

Small Steps to Heart Health

By Ron Winslow

Do you sometimes think you can't be heart-healthy unless you're a vegetarian marathon runner with minimal body fat, barely detectable cholesterol and a pact to avoid ice cream that is signed in blood?

Well, think again. There's mounting evidence and support among cardiologists that moderation in the battle against heart disease can often achieve results that are at least as good as aggressive tactics.

Consider the testimony of Stephen Kopecky, a cardiologist at Mayo Clinic in Rochester, Minn. He likes to talk about a 49-year-old man who decided it was finally time to take his risk

for heart disease seriously. The patient weighed 240 pounds and in almost every way you could measure his cholesterol, it was in the danger zone, Dr. Kopecky recalls. He may not have been a heart attack waiting to happen, but that was the direction he was headed.

The patient began eating healthier foods and made a point to get about 30 minutes of exercise a day, or 200 minutes a week. After 10 weeks, he'd lost 18 pounds—about 7.5% of his body weight.

What were the cardiovascular benefits? At the end of the 10 weeks, without the help of any heart drugs, a blood test showed that all of the patient's cholesterol levels came in near or below recommended targets, Dr. Kopecky says. His LDL, or bad

cholesterol, for instance, fell 21% while his HDL, or good cholesterol, rose 24%.

The weight loss was relatively modest and the patient was still in the overweight category. Overall, however, his heart-attack risk fell substantially. In a little less than three months, the patient showed "that we can all help ourselves tremendously taking small steps and doing something that's achievable," Dr. Kopecky says.

Adds Christopher Cannon, a cardiologist at Harvard University-affiliated Brigham and Women's Hospital in Boston: "Going the moderation route is what we recommend to get real change for the heart patient."

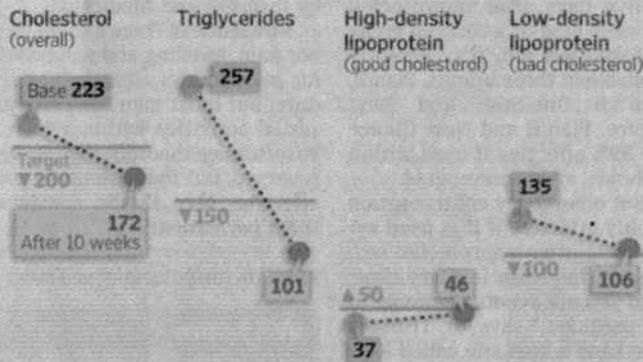
That theme was evident at the annual scientific meeting of the American College of Cardiology last month. In three separate reports on efforts to reduce heart attacks, heart-related death and other major events with more intensive drug treatment, the aggressive strategy failed in each case to show a benefit over a more modest strategy. There was some evidence the aggressive approach caused harm.

For instance, researchers expected that among patients with diabetes, aggressively lowering systolic blood pressure, the top number in a blood-pressure reading, to below 120 in one group of people would lead to better outcomes than getting the level under 140 in another patient group. They were wrong. A National Institutes of Health-funded study called Accord, in-

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Modest Moves, Meaningful Results

How moderate changes in diet and exercise over 10 weeks helped a 49-year-old man lower his heart risk.



Source: Mayo Clinic

Achieving Heart Health Through Small Steps

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volving 4,733 patients followed for nearly five years, revealed no meaningful difference in heart attacks, strokes or death from cardiovascular causes between the two groups. The results suggest there isn't much to be gained for patients who add the expense and potential side effects of another drug or two (to what is typically an already complex drug regimen) to achieve lower blood pressure.

A second part of the Accord study found that adding a drug called a fibrate to a cholesterol-lowering pill known as a statin reduced levels of potentially harmful blood fats called triglycerides by 25%. But it didn't have any impact on heart attacks and other major events. For most patients, the findings indicate, sticking to a statin alone seems to provide the same protection.

The third study, performed by researchers in the Netherlands, involved 614 patients with atrial fibrillation, a common heartbeat irregularity that heightens risk of stroke, among other problems. Controlling the heart rate, as measured at rest, is typically the preferred strategy to prevent serious cardiovascular problems. Medical guidelines, backed by limited data, have called for strict control, aimed at achieving a resting heart rate of 80 beats per minute. But the study found that achieving "lenient" control of fewer than 110 heart beats per minute was at least as effective in preventing death from cardiovascular causes, stroke and other life-threatening events.

Counting Heart Beats

Anti-arrhythmia drugs, commonly used to control heart rate, have potentially serious side effects, so "the concept that you can be comfortable with a higher resting heart rate is huge," says Ralph Brandis, a cardiologist and president of the American College of Cardiology, who wasn't involved with the study.

In all three studies, patients trying to reach aggressive targets typically had to take more or higher doses of drugs than were needed to achieve more modest goals. Researchers suggested that as a result benefits gained from more-aggressive

treatment may have been offset by side effects from the medicines.

Of course, doctors say, none of this reduces the importance of striving to achieve such bedrock prevention targets for blood pressure (120/80 or lower) and LDL cholesterol (below 130 for people at low risk; below 70 for many high-risk heart patients). Indeed, many cardiologists already urge patients to aim for LDL targets lower than current guidelines recommend. And it would be hard to find a doctor who believes there's an acceptable moderate level of smoking.

Aiming Lower

But the overall message of the reports was that patients appear to do just as well aiming for treatment goals that are easier to achieve, at potentially lower cost and with fewer side effects.

Which brings us back to Dr. Kopecky. The 49-year-old patient whom he describes is now 55, and he is Dr. Kopecky himself. He had been an interventional cardiologist at the Mayo Clinic and says he had performed about 2,000 angioplasty procedures to open up clogged arteries of people who were unable to fend off the disease. He decided to become a preventive cardiologist.

But to do that, he felt he needed to follow his own advice. "It's not an all-or-none phenomenon," he says. "But any little benefit is a continuous curve. You add benefit by doing multiple things."

Included in his prevention strategy: fish-oil pills—they lower risk of heart attack and sudden cardiac death, he says—and interval training during exercise. If you get your heart rate up at a higher level for a minute or two several times while you're on a treadmill, "your good cholesterol goes up more, your bad goes down more and you burn more calories than if your heart rate stays constant," he says.

Dr. Kopecky says he recommends to his patients to aim for weight loss of one and one half to two pounds a week.

Anything more aggressive, he says, and "you tend to gain it back."