Dear Readers,

It’s a new year, which brings new beginnings! I am thrilled to have recently joined the WakeMed Heart & Vascular family and assumed the role of interim executive director – just in time for American Heart Month. As such, this issue of Heart to Heart is dedicated to our recent celebration of Heart Month, as well as some of WakeMed’s new and innovative cardiovascular care practices and collaborations.

For us here at WakeMed, Heart Month is a time of celebration, recognition and awareness. We take this time to celebrate and support our patients and the strides they’ve made in recovery, improving heart health, focusing on lifestyle changes and enjoying the benefits of their hard work. In this issue, celebrate with us the journey of one of our cardiac surgery patients.

Heart Month is also a time for us to recognize our dedicated staff, physicians and surgeons – who continue to learn, innovate and put the health and wellbeing of our patients above all else. You’ll have the opportunity to read all about our team’s nationally-recognized efforts to improve and enhance care for surgical patients.

Finally, Heart Month is an opportunity for us to bring awareness to the greater communities we serve about the risks of heart disease – as well as all that can be done to reduce these risks. This month, you can read about how your efforts to lead a heart healthy life can improve your life expectancy!

After 32 years of cardiovascular nursing and leadership experience, I am proud and honored to be part of the WakeMed Heart & Vascular family. In my short time here, I can already feel what a unique and exceptional treasure we have here for both our patients and our staff. We have the innovation and world-renowned expertise of a major national system collaborating with us, combined with the care and compassion you can only get from a local medical center. This powerful combination is what inspired me to join the team. I look forward to building upon a tradition of excellence and to serving you, our valued patients and your families. Happy Heart Month!

Amanda Thompson
MHA, BSN, RN, NEA-BC
Interim Executive Director
WakeMed Heart & Vascular Services
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Little Hats, Big Hearts

In celebration of Go Red Day and American Heart Month, the American Heart Association (AHA) distributed little red hats at all three WakeMed hospitals to honor babies, moms and heart healthy lives. Local AHA volunteers – including WakeMed staff – knitted cute red hats for our newborns.

American Heart Association.

On Friday, February 1, WakeMed staff gathered in the Heart Center lobby wearing red in support of National Go Red day to raise awareness of cardiovascular disease.
What do Gatorade, chewing gum, and walking have in common? Each are small, but critical elements of a new, nationally-recognized program WakeMed has introduced to help improve recovery for cardiac surgery patients.

Known as Enhanced Recovery After Cardiac Surgery (ERAS Cardiac), this new care plan is in place for patients who choose WakeMed for cardiac surgery – and it’s getting recognition nationally and internationally for the outstanding results demonstrated after less than two years.

While similar pathways, originating in Europe, have been in place for other surgical specialties such as general surgery and orthopedics for many years, heart and vascular programs have not been previously successful in implementing ERAS programs due to the complexities associated with heart surgery.

Fortunately, the stars aligned in 2016 when Nurse Educator Gina McConnell and Heart Surgeon Dr. Judson Williams both envisioned applying the benefits of an ERAS program to heart and vascular patients. Inspired by the possibility of how such a program could help patients at WakeMed, a multidisciplinary team was assembled to develop the first program of its kind for heart surgery patients.

“Understanding the best-practice data related to ERAS, I believed our patients would benefit from this type of program,” explains Dr. Judson Williams, cardiovascular surgeon with WakeMed Heart & Vascular Physicians. “I was also confident that WakeMed’s Heart & Vascular team had the expertise, collaborative spirit and innovative approach required to be the first to implement such a program. And in Gina McConnell, we had a transformative nurse leader and champion, which was our most critical component.”

After 16 months of research, planning, developing the pathway, and educating staff and physicians across the cardiac surgery care team, WakeMed became the

The ERAS Cardiac Team includes (pictured L to R) Director of Nursing Research Pat Woltz, PhD, RN; anesthesiologist William Bradford, MD; pharmacist Erin Ledford, PharmD, BCPS-AQ Cardiology, BCCCP; nurse educator Gina McConnell, RN, BSN; and cardiovascular surgeon Judson Williams, MD.
first hospital in the US to implement the ERAS Cardiac pathway in April 2017.

The Challenges of Cardiac Surgery Recovery

Heart patients have long feared open heart surgery – and for good reason. Historically, recovery has been intense – up to weeks or more in the hospital, months of recovery – often with many complications and bumps along the way.

Common Problems Associated With Heart Surgery

- Blood clot
- Pneumonia
- GI problems, ranging from minimal issues such as constipation to life-threatening concerns such as bowel obstruction
- Infection – hospital acquired or after discharge
- Pain after surgery
- Unexpected readmission to the hospital after discharge

ERAS Cardiac aims to improve recovery and prevent these complications by standardizing the care of heart surgery patients – before, during and after surgery. Comprised of more than 20 individual steps that may have minimal impact on their own, once combined have proven significant improvements in the recovery process for surgery patients.

“As cardiac surgeons, we’ve always been focused on the surgery itself, which is often very complex,” explains Dr. Williams. “Historically, before ERAS, those hours in the operating room were a cardiovascular surgeon’s exclusive focus. After all, cardiovascular surgeons are trained over many years to ensure our surgeries proceed technically as planned, that we address the problem we’re there to solve, reduce blood loss and most importantly, keep the patient alive.”

Education & Teamwork – The Keys to Success

ERAS Cardiac only works when patients are educated and informed about what it is and why it’s important. After all, a patient is far less likely to follow instructions that are printed on a piece of paper and stuffed into a folder weeks before surgery. That’s why every member of the WakeMed heart surgery team plays a key role in educating patients throughout the process – including the surgeon, pre-op nurse educator, anesthesiologist, intensivist and every member of the care team a patient may encounter during the hospital stay – which commonly includes providers from many different disciplines.

“This pathway is a partnership in every sense of the word,” explains Gina McConnell, BSN, RN, CCRN, supervisor/educator, WakeMed Cardiothoracic Intensive Care Unit. “It’s a partnership with our patients and among our entire care team – all with a goal of ensuring both a successful surgery and improved recovery period. The results have been incredible.

In fact, cardiovascular surgery professionals from across the country are reaching out to us to learn about the incredible work we’re doing.”

What Can a Patient Expect from ERAS?

There are three phases to ERAS – before surgery, during the procedure, and after surgery. ERAS Cardiac may begin weeks or months prior to surgery, depending on the time available. Patients who come in needing emergency surgery may not have the opportunity to experience all the pre-operative elements of ERAS, but they will participate in ERAS as soon as their surgery begins.

Before Surgery (Pre-Operative Components)

Prior to surgery, patients may be asked to modify their diet, begin or maintain physical activity, quit smoking, or eliminate alcohol. Many patients will participate in “prehabilitation,” which in common terms is the process of preparing your body for the physical stress of recovery through assessment, medical and proper nutritional, exercise, and/or physical therapy.

On the day of surgery, ERAS Cardiac patients will be asked to drink a 12-ounce Gatorade drink several hours before their procedure – which will help promote bowel

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function after surgery and decrease thirst and hunger before surgery. Patients will be given pain medications such as acetaminophen and other non-opioids, which will help reduce pain after surgery.

**During Surgery**  
*(Intraoperative Components)*

During surgery, the surgical team has six key elements to follow, which include reducing the use of opioids, managing fluid intake, preventing nausea/vomiting (which is common in surgical patients) and close evaluation and management of several complex clinical measures as outlined in the chart above.

**After Surgery**  
*(Post-Operative Elements)*

Following the procedure, our care team strives to manage pain without the use of opioids, remove the patient’s breathing tube as quickly as possible, get the patient up and moving within 24 hours of surgery and encourage food or drink as soon as it can be tolerated, among other items. “The element our patients find the most fascinating is that we ask them to chew gum up to three times a day following surgery,” explains McConnell. “This helps improve bowel motility and minimizes the risk of GI problems – which can be common after a major open heart surgery.”

**Proven Benefits of**  
**ERAS Cardiac at WakeMed**

After less than two years of ERAS Cardiac implementation, the data speaks for itself. Our patients have benefited from the following improvements:

- Less pain after surgery
- Decrease in the use of opioids after surgery
- Less days in the hospital
- Fewer GI complications
- Reduction of time spent in the Intensive Care Unit (ICU)
- Faster return to work, routine activities

Our ERAS Cardiac Program was prominently featured in the November 2018 issue of Nursing Journal.
An Unexpected Recovery

Working 12-hour days as a sod farmer, often stacking up to 40 tons of sod each day is grueling work. It’s just the type of work that most people assume will keep your body – and especially your heart – physically fit well into your 60s and beyond.

In June 2017, Christopher Perrott was age 64 and had no idea that a case of undiagnosed diabetes had caused damage to his blood vessels for many years without any indication. The first sign of any health problem came that day in June when he showed up at the emergency department for a painful infection in his toe, which he assumed was just a result of the manual labor that came with being a sod farmer.

After a thorough evaluation, Christopher was quickly admitted for complications related to uncontrolled diabetes and was soon also diagnosed with severe heart disease – including a blockage of four major arteries. Christopher and his wife, Nancy were shocked to hear he needed to have open heart surgery as quickly as possible.

Born just outside the capital of Wales in the United Kingdom, Christopher admitted he hadn’t seen a doctor in more than 20 years since he was discharged from the Royal Air Force with a clean bill of health. “I thought I was fit as a fiddle,” he explains. “After all, I was getting 10+ hours of physical activity and fresh air every day – and I was feeling just fine,” he explains.

Once his toe problem was under control, Christopher was on the schedule to have a quadruple bypass surgery at the WakeMed Heart Center with Dr. Judson Williams. Fortunately for Christopher and his family, just a few short months prior, Dr. Williams and a multidisciplinary team had implemented a new care pathway for heart surgery patients known as Cardiac Enhanced Recovery After Surgery (ERAS). The whole focus of ERAS Cardiac is to help patients like Christopher recover from heart surgery more quickly, with less pain, and without complications – and that’s just what happened.

“I was definitely worried about the pain and what recovery would be like,” relates Christopher. “My wife and I weren’t sure what to expect and with that, comes worry.” As soon as Christopher arrived for surgery, the behind-the-scenes work of ERAS was well underway. While he doesn’t remember much from the day of surgery, he is definitely thankful for his entire experience, much of which can be credited to the work of Dr. Judson Williams and the entire ERAS Cardiac team.

“I had open heart surgery – with absolutely no pain after the procedure,” explains Christopher. “I couldn’t believe it. Even when they asked me if I needed anything for pain, my answer was always ‘no.’ I was feeling great considering they had just opened my chest and unblocked four arteries.” In just over a week, Christopher was sent home with a much happier heart.

“Over the past eighteen months, I’ve gone back for several check-ups, but Dr. Williams says my heart is in great shape and I only need to come back once a year now,” explains Christopher. “We head to WakeMed once a month to pick up my medications and we always make it a point to stop by and thank Dr. Williams for giving me a second chance at life – sometimes we even bring the staff brownies.”

Today, Christopher and his wife are enjoying a slower pace of life and semi-retirement. Christopher now spends his days working for a local car dealership as a valet driver. He hopes to see some more of the country this year and spend time gardening this summer – in between his impromptu visits (with brownies) to the WakeMed Heart Center.
Less than two years after introducing WakeMed Pediatric Cardiology services, we’re pleased to offer advanced electrophysiology (EP) procedures for children with rhythm problems such as supraventricular tachycardia (SVT). Performed at the WakeMed Heart Center by pediatric cardiologists who specialize in electrophysiology, a procedure known as a catheter ablation can permanently eliminate SVT in most patients. Currently, children with SVT have to travel outside of Wake County for this procedure, so this is a much-needed service for this community.

As explained by WakeMed pediatric cardiologist Dr. Jason Ho, “Children with SVT typically experience problems such as rapid heart rate, heart palpitations, dizziness and chest pain—symptoms that will often increase in frequency over time and have a significant impact on a child’s quality of life into their adult years.”

The catheter ablation is an outpatient procedure and routinely lasts three to four hours. Access to the blood vessels is obtained in the groin area and a catheter is guided into the heart. The catheter allows the cardiologist to find and eliminate the problem, which is usually due to an extra electrical connection. Recovery typically includes a few days off school and a week without sports/physical activity.

Families who travel with their children from the region are encouraged to stay the night as guests in the WakeMed Heart Center Inn for peace of mind.

“The continued expansion of WakeMed’s Heart & Vascular services to our pediatric population has allowed us to extend decades of cardiovascular leadership to benefit children and their families—all supporting our mission of improving the health and wellbeing of this community,” explains Dr. John Sinden, medical director, WakeMed Heart & Vascular Physicians.
This spring, WakeMed Cary Hospital will build on its growing Heart & Vascular program with the introduction of elective percutaneous coronary intervention (PCI) services. PCI is the procedure where a catheter is inserted in the artery and an angioplasty (or inflated balloon device) is used to re-open the artery, which allows blood flow to continue through to the heart (as outlined in the illustration to the right.)

Performed by specialty-trained cardiovascular interventionalists, the Cary Hospital PCI team will include more than a dozen expert procedural cardiologists from WakeMed and collaborating organizations such as Duke Health and Cary Cardiology.

WakeMed Heart Center staff in Raleigh are working together with the Cary Hospital Heart & Vascular team in preparing for the addition of PCI services. “Many months of planning have gone into this effort,” said Amanda Thompson, interim executive director of WakeMed Heart & Vascular Services. “The PCI services offered at WakeMed Cary Hospital will serve as a much-needed extension of the WakeMed Heart Center’s decades of expertise and leadership.”

While advanced procedures such as PCI have historically been performed at major medical centers and/or in larger cities, cardiovascular medicine has changed drastically over the past decade. Research has proven that making these services available in community hospitals is critical to improving patient outcomes.

“This exciting development is just another way we are working to improve access to much-needed services, right here in Cary – providing patients who live in western and southwestern Wake County with highly specialized services close to their homes,” explains Tom Gough, MHA, senior vice president & administrator of Cary Hospital. “We are thrilled to offer this service, which will afford our patients the opportunity to receive the highest level of care from the very best, most experienced cardiologists in the region.”

This PCI program expands on Cary Hospital’s existing cardiology, peripheral vascular and electrophysiology programs.
WakeMed Enrolls First Patient in NC for Hybrid Clinical Trial

Research Aims to Identify Best Treatment Path for Patients With Multi-Vessel Coronary Artery Disease

The WakeMed Cardiovascular & Thoracic Surgery Research Team marked a research milestone in late 2018 when they enrolled the first patient in North Carolina in the HYBRID clinical trial. The trial enables eligible patients with multi-vessel coronary disease to be randomized to either percutaneous intervention (PCI) only or HYBRID interventions (surgery and PCI). Both are accepted, commonly performed procedures for the treatment of coronary artery disease, but the study will help discover which treatment option is better for patients with multi-vessel coronary artery disease. Members of the HYBRID research team include (left to right) Rhonda Norton; Judson Williams, MD; Frances Wood, MD; Bryan Boulton, MD; and Annsley Winders.

Cardiothoracic Surgeon Dr. Alden Parsons Focuses on Patient Education, Engagement

Dr. Alden Parsons was recently appointed to the Division of Education, Patient Education Committee for the American College of Surgeons. This committee focuses on the efficient, cost-effective, systems-based programs that support patients and all members of the surgical team with patient education resources that encourage active participation and meet the current standards and guidelines for informed consent and patient education. Dr. Parsons also recently presented at the Society for Thoracic Surgeons Tech-Con in San Diego, CA where she gave a talk entitled “Novel Approach to Patient Engagement.” Thank you to Dr. Parsons for representing WakeMed at the national level and for advocating on the importance of education and engagement of our patients.
Cardiology Services Now Open in Fuquay-Varina!

WakeMed Heart & Vascular Physicians is pleased to announce a new cardiology office in the Fuquay-Varina community at 231 North Judd Parkway within the WakeMed Physician Practices Primary Care office. Dr. Hemant Solomon provides consultative services for cardiology and peripheral vascular disease with a goal of expanding services based on the needs of the community. We are thrilled to serve new and current cardiology patients in Fuquay-Varina.

WakeMed Heart & Vascular Physicians
231 N Judd Parkway NE, Fuquay-Varina
919-232-0322
wakemed.org/physician-practices-heart-vascular

Dr. Siddhartha Rao Research Highlighted

Congratulations to Dr. Siddhartha Rao, whose research was published in the January 2019 Journal of Vascular and Interventional Radiology following a presentation at the International Symposium on Endovascular Therapy (ISET) in January. His poster and publication were titled “DyeVert Plus Contrast Reduction System Use in Patients Undergoing Highly Complex Peripheral Vascular Interventions.” This research focused on using less contrast dye during complex procedures, which can reduce adverse reactions and side effects associated with contrast media.

Dr. Rao’s work was also featured in the September 2018 issue of CLI Global, (The Official Publication of the Critical Limb Ischemia Global Society) after presenting at the Amputation Prevention Symposium held in Chicago, IL in August 2018. His research focused on a newer method for treating blocked arteries caused by peripheral arterial disease (PAD) within the major and branch arteries of the leg.

WakeMed is proud to achieve a three-star rating for quality in isolated coronary artery bypass graft (CABG) surgery from the Society of Thoracic Surgeons (STS). This honor represents the highest category of quality a hospital can achieve – placing us among the elite for heart bypass surgery in the United States and Canada. The STS star rating system is one of the most sophisticated and highly regarded overall measures of quality in health care, rating the benchmarked outcomes of cardiothoracic surgery programs across the United States and Canada. Historically, only approximately 6-10% of participants receive the three-star rating for isolated CABG surgery. The latest analysis of data for CABG surgery covers a 1-year period, from June 2017 to July 2018.
Congratulations to our very own Dr. Judson Williams who was recently honored by the Triangle Business Journal (TBJ) as a “Healthcare Hero.”

For 18 years, the TBJ has honored individuals and organizations for putting innovation and compassion to work to improve the human condition. Dr. Williams was recognized for exemplary performance in the physician category for his innovative work in support of heart surgery patients through the implementation of new care pathways such as ERAS and his support of research programs – all designed to help heart surgery patients have better outcomes and enhanced recovery.

Dr. Judson Williams Honored as Triangle Business Journal Healthcare Hero

Dr. Jacek Paszkowiak and Dr. Joseph Salfity joined WakeMed Heart & Vascular Physicians’ Vascular Surgery team in Fall 2018 at our midtown Raleigh office.

Jacek Paszkowiak, MD
Dr. Paszkowiak is a vascular surgeon with clinical interests in minimally invasive treatment of varicose veins and peripheral vascular disease.

He began his career as a vascular surgeon in 2006 in Pennsylvania, following a residency in general surgery and a specialized fellowship in vascular surgery. In 2007, Dr. Paszkowiak became an attending vascular surgeon at Shenandoah Valley Surgical Associates in Fisherville, VA. He served as assistant professor for the Department of Surgery at the Edward Via College of Osteopathic Medicine in Blacksburg.

When it comes to patient care, Dr. Paszkowiak is dedicated to maintaining an optimal mix of top-notch surgical care delivered with the utmost courtesy, respect and compassion for patients and their families. Over the years, Dr. Paszkowiak has shared his knowledge by publishing articles on a variety of topics and making presentations, many of which earned him awards.

Joseph Salfity, MD
Dr. Joseph Salfity is a vascular surgeon who specializes in carotid artery disease, abdominal aortic pathology, and peripheral vascular disease. He has unique experience in minimizing stroke risk in the treatment of carotid artery disease though transcatheter artery revascularization (TCAR). He performs endovascular repair of abdominal aortic aneurysms (EVAR) as well as open repairs for patients who are not candidates for minimally invasive approaches.

Both Dr. Paszkowiak and Dr. Salfity see patients at the WakeMed Heart & Vascular Physicians – Vascular Surgery Midtown at 3713 Benson Drive, Suite 201, Raleigh, NC 27609. Dr. Paszkowiak will also see patients at a new Cary office, 300 Ashville Avenue, Suite 280, beginning this spring. For more information or appointment information, please call 919-235-6520.

Welcome Vascular Surgeons

Dr. Jacek Paszkowiak
Dr. Joseph Salfity

Dr. Salfity grew up in central Indiana and studied biology at Wabash College, graduating with high honors in 2006. He worked with Eli Lilly and Company and obtained his master’s from the Purdue University School of Science in 2007.

He is passionate about working with vascular patients to develop treatment plans that improve their quality of life. His collaborative approach incorporates the patient’s priorities in developing both individualized and comprehensive treatment plans, which include healthy lifestyle choices, medical treatments, minimally invasive procedures, and conventional surgery.

Both Dr. Paszkowiak and Dr. Salfity see patients at the WakeMed Heart & Vascular Physicians – Vascular Surgery Midtown at 3713 Benson Drive, Suite 201, Raleigh, NC 27609. Dr. Paszkowiak will also see patients at a new Cary office, 300 Ashville Avenue, Suite 280, beginning this spring. For more information or appointment information, please call 919-235-6520.

FYI - Minor Construction in Heart Center Lobby

Starting in February, the WakeMed Heart Center lobby is getting a minor facelift. Throughout construction the lobby and practices will remain open, but portions of the lobby may be closed while construction is underway. Please pay close attention to construction work signs and ask a member of our team if you need any assistance. Thank you for your patience and we look forward to welcoming you to our new and improved lobby later this summer.
ARE YOU AT RISK
for developing lung cancer?

If you fit the criteria listed below, you are likely to qualify and benefit from a low-dose CT Lung Cancer Screening.

- Are between the ages of 55 and 77 years old
- Are a current smoker or previous smoker who has quit within the past 15 years
- Have a smoking history of at least 30 pack-years (1 pack a day for 30 years, or 2 packs a day for 15 years)

If you have any of the following symptoms, you are not a current candidate for lung cancer screening, but you should make an appointment with your doctor to discuss your symptoms.

- New or changing cough
- Shortness of breath that you’ve never felt before
- Coughing up blood
- Unexplained weight loss
- Chest pain
- Fever

Schedule Your Lung Cancer Screening Today.
EARLY DETECTION COULD SAVE YOUR LIFE
CALL 919-350-LUNG

Mended Hearts of the Triangle –
Upcoming Events

The Mended Hearts of the Triangle meets monthly and offers support, education and activities for heart disease patients, their families and medical professionals in the cardiology field. Upcoming meetings include:

Monday, March 18
WakeMed Heart Center Conference Center (3rd Floor)
11:30 am to 1 pm
Topic: Spring’s Coming in Bloom - How Nature Can Help With Heart Disease

Monday, April 15
WakeMed Heart Center Conference Center (3rd Floor)
11:30 am to 1 pm
Topic: Rehabilitation After a Heart Event - What Should You Do?

Saturday, April 28
Rex UNC’s Heart and Vascular Center
10 am to 3 pm
Topic: Mid-Atlantic region of Mended Hearts chapters meeting

Heart Failure Support Group –
Upcoming Meetings

Sunday, March 3
WakeMed Heart Center lobby
3 pm
Topic: Importance of the Low Sodium Diet in Heart Failure Management

Sunday, July 28
WakeMed Heart Center lobby
3 pm
Topic: Balancing Activity and Rest in Heart Failure Management

Sunday, November 3
WakeMed Heart Center lobby
3 pm
Topic: Enjoying Low Sodium Holiday Dishes
Do you want to really enjoy your golden years? Living longer can provide an opportunity to enjoy retirement, travel, spend time with grandchildren or simply take time to slow down while feeling your best.

Most of us know adopting a heart healthy lifestyle can improve our risk for heart disease, stroke and other health problems, but recent research indicates it can help us live longer, too. According to a study published in the American Heart Association’s journal *Circulation*, adopting five basic lifestyle habits can help us live longer – up to 14 years for women and 12 years for men. While much of the advice that comes from this study aligns with a heart healthy lifestyle, this is the first study to research its impact on life expectancy.

“This is the first study I’ve seen to prove that the habits we’ve been telling our patients to adopt for years to improve their heart health can actually prolong their lives, too,” explains Dr. Matthew White, WakeMed Heart & Vascular Physicians. “While lifestyle changes are never easy to make, I hope this research will help us inspire our patients who want to focus on developing healthy habits.”

Are you already imagining what you could do with an extra 12-14 years of feeling great? If so, here are the five strategies proven to help you prolong your life.

So, what are you waiting for? Dust off those bucket lists and get started today. If you need help, the experts at WakeMed Heart & Vascular are here to guide you every step of the way.
EAT RIGHT.

WakeMed Dietitian Parul Kharod recommends her patients limit sodium, saturated fats, and packaged processed foods. She encourages them to eat a balanced, colorful diet that includes a variety of anti-oxidant rich vegetables and fruits, healthy fats from nuts and seeds, fiber and minerals from whole grains, and moderate amounts of protein from a variety of plant and animal sources. She emphasizes the importance of cutting out sugary beverages and energy drinks and advises everyone to drink adequate amounts of water.

BE ACTIVE.

Getting the right amount and the right type of exercise can feel overwhelming – especially for those who haven’t been very active for much of their lives. Aligned with American Heart Association guidelines, WakeMed Exercise Specialist Beth Drossman encourages between 75 and 150 minutes of activity per week, depending on the intensity of the workout. “Balancing a variety of strength and aerobic exercise activities can keep things interesting. Whether it’s taking a brisk walk, yoga or water aerobics, finding something you really enjoy is the key to maintaining an exercise program.”

LIMIT ALCOHOL INTAKE.

For those who drink alcohol, the American Heart Association recommends to do so in moderation – which is defined as an average of one to two drinks per day for men and one drink per day for women.

AVOID TOBACCO.

Never smoking was identified as a top strategy in the Circulation study, but quitting smoking can also reduce your risk of many heart- and lung-related health problems. If you are a smoker, your cardiologist can help you develop a plan to quit.

MAINTAIN A HEALTHY WEIGHT.

Keeping your body mass index (BMI) between 18.5 and 24.9 is the sweet spot indicated in the Circulation study. Your primary care physician or cardiologist can help you develop a plan to achieve a healthy BMI, but monitoring your daily calorie intake and keeping tabs on your weight with regular weigh-ins is a great place to start.
I am every heart that beats 2.5 billion times in an average lifetime.

Who says your life and your health have to be average?

Here’s to every heart that exercises. Loses weight. Learns to love fish, oatmeal, fruit and veggies. Gets plenty of sleep. Gets regular checkups for cholesterol, diabetes and blood pressure. And gets healthy. Every heart that knows an ounce of prevention is worth a pound of cure. Or, to quote the experts at the state’s leading heart program, take care of your heart and your heart will take care of you. Learn more about trusting your heart and your health to the best at wakemed.org/hearts.