

February 2018
Heart Month!



WHAT'S COMING UP?

- Strong heart into middle age
- Cholesterol 101
- Foods for heart health
- How to break an unhealthy habit
- New high blood pressure guidelines
- Healthy yet TASTY Super Bowl recipes

NJWELL

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<http://www.state.nj.us/treasury/pensions/njwell/pdf/njwell-year5.pdf>

Wellness Corner Connection

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Increase Cardiac Fitness Even In Middle Age

Here we are, one month gone in this new year. Of those of you who attempted another New Year Resolution, how many are still on track? If you responded "not me", you are not alone! Research has shown that nearly half of all resolutions fad by the end of January. And as the year progresses, the likelihood of jumping back on that "attempt wagon" seems unlikely. Beginning a new exercise habit can seem especially dire for midlife adults.

With February being Heart Health Month, I thought it might rekindle your motivation to know that new studies show even in middle age, you can increase your heart fitness to a point where one's mortality rate is lowered by up to forty percent! Even better news...it's easier than you think.

Results from an exercise study lasting two years (typically these studies last three to four months) was recently published in the journal of the American Heart Association. Individuals making up the exercise group had an average age of 53 when they started working out after years of sedentary living. At the conclusion of this study, their aerobic fitness increased by 18 percent. Their cardiac compliance, or elasticity, improved 25 percent. The improvement in elasticity is most noteworthy...Why? The term "compliance" describes how easily the chamber of the heart expands and contracts when it is filled with blood. Loss of compliance (i.e. elasticity) is a major cause of heart failure, resulting in many hospitalizations and death in the over-65 population. Therefore, this increase, due to exercise, is significant in lowering one's mortality rate because increased cardiac elasticity means the heart fills more easily and pumps more blood efficiently...thus positively contributing to one's blood pressure rate.

The "control" group participated in yoga, balance exercises or strength training three times a week for the two years, much more than most inactive adults. However, their aerobic fitness declined by 3% and their cardiac compliance did not change.

Past studies have shown where older athletes have roughly the same degree of compliance as young adults but improving the compliance of adults over 65 was not achieved. Dr. Paul Thompson, a cardiologist out of Hartford Hospital in Connecticut, now believes he has found the "sweet spot" in time when adults can still enhance their heart function: *from ages 45 to 64*. He has demonstrated that if one can incorporate regular daily exercise no later than middle age, youthfulness and vitality of the heart muscle can be achieved.

So what was the exercise program followed?

- The subjects began with low-intensity "base-training" workouts three times a week for 30 minutes each
- After four weeks they began using a bit more effort
- Interval training was then added plus one longer workout (60 minutes) done once a week
- They progressed to 180 minutes a week, 30 minutes more than the minimum standard of 150 minutes recommended by many fitness guidelines.

This may seem way too intense for many busy adults. But surprisingly 88 percent of the subjects completed the assigned workouts, with nearly a quarter hit 97 percent! Making exercise part of your personal hygiene, like brushing your teeth, is key but certainly challenging. So try to do one fun activity for at least an hour on the weekend and one hard activity for 30 minutes after your second cup of coffee another day, recommends Dr. Thompson. Then, exercise for 30 minutes another two or three days, while you are watching TV. Doable? Give it a try, start slowly, write down what your goals for the week, and do your best to reach it.

JUST WALK!



Although 65 may be the upper limit for changes to heart function, consistent exercise offers additional health payoffs to older adults. Another study published in the American Journal of Preventive Medicine investigated the walking habits of over 130,000 Americans who were nearly 71 years of age when monitoring began. After 13 years, those who had little to no weekly walking had died at a rate of 26 percent higher than those who walked regularly, but for less than two hours a week. Those who walked two to six hours a week had a mortality rate 36 percent lower than the under-two-hour walking group! So what if you could take a pill that would increase your strength, balance, and endurance while reducing your risk of heart disease, diabetes, hypertension, Alzheimer's and many cancers, would you take it? Exercising even a little bit can be your pill...taking the first step is up to you!

As seen in The Washington Post review of proven studies by: American Heart Association, Mayo Clinic and American Cancer Society

Cholesterol 101

What is it?

Your liver normally produces all the cholesterol your body needs to build new cells, insulate nerves and produce hormones. It is an essential need, however, if you consume a lot of animal-based foods such as milk, eggs, and meat, you may have more than your body needs putting you at risk for heart disease.

Two Forms of Cholesterol Most Familiar

Low-density lipoprotein (LDL or “bad” cholesterol): main source of artery-clogging plaque.

High-density lipoprotein (HDL or “good” cholesterol): actually works to clear cholesterol from the blood.

How Does it Cause Heart Disease?

Too much causes a build up in the walls of your arteries, known as atherosclerosis, which is a form of heart disease. Narrowing arteries cause slowing of blood flow to the heart and could even be blocked all together. If not enough oxygen and blood get to the heart, you may experience chest pain. If supply to a portion of the heart is cut off by a blockage, the result is a heart attack.

Triglycerides are another fat in our bloodstream and research is now showing high levels may be linked to increased risk of heart disease.

Here's how to interpret your cholesterol numbers:

Total Cholesterol	Category
Less than 200	Desirable
200-239	Borderline High
240 and above	High

HDL Cholesterol*	HDL-Cholesterol Category
60 or more	Desirable—helps to lower risk of
Less than 40	Major risk factor— increases the

LDL Cholesterol	LDL-Cholesterol Category
Less than 100	Optimal
100-129	Near optimal/above optimal
130-159	Borderline high
160-189	High
190 and above	Very high

Triglycerides	Category
Less than 150	Normal (desirable)
150-199	Borderline high
200-499	High
500+	Very high

Quick look at what affects cholesterol levels:

Diet—saturated fat, trans fat, carbohydrates and food cholesterol increase levels. Increase amount of fiber and plant-derived sterols can also help lower LDL's.

Weight—losing weight can lower LDL, total cholesterol and triglyceride levels as well as raise HDL's.

Exercise—staying active (30 minutes/day) can lower LDL and raise HDL

Age and Gender— Before menopause, women tend to have lower total cholesterol than men the same age. Afterwards, however, women's LDL levels tend to rise. As we age, we all may experience some elevation in our levels.

Heredity—genes partly determine how much our body makes.

Medical conditions—Sometimes medical conditions such as hypothyroidism (an underactive thyroid gland), liver disease and kidney disease.

Medications—Steroids and progestins may increase “bad” cholesterol and decrease the “good” cholesterol. Ask your doctor if you have concerns.

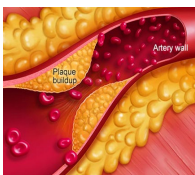
Doctors determine your “goals” for lowering your LDL based on the number of risk factors you have for heart disease. Major risk factors include the following:

- Age—men 45 years and older; women 55 years and older
- Cigarette smoking
- High blood pressure
- An HDL less than 40 mg/dl
- Family history of premature heart disease in a first-degree male relative (father or brother) less than age 55 and first-degree female relative less than age 65.

0-1 risk factor—low to moderate risk of heart disease. Generally lifestyle changes are effective in keeping the cholesterol in check.

2 or more—moderate risk. Your doctor may recommend lifestyle changes but most people require cholesterol-lowering drugs.

If you have known heart disease, diabetes or multiple risk factors, you are at high risk. Most people will require a combination of cholesterol-lowering drugs and lifestyle changes to control their cholesterol levels. Consult your doctor with any questions. Take your health to heart! You deserve to take care of you!



Over time, cholesterol and a fatty material called plaque can build up on the walls inside blood vessels that take blood to your heart, called arteries. This makes it harder for blood to flow freely. Most heart attacks happen when a piece of this plaque breaks off. A blood clot forms around the broken-off plaque, and it blocks the artery.

Food That Can Save Your Heart



Mild, tender **black beans** are packed with heart-healthy nutrients. Folate, antioxidants, and magnesium can help lower blood pressure. Their fiber helps control both cholesterol and blood sugar levels. Add beans to boost soups and salads.



If you drink alcohol, a little **red wine** may be a heart-healthy choice. Resveratrol and catechins, two antioxidants in red wine, may protect artery walls. Alcohol can also boost HDL, the good cholesterol.

Tip: Too much alcohol hurts the heart. Don't have more than one drink a day for women or two drinks for men. It's best to talk to your doctor first. Alcohol may cause problems for people taking aspirin and other medications.



Salmon: A top food for heart health, it's rich in omega-3s. Omega-3s are healthy fats that may lessen the risk of heart rhythm disorders and lower blood pressure. They may also lower triglycerides and curb inflammation. The American Heart Association recommends two servings of salmon or other oily fish a week.

Cooking Tip: Bake salmon in foil with herbs and veggies. Toss extra cooked salmon in fish tacos and salads.



This oil is a healthy fat made from smashed olives. It's rich in heart-healthy antioxidants. They may protect your blood vessels. When **olive oil** replaces saturated fat (like butter), it can help lower cholesterol levels. Try it on salads and cooked veggies, or with bread. **Taste tip:** For the best flavor, look for cold-pressed and use it within 6 months.

A small handful (1oz.) of **walnuts** a day may lower your cholesterol. It may also protect against inflammation in your heart's arteries. Walnuts are packed with omega-3s, healthy fats called monounsaturated fats, plant sterols, and fiber. The benefits come when walnuts replace bad fats, like those in chips and cookies. **Tip:** Try walnut oil in salad dressings.



For more heart healthy food ideas visit WebMD.com

Often cheaper than salmon, **tuna** also has omega-3s. Albacore (white tuna) has more omega-3s than other tuna varieties. Try grilling tuna steak with dill and lemon. Reel in these other sources of omega-3s, too: mackerel, herring, lake trout, sardines, and anchovies.

Health Tip: Choose tuna packed in water, not oil, to keep it heart-healthy.



Slivered almonds go well with vegetables, fish, chicken, and desserts. They have plant sterols, fiber, and heart-healthy fats. Almonds may help lower "bad" LDL cholesterol. Grab a small handful a day.

Taste Tip: Toast them to boost their creamy, mild flavor.



Changing Old Habits

I'm sure you have all decided, at one point or another, to change an old habit of your behavior that has been with you for a very long time. You have motivated it takes and you vow to stop this behavior from ever occurring again. But before long you are disappointed at its resurfacing and feel frustrated at your own "lack of will power". But change is not an event or a decision...it's a process. Habits were not formed over night. They probably have been with you since you were a child. So do not expect them to go away without a fight. Consider these quick tips when you are thinking of making a change:

1. **Practice patience.** Research tells us it takes as many as 180 days to truly drop an old habit (you may have heard "21 days" which is a good start). Stay on it!
2. **Don't beat yourself up!** Show yourself some compassion and keep going. It's not easy!
3. **Celebrate catching yourself!** If the habit shows up again, instead of staying "There I go again" celebrate the fact that you managed to catch it and become aware of it. As you catch yourself earlier, you will have even more to celebrate.
4. **Use structures,** a picture or figurine, something that when you look at it you are reminded of your new habit
5. **Involves others** in your goal and maybe get a coach to help you!

Ambivalence: Wanting to change but wanting to stay the same. All of us at some point in our lives have battled this conflict in our minds. You want to quit smoking because you know it is bad for your health, but you don't want to quit because you enjoy it. Also you know it's difficult to quit and this impedes your efforts to even try. You want to lose weight but you don't want to have any restrictions on what you want to eat. Sound familiar? This internal "quarrel" may be what is keeping you from changing or preventing progress. Don't be hard on yourself. Realize it's a natural part of the human condition. This is where your SMART goals, addressed last month, come into play. What do you want? If you are leaning more towards keeping your old habit, think about what has to change in your environment, your social network, your internal dialogue FIRST that will set you up for success. When you are ready you will know it and you will do all it takes to get there. Only you know when that time has come. Be ready for it...be open to it...be mindful of it...I'm here to help.

Resource: Simons-Morton, B. (2012). Behavior Theory in Health Promotion.



New Blood Pressure Numbers

What is considered “high blood pressure” just got the bar set lower. This means that millions more Americans will be classified as having hypertension, according to these new guidelines set by several leading heart doctors.

The guidelines, from the American Heart Association (AHA) and the American College of Cardiology (ACC), now define high blood pressure as **130 mm Hg or higher for the systolic blood pressure measurement, or 80 mm Hg or higher for the diastolic blood pressure measurement.** (Systolic is the top number, and diastolic is the bottom number, in a blood pressure reading.) Previously, high blood pressure was set at a reading of 140 mm Hg or higher for the systolic measurement and 90 or higher for the diastolic measurement.

With this change, an additional 14 percent of U.S. adults, or about 30 million people, will now be diagnosed as having high blood pressure (46% of the adult population compared to 32% under the previous guidelines).

Good news though—most of the newly classified patients will only be recommended lifestyle changes as treatment, not medication. Maybe a small percentage (2%) may need blood pressure meds.

Lower is Better! Researchers know that people who have blood pressure between 130-139/80-89 mm Hg have double the risk of cardiovascular complications, compared to those with normal blood pressure.

If you have not gotten your blood pressure checked recently, it is highly recommended that you see your doctor. If you frequent a store or pharmacy that offers the blood pressure machine, check it out yourself and if you are seeing a number consistently in this range, please see your doctor for a treatment plan that fits you. Remember high blood pressure is the silent killer...the only “warning” you may get is a heart attack or stroke!

The new guidelines are based on a rigorous review of nearly 1,000 studies on the subject, which took the authors three years to complete. The new guidelines now classify people's blood pressure measurements into the following categories:

Blood Pressure Categories



BLOOD PRESSURE CATEGORY	SYSTOLIC mm Hg (upper number)		DIASTOLIC mm Hg (lower number)
NORMAL	LESS THAN 120	and	LESS THAN 80
ELEVATED	120 – 129	and	LESS THAN 80
HIGH BLOOD PRESSURE (HYPERTENSION) STAGE 1	130 – 139	or	80 – 89
HIGH BLOOD PRESSURE (HYPERTENSION) STAGE 2	140 OR HIGHER	or	90 OR HIGHER
HYPERTENSIVE CRISIS (consult your doctor immediately)	HIGHER THAN 180	and/or	HIGHER THAN 120

Ways to Lower Your Blood Pressure without Medication:

Isometric Exercises: Cardio is still a gold standard for overall heart health but some isometric strength training such as planks helps too. Australian researchers found that participants' systolic BP dropped 7 mmHg after doing isometric holds on a handgrip device 3 days a week for 8 weeks. It seems these exercises temporarily compress blood vessels, and then, when relax, the body compensates by increasing the blood flow and encouraging your blood vessels to widen—with lasting changes over time. Always check with your doctor first to make sure your routine is safe for your heart.

Meditation: may help reduce both systolic and diastolic BP—by 3.8 mmHg and 2.2mmHg, respectively. Stress impairs the body's natural ability to reduce inflammation, which worsens hypertension. Just start off by taking a few minutes to close your eyes and focus on your breath.

Skip sugary beverages: cutting daily sugary beverage from 2 1/4 to 1 can of soda can reduce BP up to 9.5mmHg according to research published in the journal Circulation. This is not just due to dropping weight from cutting back; it seems to reduce the body's production of “urate”, a waste product of digestion, which has



Slow-Cooker Buffalo Chicken Dip

This healthy copycat recipe for classic Buffalo dip cooks in your slow cooker for an easy, hands-off appetizer you can keep warm for the whole game, party or any casual gathering. Serve with carrot sticks, celery sticks and tortilla chips for dipping.

Recipe Corner

Ingredients:

- 1 cup low-sodium chicken broth
- 1 large onion, chopped
- 1 large jalapeño pepper, finely chopped
- 1 pound boneless, skinless chicken breasts, trimmed
- 8 ounces reduced-fat cream cheese
- ¼ cup crumbled blue cheese, plus more for garnish
- 3 tablespoons hot sauce, preferably Frank's RedHot
- Sliced scallions for garnish



Directions:

1. Combine broth, onion and jalapeño in a 4- to 5-quart slow cooker. Place chicken on top. Cover and cook on High for 2½ hours. Transfer the chicken to a plate and shred with 2 forks. Cover to keep warm.
2. Drain the liquid from the slow cooker. Whisk cream cheese, ¼ cup blue cheese and hot sauce into the slow cooker. Cover and cook until hot, about 20 minutes. Stir the chicken into the cream cheese mixture. Top with scallions and more blue cheese, if desired.

Nutritional Value:

Serving size: ¼ cup each

Per serving: 86 calories; 5 g fat(2 g sat); 0 g fiber; 2 g carbohydrates; 9 g protein; 7 mcg folate; 33mg cholesterol; 1 g sugars; 0 g added sugars; 213 IU vitamin A; 2 mg vitamin C; 32 mg calcium; 0 mg iron; 184 mg sodium; 156 mg potassium. Carbohydrate Servings: 0
Exchanges: 1 fat, 1 lean protein

or

Sriracha-Buffero Cauliflower Bites

Looking for something meatless? How about Buffalo Cauliflower Bites? This healthy recipe for Buffalo cauliflower bites is a great vegetarian and gluten-free alternative to Buffalo wings. Roasted cauliflower is tossed with a spicy sriracha Buffalo sauce for an easy crowd-pleasing appetizer or healthy snack.

Ingredients:

- 8 cups 1½-inch cauliflower florets
- 2 tablespoons extra-virgin olive oil
- ¼ teaspoon kosher salt
- 2 tablespoons hot sauce, such as Frank's RedHot
- 1-2 tablespoons Sriracha sauce
- 1 tablespoon butter, melted
- 1 tablespoon lemon juice

Directions:

1. Preheat oven to 450°F. Coat a large rimmed baking sheet with cooking spray.
2. Toss cauliflower, oil and salt in a large bowl. Spread on the prepared baking sheet; reserve the bowl. Roast the cauliflower until it's starting to soften and brown on the bottom, about 15 minutes.
3. Meanwhile, combine hot sauce, sriracha to taste, butter and lemon juice in the large bowl. Add the roasted cauliflower and toss to coat. Return the cauliflower to the baking sheet and continue roasting until hot, about 5 minutes more.

Nutrition Information:

- Serving size: ¾ cup
- Per serving: 99 calories; 7 g fat(2 g sat); 3 g fiber; 8 g carbohydrates; 3 g protein; 0 mcg folate; 5mg cholesterol; 3 g sugars; 0 g added sugars; 169 IU vitamin A; 70 mg vitamin C; 33 mg calcium; 1 mg iron; 288 mg sodium; 439 mg potassium
- Nutrition Bonus: Vitamin C (117% daily value)
- Carbohydrate Servings: ½
- Exchanges: 1½ vegetable, 1½ fat



Recipes taken from EatingWell.com

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Smile, it's the key that fits the lock of everyone's heart!

