the moment they arrive. We talk to the patient and family to make sure they understand the procedure, how to prepare, what the recovery will be like and any follow-up that is needed.

QUESTIONS BEFORE SURGERY

It's important for patients to be engaged in their own personal well-being, as well as know what doctors may have planned. Before choosing a surgeon and undergoing a heart procedure, here are some questions you'll want to ask:

> Why do I need this operation?
> How will the operation be performed?
> Are there other treatment options, and is this surgery preferred?
> What are the benefits, risks and possible complications for this procedure?
> What are my anesthesia options?
> What can I expect for my recovery in terms of treatment, medication, diet and home care?
> What is your (the surgeon's) experience with doing this procedure?
> What are the payment options and how much will it cost me?

OUR HEART SURGEONS

Michael Bauer, MD

Thurston Bauer, MD

Joe Howe, MD

Frederick Meadors, MD

Thomas Rayburn, MD

Charles J. Watkins, MD

"We always make sure the patient knows what to expect from the moment they arrive."
— Michael Bauer, MD

How important is follow-up care after surgery to a healthy recovery?

Follow-up care is extremely important for any surgical procedure, especially cardiac surgery. Usually the first 48 hours following surgery are the most difficult, and it generally takes one to three months for a patient to fully recuperate from the procedure. We try to stress that patients shouldn't get down on themselves for not being back up to full speed right away. Healing properly takes time. Sometimes the best thing you can do to help yourself heal is to take it slow and steadily increase your workload each day post-surgery, in order to help regain strength and energy.

How does recovering from a heart procedure differ from other types of surgery?

Once you have a heart procedure, it's important to remember to refrain from or increase certain activities, as to not cause further damage or complications involving your heart and to help it heal. Things you may want to remember, include:

- Refraining from smoking and having minimal exposure to second-hand smoke
- Controlling your blood pressure, sometimes through medication
- Trying to reduce fat and cholesterol in your diet
- Making an effort to exercise regularly
- Decreasing stress
- Managing your weight
- Being in control of your blood sugar and diabetes (if you have it)

What advice do you give to patients about pain management after surgery?

You don't want to ignore pain and each person has a different threshold for pain. It is important to have a discussion with your doctor about how much pain to expect, how intense it might be and how long it will last or when it should taper off. Any medications should be carefully adjusted so that just the right amount of pain medication is used. ♥

COMMON MISCONCEPTIONS ABOUT HEART SURGERY

Many patients go into a heart surgery procedure with ideas about how everything works. Whether it's media like television or film, the internet, or anecdotal commentary from friends or relatives, there is a lot of information out there and not all of it is accurate. Here are some common misconceptions people have about the surgical process:

"Angioplasty and stenting or bypass surgery 'fix' your heart."

While these procedures definitely help with relieving chest pain and improving the quality of your life, they don't stop the underlying disease—atherosclerosis. Without actually addressing the issues associated with this disease, arteries will continue to clog and become blocked, which may lead to heart attack or stroke. It's important to correct the behavior or habits that caused the blockage originally.

"I may wake up or feel pain during my procedure due to the anesthesia wearing off."

Most people think the anesthesiologist leaves the room after administering the anesthesia, but that is actually not the case. There is no true way to measure "how much" anesthesia any one person actually needs, so the anesthesiologist is present throughout the surgery in order to monitor a patient's vital signs and provide more medicine if necessary.

"I won't be able to return to an active lifestyle after surgery."

Many patients feel much better than they expect to after surgery. The condition that necessitates the surgery can be very limiting, and even debilitating. After surgery, patients generally feel better and can get back to activities they couldn't do before.

IMPROVE YOUR KITCHEN

Make healthier meals with these kitchen gadgets

When you make your own meals, you can control what goes into them. Try these cooking devices to help make cooking healthy food easier:

INSTANT POT

Available from several manufacturers, an Instant Pot is a multipurpose cooker, perfect for a variety of healthy recipes. It does the job of a slow cooker, electric pressure cooker, rice cooker, steamer, yogurt maker, sauté/browning pan and warming pot. The other key feature of this all-in-one pot is that it can cook meals in a fraction of the time, up to 70 percent faster.

FOOD DEHYDRATOR

Not your everyday kitchen appliance, a dehydrator is perfect for preparing healthy on-the-go meals and snacks in advance. The dehydrator's low heat removes the water from the food but preserves the all the nutrients. Dehydrate fruits, vegetables, nuts, meat for jerky (with less salt than jerky you can buy at the store), fruit purée for fruit snacks and even raise bread.

AIR FRYER

Love fried food? An air fryer makes it possible to prepare healthier versions of your favorite fried fare without sacrificing taste and texture. Rapid air-circulating technology is key because it replaces the large amount of oil usually used in frying. Plus, you can also use it to bake, roast and grill meals and snacks.

SEASONED COOK TIPS

For added heat and flavor use chipotle or ancho chili powder instead of chili powder. This dish freezes well.

SLOW COOKER CHOCOLATE CHILI

Cocoa and cinnamon add a depth of flavor to chili that's impossible to deny. Even better, it takes little to no effort on your part. Simply place all the ingredients together in your slow cooker in the morning and come home to a scrumptious, nutritious dinner. Makes 10 servings.

NUTRITION
(Per serving)
225 calories
14g protein
36g carbohydrate
12g fiber
3g fat (2g sat, 1g mono/poly)
415 mg sodium

INGREDIENTS

- 1 large onion, diced
- 2 yellow or red peppers, diced
- 6 garlic cloves, minced
- 1 Tbsp chili powder
- 2 tsp cumin
- 1 Tbsp unsweetened cocoa powder
- 1½ tsp cinnamon
- ½ tsp salt
- ¼ tsp black pepper
- 1 28-ounce can low-sodium fire-roasted crushed tomatoes
- 2 15-ounce cans low-sodium black beans, rinsed
- 2 15-ounce cans low-sodium kidney beans, rinsed
- 1 medium sweet potato, peeled and cut into ½-inch pieces
- 1 cup water

METHOD

1. In a slow cooker, combine all ingredients.
2. Cover and cook on low for 7 to 8 hours, or for 4 to 5 hours on high.
3. Ladle into bowls, garnish and serve.

Find more delicious recipes and healthy eating tips in our *Healthy Foodie* recipe guidebook. Get your copy at **chistvincent.com/betteryou**.

COMMITMENT TO EXCELLENCE

CHI St. Vincent recognized for cardiac rehab and chest pain services

The CHI St. Vincent Hot Springs cardiac rehab program and the CHI St. Vincent Infirmary Chest Pain Center recently received recognition for their quality of services and dedication to improving patients' experience.

CHI St. Vincent Hot Springs was awarded the 2018 American Association of Cardiovascular and Pulmonary Rehabilitation (AACVPR) Program Certification. Hot Springs, which is the only program certified in its region, was recognized for its commitment to improving quality of life by enhancing standards of care. Our cardiovascular and pulmonary rehabilitation programs are designed to help people with cardiovascular and pulmonary problems recover faster and improve their quality of life. Both programs include exercise, education, counseling and support for patients and their families.

In addition, the Infirmary has been awarded accreditation from the American College of Cardiology for Chest Pain Center with Primary Percutaneous Coronary Intervention (PCI) services. This designation recognizes the Infirmary's commitment to having Primary PCI services available every day of the year, as well as a call team of cardiac catheterization (cath) lab staff and an interventional cardiologist who can arrive at the facility within 30-minutes.

"At CHI St. Vincent, we constantly work to raise the bar of service for our patients and are honored that the American College of Cardiology has recognized that higher level of expertise and service we provide when someone comes to us with symptoms of a heart attack," said Marcia Atkinson, President of the Heart Institute. "From guidance on better lifestyle choices for a healthy heart, to timely diagnosis and intervention, our team of cardiologists and cardiac surgeons provide the best chance possible for a healthy heart."

AHEAD OF THE PACE

CHI St. Vincent Heart Institute cardiologists implant smallest pacemaker

Doctors at CHI St. Vincent were the first in Arkansas to offer patients the Micra® Transcatheter Pacing System (TPS). The TPS, a new type of pacemaker, helps patients with bradycardia, a condition characterized by a slow or irregular heart rhythm—usually fewer than 60 beats per minute. At this rate, the heart is unable to pump enough oxygen-rich blood to the body during normal activity or exercise, causing dizziness, fatigue, shortness of breath or fainting spells.

Comparable in size to a large vitamin, this new pacemaker is unlike traditional pacemakers. The device does not require cardiac wires (leads) or a surgical "pocket" under the skin to deliver a pacing therapy. Instead, the device is small enough to be implanted using a catheter, providing a safe alternative to conventional pacemakers without the complications associated with leads—all while being cosmetically invisible.

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More Heart Specialists
More Heart Clinics

HEART CLINICS

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10100 Kanis Rd.
Little Rock, AR 72205
501.255.6000

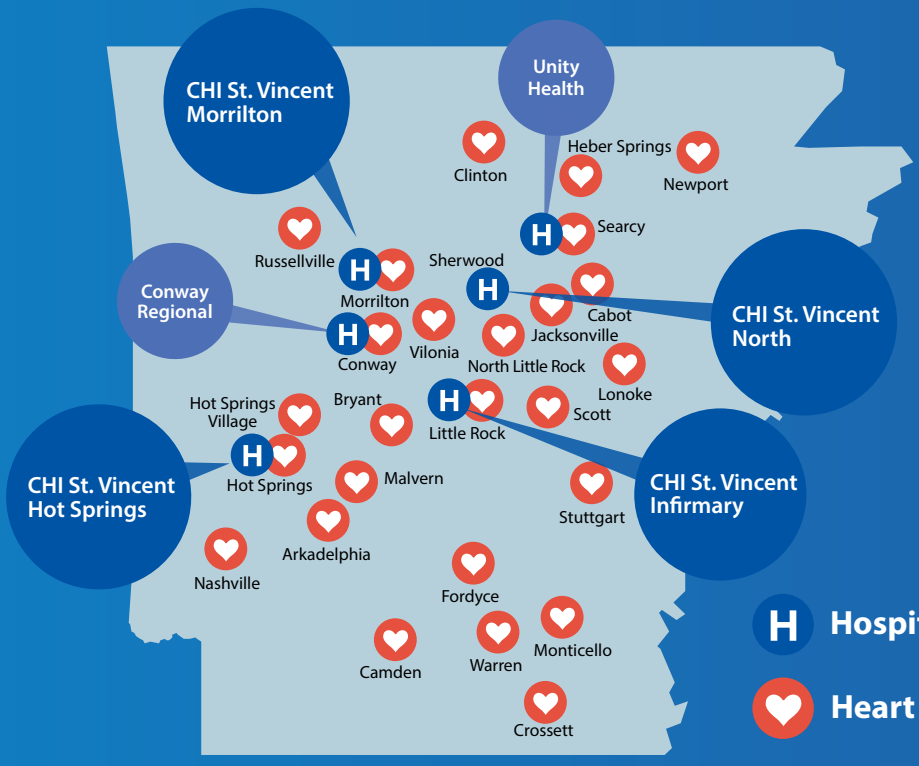
Little Rock - University
415 N. University Ave.
Little Rock, AR 72205
501.664.6841

North Little Rock
4000 Richards Rd., Suite A
North Little Rock, AR 72117
501.758.5133

Hot Springs
200 Heartcenter Ln.
Hot Springs, AR 71913
501.625.8400

Conway
525 Western Ave., Suite 202
Conway, AR 72034
501.513.5337

Searcy
711 Santa Fe Dr.
Searcy, AR 72143
501.279.9393



COMMUNITY HEART CLINICS

- Arkadelphia
- Bryant
- Cabot
- Camden
- Clinton
- Crossett
- Fordyce
- Heber Springs
- Hot Springs Village
- Jacksonville
- Little Rock
- Lonoke
- Malvern
- Monticello
- Morrilton
- Nashville
- Newport
- Russellville
- Scott
- Stuttgart
- Warren

CHI St. Vincent
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Find more at **chistvincent.com/heart**