



CARDIAC HEALTH

FOUNDATION OF CANADA

Cardiac Health Foundation Bulletin Spring Edition

PREVENTION, EDUCATION & CARDIOVASCULAR REHABILITATION

ISSUE 11

Welcome, our 11th edition! GTA Virtual Walk of Life 2020

Welcome to our 11th edition of the Bulletin! We are pleased to be able to comment on and invite you to our First Virtual Walk of Life in celebrating our 36th Anniversary. Within this newsletter, we will endeavour to let you know what we have been up to, including providing an overview of the Virtual Walk of Life scheduled for June 27th, 2020; news and happenings Nationally; our Cardiac Corner with Dr. Shane Marshall; two Book Reviews and three Heart Healthy Recipes. This newsletter will be distributed electronically, on our website, and through provision of limited hard copies during health fairs and seminars on cardiovascular disease and prevention. We encourage you to share your copies, and to let us know of friends and family members who might want a copy. You can arrange this by sending an email to cmellos@cardiachealth.ca

36th Anniversary GTA Virtual Walk of Life

Within this section we will bring you news on how to register, and how to make this a fun day event within your neighbourhood and your home. Obviously the COVID-19 pandemic means that for the first time in our history, we are committing ourselves to a **virtual** Walk of Life. By exercising this option, we will honour physical and social distance requirements in keeping everyone safe. We hope that you, your friends, work colleagues and neighbours will join us virtually. This virtual Walk of Life event means you can choose to walk within your

home, on your treadmill, within your neighbourhood, or your local park with your family while choosing the 1, 3 or 5km Walk or the 5km Run. If this is difficult in getting private space, you can also choose to exercise for thirty minutes. As inspiration, you could utilize retired British Army Captain Tom Moore, as a super example who walked within his backyard garden and raised over \$50 million dollars for the National Health Service! Captain Moore is the epitome of someone who sought to make a difference.



This year especially, Cardiac Rehabilitation Programs desperately need our grants. All cardiovascular prevention and rehabilitation programs closed across Canada to protect their patients, caregivers, and friends during the outbreak of Covid 19. While exceptionally large programs have maintained an online presence, many small programs laid off staff and severely restricted or cut off communications

with their patients, caregivers, and friends. Many of these programs will struggle to reopen again, our goal this year is to raise \$250,000 in helping these programs.

Ok, I want to participate how do I register?

As with previous years go to our website, www.cardiachealth.ca and if you have never registered before, begin the registration process. The instructions are clear, it will ask you to agree to the waiver and then to complete the registration process. If you have registered before, go to log-in and fill in your username and password. If you have forgotten your password it will prompt you and then send an email instructing you to create a new password.



Editor: John Sawdon
Digital Design & Layout: Christina Mellos

Ok, how much does this cost to participate?

For **Individuals** the cost is **\$20.00**. For **Families** of 4 or more the cost is **\$75.00**

For all individuals who register will receive the following: a T-Shirt (must register by June 18th to allow enough time for t-shirt to be mailed to you), a warm up video that will be sent electronically, Live Video of kick-off event with Dr. Paul Oh highlighting the importance of exercise in fighting heart disease, A Certificate of Participation, and a chance to win a set of Urban Poles.

After you register, you will receive the agenda and video link, however, on June 27th 2020, the event will kick off with Host Dr. Paul Oh. Between 10:00 am and 10:30 am we will hear about heart healthy tips and engage in warm-up and exercise demonstrations presented by the Toronto Rehab team. This will lead to the 10:30 am kick off.



Ok, I want to raise money as a family or team, what do I do?

Your registration online will direct you to either listing your family name or your team name. You can also register as an individual and raise funds that way as well. If you want to donate and support a participant, click on the icon

named 'Search for a Participant or Team to donate', you can type the name of the individual, and it will take you to their fundraising page. There you will be asked to donate, and it will take you through the steps to donate. For individuals wishing to donate to Families or Corporate Teams, just go to the team page, type in the name of the team and it will take you to that team's fundraising page.

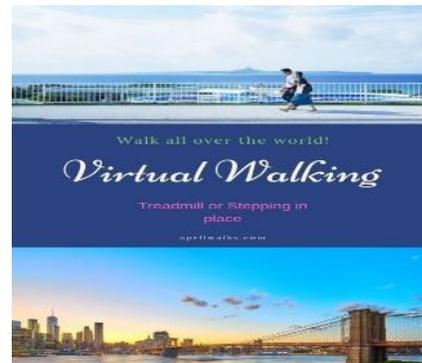
In support of your efforts to raise funds for this Virtual Walk of Life, a toolkit of resources has been prepared that will provide valuable tips on how to meet your fundraising goals. Although this tip is not included, you might create a Tribute Board or Tree in front of your house. You could put up a sign indicating that your raising funds to support cardiac rehab and efforts to fight heart disease. Anyone who has someone that has been affected by heart disease could fill out a heart shaped piece of paper and place that person's name on the Board or the Tree. They could also donate to you in that person's honour.

Social Media and the Need for your Pictures

This year we want you to take pictures and share these at **#walkoflife2020**. Our hope is to create a collage of pictures in creating the community of Virtual Walk of Life participants and supporters. Remember dogs count as family members too!

Virtual Tours

Whether you decide to walk in your neighbourhood or on your treadmill at home consider using one the virtual tour during your walk. This could be Central Park or a tour of Tuscany or one of the Paris art galleries. Challenge your friends and family members to be creative.



Tribute to our Sponsors:

We owe a debt of gratitude to all of our Sponsors! Especially to our National Sponsors who are right there supporting our efforts, and contributing to both recovery from heart disease, and ensuring that individuals know the lifestyles required to prevent and manage cardiovascular disease. We especially extend our deepest thank you to Tridel Corporation, Bank of Montreal BMO, Canada Life, The Mikey Network, and The Brand Factory. We are equally indebted to our National Educational Sponsors including Amgen Canada, AstraZeneca Canada, and to Boehringer Ingelheim-Lilly Diabetes Alliance. To our Special Event Sponsors who outdo themselves every year we thank Rogers and LiUNA Local 183. We also give thanks to our Local Sponsors who for many have picked up the torch of support for many years. We thank Chartwell Retirement Residences, Dorsay Development Corporation, Sigmund Soudack & Associates, Cervini Painting & Decorating Ltd, Mr. Marble, Litemode, RBC Royal Bank, Herity, Media Planet, and Del Property Management.

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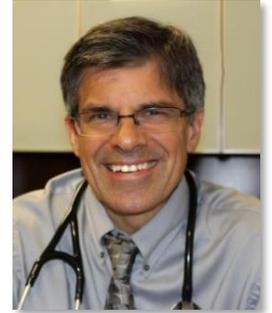
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Cardiac Corner

PRAYERS and PROMISES in the Age of COVID-19

By: Dr. Shane Marshall
May 7, 2020



As of today, over 63,000 Canadians have tested positive for COVID-19, with the majority of these still actively infected. Many remain at home or are isolated in government facilities; some are in the hospital. In the absence of definitive treatment, doctors do what they can. Meanwhile, families of the affected quietly engage in an alternate intervention – one which, you might be surprised to learn, has been tested and published in major scientific journals. It's called intercessory prayer.

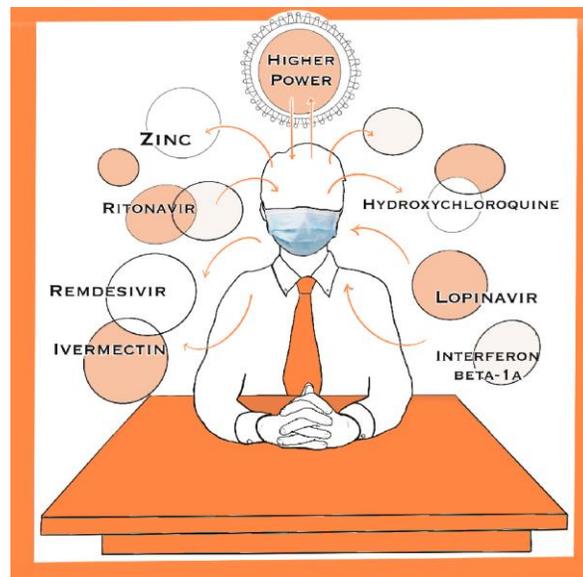
Prayer helps us cope with uncertainty, and when a loved one contracts COVID-19, there's plenty to be uncertain about. Was it transmitted to other family members? Will their condition suddenly deteriorate? Are there enough ventilators? Intercessory prayer is the act of praying on behalf of others.

Of course, for an infectious disease like COVID-19, we turn to 21st-century science for answers. And, yes, some things are certain: physical distancing limits spread. So does hand washing. Masks, too. But that's prevention, not treatment. What can science promise once the virus decides you're its new home? So far, there's no cure for COVID-19. Supportive care is the mainstay of treatment. Supportive means if your temperature rises, we lower it. If your blood pressure falls, we raise it. If oxygen drops, we dial in more and roll you on your stomach. If you're too weak to breathe, we call for a ventilator. If bacterial pneumonia supervenes, we add antibiotics. Then we wait.

One thing we wait for is more data. Data from local observations, data from the Chinese, data from the Italians, data from any major center that has weathered, or is still weathering, the tsunami. What we really want are large-scale studies. But those take time. Until then, the list of medical uncertainties is long:

1. Is there a role for hydroxychloroquine and azithromycin?
2. Should everyone with COVID-19 receive remdesivir, lopinavir, ritonavir, or interferon beta-1a?
3. Should anyone with COVID-19 receive ivermectin?
4. Should we give intravenous zinc to COVID-19 patients?
5. Are standard ventilator settings applicable to COVID-19 patients?

The answers to these questions, at least this week, are: probably not, we're not sure, no, maybe, and probably not. Amidst widespread uncertainty, one thing science can promise is this: given time, definitive answers will arrive. Already multiple trials are underway to evaluate these and other potential COVID-19 therapies; even this week, a new study suggests remdesivir may reduce symptom duration in the illness. But until we have more data and better therapies, patients, families, and even medical staff are having conversations with some higher powers. Given the times, I thought you might appreciate revisiting two classic scientific studies regarding the power of prayer.



My favorite medical prayer study appeared in 1988, my first year of cardiology training. The Southern Medical Journal published a trial involving 393 patients admitted to San Francisco General Hospital's coronary care unit. Half the patients were prayed for by intercessors who they never met, but who were provided with patients' first names, diagnoses, general conditions, and a script to pray from. All patients knew they were in a study, but neither patients nor healthcare providers knew who was being prayed for and who wasn't. For the remainder of their hospitalizations, the prayed-for patients required less ventilatory assistance, fewer antibiotics, and fewer diuretics. The study was led by Dr. Randolph Byrd, and the authors concluded that "prayer to the Judeo-Christian God has a beneficial therapeutic effect on patients admitted to a CCU." As a scientist, I wanted to roll my eyes a little, but I was also a good Catholic boy, and the results intrigued me.

The following year, another prayer study appeared in the Archives of Internal Medicine. This one, by Dr. William Harris and colleagues at the Mid America Heart Institute, evaluated 990 patients admitted to their coronary care unit. The twist here was that no one – neither patients nor medical staff – knew they were part of a study. All patients received standard medical care, but every day for a month, half were prayed for, and the other half weren't. Again, the prayed-for group had fewer adverse outcomes. The study's conclusion was that "intercessory prayer produced a measurable improvement in the medical outcomes of critically ill patients."

"In God we trust. All others must bring data."

Dr. W. Edwards Deming, Engineer and Statistician.

Are these studies relevant in the age of COVID-19? Let's hope so. That's why today I'm not going to be too much of a hard-core scientist. I won't share the 2006 American Heart Journal study that contradicted these findings or other prayer trials that reported equivocal or negative results. One reason I'm not giving negative prayer studies equal billing today is that right now, we need some hope. Another reason is something called confirmation bias. It's the tendency, when presented with contradictory data, to favor the evidence that supports our beliefs, and reject what doesn't. Put another way, if you already believe in prayer, Dr. Byrd's and Harris' conclusions will simply reinforce your convictions. And nobody's contradictory claims will change your mind. For the same reason, skeptics (assuming they got this far in a newsletter devoted to prayer) will mount valid arguments against the positive results of prayer studies.

Regardless of what science concludes about prayer, I remain optimistic. I have faith that effective treatments and a safe vaccine for COVID-19 are around the corner. Might some intercessory prayer hasten the process? Well, in part, that's up to us, isn't it? Let me know what you think – I read all your emails. In the meantime, Canada, stay positive, stay safe, and, as much as possible, stay home.

For more news on the latest developments in heart health, visit www.ShaneMarshallMD.com, (<https://www.ShaneMarshallMD.com>), subscribe to the free newsletter The Annals of Cardiology, and follow Dr. Marshall on Twitter @ShaneMarshallMD (<https://twitter.com/ShaneMarshallMD>).

News from the National Office

Since our Winter Bulletin #10, we have engaged in several patient centered actions. We have participated on two sub-committees emerging out of the Patients defining a New Vision of Health Care in Canada conference held at the Japanese Cultural Centre in Toronto in November. One is exploring Integrated Health Care Models which looks at Family Health Teams as practiced in Community Health Centre's. The second committee is exploring PROMS which is Patient Reported Outcome Measures Standards. Currently, the International Consortium for Health Outcomes Measurement (ICHOM) produces sets of care standards called PROMS for a number of disease groups. These standards with patient input are to identify all of key outcomes that should be included in a model of care for a specific disease or illness, such as myocardial infarction or a heart attack. Within our current committee chaired by Eva Villalba of Cancer Care Quebec, we have focused on Lung Cancer with some discussion on breast and prostate cancer. My interest in this group emerges in utilizing PROMS in cardiovascular care, to include cardiac rehab program participation as a critical component of the Quality of Life measures for 3 months, 6 months, and 12 months. If included and it became a standard of care through value-based funding models, it would include funding for cardiac rehabilitation programs!

Patient Engagement Working Group

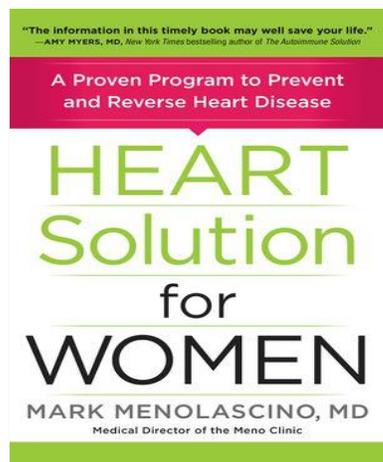
I continue to participate as a patient representative on this working group which is preparing policies and processes for ensuring that Patients or caregivers are recruited for all research undertaken within Li Ka Shing Knowledge Institute and St. Michael's Hospital. This committee also just completed a webinar on Patient Engagement for Researchers from eight countries.

I also continue to participate with Trillium Healthcare Partners on two initiatives. The first is a healthcare website dedicated to sharing patients' experiences in both healthcare and research projects. The intention is to create a patient researcher website that will provide resources for promoting patient involvement in research projects. The second committee is related to Heart Failure and includes links with five universities along with health care specialists in Heart Failure including patients and patient organizations with heart failure. This group is looking at sharing patient and caregiver experiences in the journey of heart failure.

Video "Cardiac Stories of Survival"

If you have not yet visited our website or our facebook page, I encourage you to do so and watch our newest video entitled "Cardiac Stories of Survival". You can also find it on our YouTube channel by going to <https://youtu.be/LDG18LnKNWQ>. This 12-minute video with stories of individual journeys during their heart attack experiences is professionally shot and insightful. The video was made possible with contributions from Amgen Canada and AstraZeneca Canada.

Heart Health Resources and Links



Book Summary: "Heart Solution for Women"

By: Mark Menolascino, MD

Harper One Copyright 2019, Harper Collins Publishers, 195 Broadway, New York, NY10007, first published in 2020, ISBN 978-0-06-284214-5

Dr. Menolascino is a Functional Medicine specialist who operates the Meno Clinic Center for Functional Medicine. He writes this book from this perspective. He indicates Functional Medicine could be defined as "Combining the art and science of integrative, holistic medicine with cutting edge diagnostics and individualized treatment plans that include nutritional and lifestyle advice, supplements and pharmaceuticals to heal the individual, not just relieve symptoms"

Summary: The book is divided into three parts,

Part I: The Truth about Women's Hearts

1. Unfair to the Fairer Sex
2. Cholesterol, Statins, Surgery and Other Myths About Heart Disease

Part II: Your Body and Disease

3. Inflammation: The Root cause of Disease
4. The Functional Medicine Quartet: Heart, Genes, Brain and Gut
5. Healing your Hormones

Part III: The Precision, Personalized Approach

6. Eat proper Foods
7. The Other Six Laws
8. Targeted Supplements
9. Working with Your Doctor to get off Pharmaceuticals

Conclusion: The Challenge and the Promise

Appendix: 7-day Food Log

He begins this book by examining the differences between women and men in terms of vasculature systems, size of the heart and the lack of research on heart disease for women. He also indicates that electrocardiograms EKG's are not as sensitive for women and pick up false readings. This he indicates is used by all hospitals in determining if a woman is having a heart attack. He indicates that heart disease for women begins younger with plaque collecting in the arteries differently than men. He indicates this leads to deception of diagnosis for women. The remainder of Part I is devoted to exploring myths related to cholesterol, statins and dieting to prevent heart attacks.

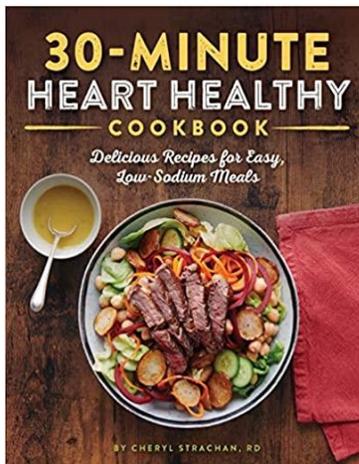
In Part II, he focuses on Inflammation as the root cause of Heart disease and heart attacks. He explores the role of sugar, weekend exercise in understanding what contributes to inflammation. He then explores the interaction of the Heart, Genes, Brain and the Gut. He spends time in exploring the healing of a leaky gut including the impact of food sensitivities on major disease groups he then focuses on healing hormones, metals and personal trauma. He then focuses on lifestyle medicine including precision, personalized assessments. This shifts the book to functional medicine beginning with the heart Solution matrix including family health history, personal health history and nutritional deficiencies, hormonal disrupters and toxins and toxin exposure. This is followed by an exploration of your sources of inflammation, your body type and the external and internal clues that tip you off to heart disease.

In Part III, he continues the shift to precision, personalized solutions and begins with eating proper foods. He focuses on foods to avoid that lead to sensitivities. He provides an excellent glycemic index comparison while exploring weight loss, hormones and diabetes. He also introduces Galen's Seven laws of Health: 1) eat proper foods 2) exercise 3) get adequate sleep 4) drink the right liquids 5) have a daily bowel movement 6) control your emotions and 7) breathe fresh air. The remainder of the book really follows these seven laws that were developed in the second century AD by a Greek Doctor. The book concludes by focusing on supplements you should be taking including the need for a full assessment that can be had through his Meno clinic.

A seven-day food log is provided within the appendix.

Overall, this is a well written book. When I picked it up, I wondered How this Male Doctor was going to write a book about women's heart health. He has achieved this from a Functional Medicine approach. If you want a pathway for understanding how inflammation affects your heart including how you can reduce the impact of inflammation in your life, this is a great resource.

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Book Review: "30-Minute Heart Healthy Cookbook: Delicious Recipes for Easy, Low-Sodium Meals"

By: Cheryl Strachan RD

Copyright 2019 Rockwood Press, Emeryville California ISBN: Print 978-1-64152-632-6 eBook 978-1-164152-633-3

The book is divided into nine chapters, the first chapter is devoted to discussing heart healthy eating. Within this chapter the author shares that she worked in cardiac rehabilitation as a Dietitian within the nutrition element of the cardiac rehab program. She indicated that moving to heart healthy diet resulted in a 30% reduction in mortality and 40% reduction in cardiovascular mortality. Within this chapter she introduces foods for heart healthy eating, and then covers everything from reading labels to shopping to utensils in the kitchen.

Chapter two, through chapter nine is recipes and staples. The recipes are mostly completed within thirty minutes and utilize current ingredients that have been made popular.

This is an interesting cookbook but I do not believe it offers anything new. It is based on a low sodium diet. If you want a cookbook which offers recipes that can be made in under thirty minutes, it is a good resource. It also offers a metric conversion table based on US measurements and conversion to metric.

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Heart Healthy Recipes

Creamy Mushroom Lasagna

From: www.CookForYourLife.org

Ingredients:

8 oz of whole wheat lasagna
 ½ cup breadcrumbs
 ½ cup grated parmesan

For the Balsamic Sautéed Mushrooms:

2 tbsp olive oil
 2 sprigs of fresh thyme, leaves stripped
 2 garlic cloves
 3 shallots, thinly sliced
 2 lbs portabella mushrooms, caps wiped & cut into ½-inch cubes
 Sea salt to taste
 ¾ cup Saba mosto cotto



For the Bechamel Sauce:

12 tbsp butter
 2/3 cup all-purpose flour
 6 cups warm milk or stock
 2 tsp salt
 1 tsp freshly grated nutmeg
 2 tbsp grated parmesan
 Pepper, to taste

Directions:

1. Preheat oven to 350°F. Oil an 11 x 9 x 2 baking pan, set aside. Make the Bechamel and Mushrooms as outlined.
2. Bring a pot of salted water to boil. Add in the lasagna noodles and cook until tender.
3. Spread about a half a cup of bechamel sauce evenly over the bottom of the dish. Lay a single layer of noodles to cover the sauce. Spread on half of the mushrooms and cover with noodles. Spread 1 cup of the bechamel sauce and half of the parmesan. Cover with another layer of lasagna noodles. Layer the remaining mushrooms, cover with another layer of lasagna noodles, and spread the remaining bechamel on top. Sprinkle with the remaining grated cheese and breadcrumbs.
4. Cover and bake for 20 minutes. Then uncover and bake for another 20 minutes or until the top is golden brown. Remove from oven and allow to cool slightly, and serve.

Lamb Souvlaki with Rice and Watermelon Salad

From: www.FoodNetwork.ca

Ingredients:*For the Lamb Souvlaki with Rice:*

6 Bamboo Skewers
 2 lbs boneless lamb
 Resealable freezer bag
 ¼ cup of olive oil
 tsp prepared garlic
 ½ tsp rosemary
 1 tsp oregano
 Salt & Pepper to taste
 2 tbsp lemon juice
 1 tsp red wine
 1 medium red onion
 2 assorted colour peppers
 1 cup Wild and White Rice Blend with dehydrated veggies (Canoe brand)
 2 cups water
 Reserved skewers

For the Watermelon Salad:

¼ cup of red onion
 1 ½ cups of watermelon
 ¾ cup Feta cheese, crumbled
 ½ cup Kalamata olives
 ¼ tsp dry mint leaves
 Salt & Pepper to taste
 1 tsp olive oil
 Serve on lettuce leaves

Directions:*Lamb Souvlaki with Rice:*

1. Take out equipment and ingredients.
2. The night before soak skewers in water overnight
3. Cut lamb into 2-inch cubes. Place lamb in resealable freezer bag. Combine olive oil, garlic, oregano, rosemary, salt, pepper, lemon juice and red wine in a small bowl.
4. Pour out olive oil mixture into freezer bag. Seal bag and squish around until lamb cubes are coated. Place in fridge overnight.
5. Chop red onion into eights, you will have eight chunks. Cut peppers into large chunks. Cover and let stand in fridge.
6. When you get home, preheat BBQ to medium. Combine rice and water in a large microwave safe pot with lid. Microwave at high for 10 minutes, and then medium for 10 minutes.



7. Thread skewers with meat and vegetables, alternating lamb with veggies
8. Remove small inside parts of red onion and reserve for your salad
9. Place skewers on BBQ. Grill to desired doneness and baste with marinade.

Watermelon Salad:

1. Meanwhile, sliver or finely chop reserved red onion and place in a large bowl.
2. Cut watermelon into bite size pieces and add to bowl
3. Add feta cheese and olives
4. Sprinkle with mint leaves, salt and pepper. Drizzle with olive oil.
5. Toss until everything is coated. Let stand until ready to serve.

Mellow White Miso Soup with Cod, Baby Bok Choy, Sriracha and Lime

From: www.FoodNetwork.ca

Ingredients:

For the Pan-Roasted White Miso-Glazed Cod:

- 3 tbsp mirin
- 3 tbsp sake
- ½ cup miso paste
- 1/3 cup sugar
- 6-7 oz of skinless cod fillets, about 1 1/2 -inch thick
- Vegetable oil

For the Soup:

- 4 tbsp miso paste
- 4 oz somen noodles
- 2 green onions, tops removed and sliced thinly
- Small handful of cilantro
- Baby bok choy, trimmed and halved
- Freshly squeezed lime juice, to taste
- Sliced Thai chilies, to taste
- Sriracha, to taste

Directions:

Pan-Roasted White Miso-Glazed Cod:

1. In a small sauce pan, bring the mirin and sake to boil. Whisk in miso until dissolved, add sugar and cook over moderate heat, whisking until dissolved. Add toasted sesame seed oil.
2. Transfer the marinade to the large baking dish and let cool. Add fish and turn to coat. Cover and refrigerate for at least 30 minutes or overnight.
3. In a medium non-stick pan, heat vegetable oil. Scrape off majority of marinade from fish. Cook without disturbing for about 3 or 4 minutes. Gently flip and cook other side for another 3 or minutes.

Soup:

1. Cook the somen noodles in salted water and drain. Run cold water over the noodles to stop them from cooking, shake off excess water and set aside.
2. In a medium sauce pan bring 4 cups of water to a boil. Reduce the heat to a gentle simmer and remove from heat. Pour some of the hot water into a small bowl and whisk in the miso for your liking.
3. Add bok choy and simmer until tender
4. Divide noodles between 3 or 4 bowls and pour miso broth and bok choy over them. Add cooked miso cod, green onions, cilantro, Sriracha, lime and chilies to taste.



Cardiac Health Foundation of Canada Website: Heart Health Publications

We encourage you to visit our website and to read and stay abreast of the Heart Health articles which have appeared under the banner of Did You Know. These articles are intended to provide awareness of the health issues and preventative actions you can take in both managing cardiovascular disease and healthy lifestyle change.

In addition, we have added our new video entitled, "Cardiac Stories of Survival".

Please let us know if there is a topic you would like more information on, and we will do our best to address this in future editions.

Cardiac Health Foundation Bulletin Spring Edition

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If you would like to be updated with our foundation's news and bulletins, you can sign up for our free membership at www.cardiachealth.ca (at the bottom of the homepage). To view previous bulletins on our website, go to the News tab and click on Newsletter.

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