

Heart **to** Heart

WakeMed Heart & Vascular News

Summer 2026

Fresh from the NC Coast:
Heart Healthy Shellfish

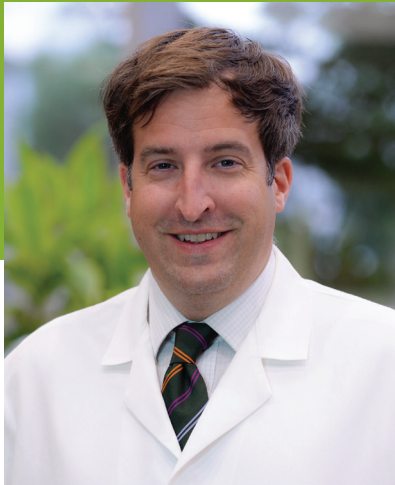
Advances in Treating a
Leaky Mitral Valve

How Mended Hearts
Helped Heal a Heart

TAKE with...

TREVOR C. UPHAM, MD, FACS

WakeMed Heart & Vascular -
Cardiovascular & Thoracic Surgery



American Heart Association.
Heart Walk.

2026 Triangle Heart Walk: Let's Get Ready!

Join Team WakeMed for the 2026 Triangle Heart Walk to be held this October to raise funds for the American Heart Association. Use this code to go to the WakeMed team page on the Triangle Heart Walk's website to learn more about date, time, location and how you can help support Team WakeMed.



Dr. Trevor Upham is a cardiovascular and thoracic surgeon who leads the cardiothoracic surgery program at WakeMed Heart & Vascular.

Q: Tell us a little about yourself.

I grew up in the suburbs of Los Angeles and headed east for college and medical training, and now Raleigh is home to me. Outside of work, like most parents, many of my hobbies revolve around the activities of our three young children who keep us on our toes. Fun fact – my wife was born at WakeMed, so naturally, I'm a big fan!

Q: As a surgeon and administrative leader, what does your daily work look like?

Whether I'm taking care of patients or working with my colleagues behind the scenes, my job is 100 percent about building the best quality and patient experience for our patients. Most of my day is spent with patients in the operating room, in their hospital room or in one of our outpatient offices. If you ask me what I love most about working with WakeMed Heart & Vascular, my answer is always the same – it's the people...period. Our team is the best in the business and I love what I do.

Q: Having heart surgery can be very scary for patients and their families. How do you and your team honor these fears?

Surgery is our daily work, but for patients and their families, it is a major life experience. It's completely normal to be scared and we know that. We spend extra time listening, communicating clearly, and repeatedly walking through what to expect, as well as common detours to prepare for. The better we can paint the picture of the process and the finish line, the better patients are equipped to have the best surgical experience possible.

Q: For surgery teams, quality and exceptional patient outcomes are always a top priority. What are some areas where you and the team have made great progress over the years?

Quality outcomes in surgery involve more than what happens in the OR. Something I'm really proud of is our Enhanced Recovery After Surgery (ERAS) program. This is a personalized care pathway that considers the whole patient and their lifestyle, and it allows us to start steps toward recovery before the surgery even happens. We are constantly looking at our outcomes, welcoming ideas and suggestions, and willing to make changes to fine-tune the whole journey. I'm also driven to bring new techniques that help advance our program, such as less invasive surgery with smaller incisions, when it's the right option for the patient's needs.

Q: What do you love most about summer?

Believe it or not – I love the heat! Anything involving time at the coast with family and friends soothes my soul. The water, sports and ocean creatures are often involved. Naturally, my favorite summer foods are a fresh-catch sandwich or local North Carolina shellfish.

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Mended Hearts

Mended Hearts of the Triangle is a peer support group for cardiovascular patients and their family members. Participants and WakeMed care teams share personal experiences, offer support and gain valuable education together.

Meetings: Third Monday of every month from 1 to 2 pm
WakeMed Heart Center Conference Center, 3rd Floor
Free parking is available in the Heart Center Parking Deck.

July 20, 2026: Hear from a representative from Zoll Company presenting on the LifeVest. The presentation will be in-person and virtual.

August 16, 2026: Russell Decker, former heart transplant patient and North Carolina athletic team member for the Transplant Games of America.

September 21, 2026: Henry (Wil) Van Gils, PA, care team lead at WakeMed Heart & Vascular - Atrial Fibrillation Center.

If attending presentations virtually, contact Hazel Covington at hcovington@wakemed.org for the link.

Leaky Valve?

Advances in Treating Mitral Valve Regurgitation



Mitral Valve Regurgitation, Explained

The heart is a complex organ made up of four chambers and four valves that support the highly-coordinated blood flow throughout the body. While the heart is responsible for pumping blood, its four valves are like doors that open and close to let blood flow into the appropriate chamber at just the right time. But, what happens when one of those doors doesn't close properly? You get a leaky valve.

Mitral valve regurgitation (also known as mitral valve insufficiency or a leaky mitral valve) is the most common heart valve disease and occurs when the mitral valve doesn't close properly. This malfunction allows blood to leak back into the left atrium when it should instead be headed forward to the left ventricle through the aortic valve and into the aorta (see visual to the right). This backward blood flow causes the heart to work harder, which can lead to serious problems such as heart failure, arrhythmia, blood clots and stroke.

Oftentimes, mitral valve regurgitation goes undetected until it has progressed significantly. Patients don't realize there's a problem until they start experiencing symptoms such as shortness of breath, fatigue, lightheadedness, palpitations, or swelling in the legs, feet or hands. In other cases, it may present as a heart murmur during a routine physical exam. A diagnosis can only be confirmed after a full cardiology exam and workup including an echocardiogram, which is an image created using sound waves, showing the heart's structure and function. Other imaging tests can help physicians better assess the severity of the disease.

FAST FACT

Mitral valve regurgitation affects nearly

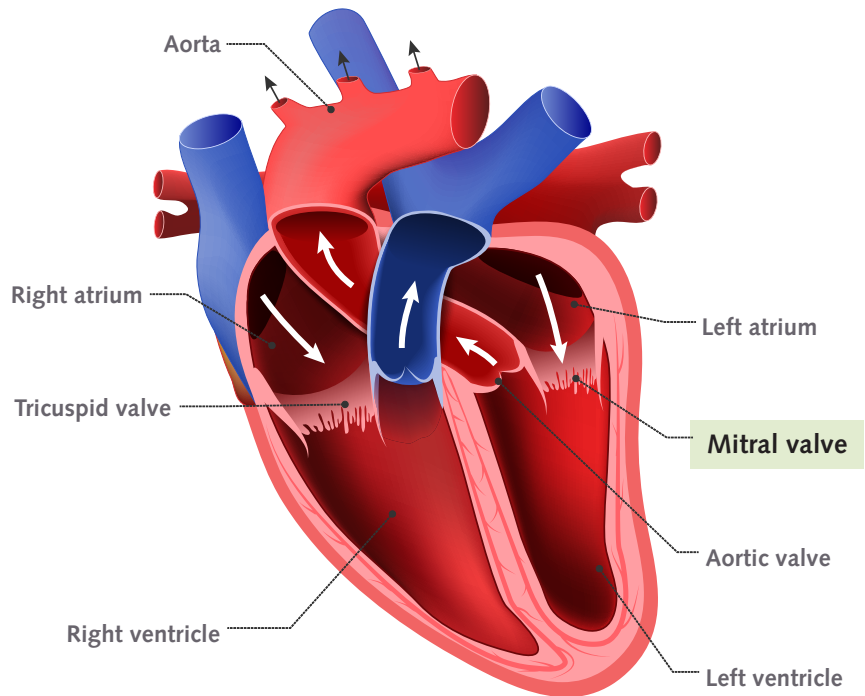
2.5 MILLION PEOPLE

in the US alone, and with an aging population, these numbers are expected to soar in the coming years. Experts recommend **early diagnosis and treatment** for the best possible outcomes.



Understanding Mitral Valve Regurgitation

There are two distinct types of mitral valve regurgitation (MR) - primary MR and secondary MR. These distinct types are based on the cause of the disease, and will help guide your treatment plan.



Primary MR, also known as degenerative mitral valve regurgitation, involves structural abnormalities in the valve leaflets and can occur at any age. The mitral valve is comprised of two leaflets, which are thin, flexible flaps of tissue. Common causes of degenerative MR include congenital valve defects, connective tissue disorders, mitral valve prolapse or rheumatic heart disease. But it can also occur due to regular ‘wear and tear,’ caused by the leaflets opening and closing hundreds of thousands of times each day. Primary MR has become increasingly common among our aging population, with studies suggesting that more than 10 percent of individuals aged 75 and over may suffer from the condition.

There are no medical therapies that can address the anatomical problems that cause primary MR. And, while medical therapies for symptom management and lifestyle changes may be recommended, their efficacy may be limited. Patients are generally monitored by a cardiologist over time to track disease progression, with routine testing and cardiovascular imaging.

For Primary MR, Is Surgery the Best Option?

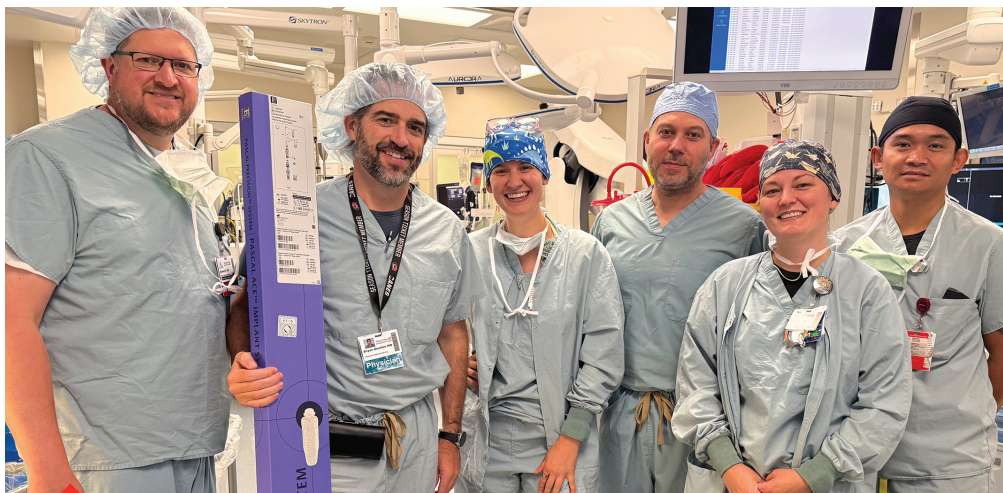
Surgery is often the last resort for treating chronic health problems – generally indicated after years of conservative therapy and symptom progression. However, for patients with severe MR, early surgical intervention is often the best way to treat it, even for

those who experience no symptoms. That’s because mitral valve surgery is the only treatment for severe MR that’s been shown to improve symptoms and prevent heart failure. Furthermore, a 2020 research study published in *The Annals of Thoracic Surgery* found that patients who undergo early repair or replacement have better long-term survival rates.

Secondary MR, also known as functional mitral valve regurgitation, results from physical changes affecting the left ventricle, such as those caused by cardiomyopathy or scar tissue after a heart attack. These problems cause the valve leaflets to pull apart, which keeps them from fully closing, leading to backward blood flow. Secondary MR is more common in older patients, and often occurs in patients with heart failure.

Treating Secondary MR Starts with Conservative Therapies

For patients with secondary MR, medical therapy and lifestyle modifications are generally recommended first. Depending on the patient’s condition, there are dozens of medication options, including those to help lower blood pressure, control blood sugar and treat heart failure. Valve surgery is generally indicated only after a combination of these treatments have been tried and exhausted.



Dr. Bryon Boulton (second from left), Dr. Andrew Sampson (third from right) and the care team from Invasive Cardiology.



PASCAL Implant

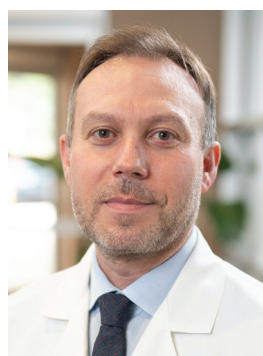
Mitral Valve: to Repair or Replace?

For WakeMed Heart & Vascular patients with advanced mitral valve regurgitation, treatment generally begins with a referral to WakeMed's Structural Heart team. There, a cardiologist, who has subspecialty training in structural heart disease, consults with each patient giving them knowledge of their heart's physical architecture, inner workings and treatment guidance. When surgery is indicated, they work hand-in-hand with the WakeMed Heart & Vascular - Cardiovascular & Thoracic Surgery team to develop a plan of care based on the patient's symptoms and severity of valvular disease.

Valve repair is typically the first choice, and can help many patients completely resolve their symptoms. For some patients, a **valve replacement** is needed to address either severe symptoms or high-risk structural issues that can't be resolved with a repair. For patients undergoing other heart surgeries, a valve replacement can be performed at the same time to streamline treatment and recovery. Replacement options include a mechanical valve, typically indicated in younger patients due to long-term durability, or a biological valve, which generally lasts just 10-15 years.

Both valve repair and replacement procedures can be performed using newer, minimally-invasive options or traditional open surgical techniques. Surgical selection and eligibility decisions are based on a range of factors, including health history, age, disease classification and severity, as well as complex anatomical considerations.

"Mitral valve regurgitation can have a significant impact on an individual's quality of life, and unfortunately, some patients aren't good candidates for open-surgery repair," explains Dr. Andrew Sampson. "New minimally-invasive



ANDREW SAMPSON, MD
WakeMed Heart & Vascular - Cardiology

tools such as these allow us to give more patients access to the significant relief that a valve repair procedure can offer. As the field continues to advance, we're able to make a real difference in overall health, longevity and quality of life for patients we wouldn't have been able to treat just 10 years ago."

WakeMed Pioneers a New Option for Primary MR Valve Repair

The latest advancement for treating mitral valve regurgitation is a transcatheter mitral valve repair (TMVr), sometimes called a transcatheter end-to-edge repair (TEER), performed using a new device called the PASCAL transcatheter valve repair system. During this procedure, a small implant is inserted via a catheter through the femoral vein in the leg to reach the mitral valve. The device is attached to the leaflets of the mitral valve, and uses a spacer to block the backward blood flow. It is performed in a hybrid operating room, which is a state-of-the-art procedure space that combines the most advanced imaging technology for precise visualization along with traditional operating room tools and equipment. WakeMed Heart & Vascular's Dr. Andrew Sampson and Dr. Bryon Boulton performed the first case using the PASCAL system at the WakeMed Heart Center in early May.

NEW + NOTEWORTHY

Awards & Accolades



The Society for Vascular Surgery's Vascular Quality Initiative® (SVS VQI) has awarded both the WakeMed Raleigh Campus and Cary Hospital three stars (the highest rating) for their active participation in the SVS VQI Commitment to Vascular Quality Improvement (CVQI) Awards Program. The Vascular Quality Initiative improves the quality, safety, effectiveness and cost of vascular health care by collecting, analyzing and sharing data on pre-operative risk factors, intra-procedural variables, post-procedural outcomes and one-year follow-up data. ***Congratulations to our Vascular Surgery teams for this recognition!***

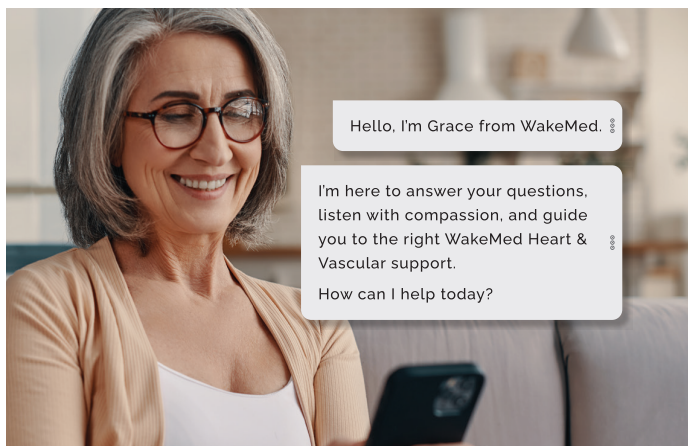


ECU College of Nursing Honors WakeMed Heart & Vascular Team Members

Three members of the WakeMed Heart & Vascular team were recently recognized by the ECU College of Nursing. The college's annual Preceptor of the Year awards program named the following for their dedication to guiding and teaching future nurses. Brielle Reyes, DNP, with WakeMed Heart & Vascular was named Family Nurse Practitioner Preceptor of the Year, and Kristy Whitley, RN, and Kimberly Dail, RN, both of Cardiac Rehab in Cary, were named Community Health Preceptors of the Year. ***Kudos to these leaders for their commitment!***

WakeMed Heart & Vascular Introduces AI Digital Care Companion

Meet *Grace*, WakeMed's 24/7 AI-powered digital care companion, built to support you at every step of your heart and vascular journey.



With *Grace*, you can:

- Learn about WakeMed Heart & Vascular services
- Find a physician specific to your condition/needs
- Gain a better understanding of symptoms and conditions
- Have questions answered before or after your appointment
- Get answers on insurance and financial questions
- Access resources like nutrition counseling, smoking cessation and more



Scan to chat.

**Your next
step
starts here.**

A Transformative Step for WakeMed: Our Strategic Combination with Atrium Health



WakeMed and Atrium Health recently announced plans to come together to improve access and transform care, positively impacting the health and well-being of generations to come. Visit our website to find answers to frequently asked questions and learn more about what this exciting new chapter means for patients and our community.

“We are extremely optimistic about what this strategic combination means for our heart and vascular program and the patients we serve,” explains Judson Williams, MD, MHA, executive medical director, WakeMed Heart & Vascular. “By joining a broader network with a like-minded organization committed to high-quality, mission-driven care, our care teams and physicians will be supported by greater resources, innovation, clinical research and advancements – all of which is great news for our patients and their families.”

Advances in Complex Device & Lead Management

For complex arrhythmia patients, device placement and management require the use of the most advanced technology along with careful monitoring by a highly skilled electrophysiology team. Over the past several years, WakeMed Heart & Vascular has expanded its Complex Arrhythmia team and capabilities – allowing patients with more complex cases from throughout the region to get the care they need right here in Wake County. Here are just a few of the advanced device placement and lead management procedures now offered by our expert team.

Complex Lead Management

Pacemakers and ICDs were invented more than 50 years ago, and today there are more than seven million implanted cardiac devices around the world. Managing these devices – and particularly the leads that are used to attach them to the heart – requires ongoing monitoring by an electrophysiologist. Complications such as infection, device failure, blood clot formation and device replacement (due to recall or upgrade) often require the removal of the leads, but lead extraction procedures can be high-risk due to the intricacies and potential complications involved. Fortunately, the WakeMed Heart & Vascular Complex Arrhythmia team has decades of combined training and expertise in performing these highly complex procedures.

- **Transvenous lead extraction:** This complex and highly technical procedure allows for lead removal using minimally-invasive endovascular techniques.
- **Laser lead extraction:** This procedure uses focused laser energy to remove leads with gentle precision, thereby reducing the risk of potential complications.

Advanced Device Placement

- **Extravascular Implantable Cardioverter-Defibrillator (EV-ICD):** An FDA-approved, emerging technology that offers an alternative implantable system that avoids the vascular risks associated with transvenous ICDs. They're generally used for patients with certain arrhythmias or those with weak or damaged heart muscle.
- **Subcutaneous Implantable Cardioverter-Defibrillator (S-ICD):** Unlike traditional ICDs, which require one to three leads that run through the veins and attach to your heart, subcutaneous ICDs are placed under the skin. They reduce the risk of complications, making them a great option for younger or more active patients at higher risk of long-term complications.
- **Leadless pacemaker:** Placed using minimally-invasive techniques, leadless pacemakers are associated with fewer complications such as infection or lead fractures.
- **Advanced lead technology:** Newer, smaller advanced leads are FDA-approved for use in patients with heart failure, and allow electrophysiologists to use just one lead rather than two for the delivery of both defibrillation and pacing. The advanced design contributes to fewer lead-related complications.



Dr. Kevin Manocha (far left) recently placed the first extravascular implantable cardioverter-defibrillator (EV-ICD) at WakeMed.

..... Meet the WakeMed Heart & Vascular Complex Arrhythmia Team



Mark Englehardt,
MD



George L. Hamrick,
MD, FACC



Kevin Manocha,
MD



Ashish B. Patel,
MD, MPH, FACC



Neel Patel, DO



Olivia Collins,
DNP, FNP-C



Michelle Deans,
PA-C

Clinical Research Updates



Leading both studies are Dr. Ashish Patel and Dr. Kevin Manocha (center).

The **OMNY-AF study** is testing a new treatment for atrial fibrillation (AFib). The study uses a specialized catheter that delivers short bursts of electrical energy to treat abnormal heart signals. Researchers are evaluating how safe and effective the treatment is for patients who are not good candidates for certain heart rhythm medications. Participants are followed for one year to track outcomes and quality of life.

The **SIMPLAAFY trial** is evaluating various blood-thinner strategies for patients with AFib who are at increased risk of stroke. The study is for patients who receive a WATCHMAN FLX Pro device along with medical management and compares different medication approaches after the device is implanted to compare safety and efficacy. Drs. Patel and Manocha, together with the WakeMed Clinical Research Institute, enrolled 10 patients who are currently being monitored as part of the study.

Meet The Heart and Vascular Clinical Research Team

The Heart & Vascular Research Team helps to identify, enroll, conduct and maintain the clinical trials that our physicians have elected to conduct at WakeMed. These trials include therapeutic areas such as electrophysiology, advanced heart failure, cardiothoracic surgery, vascular surgery, interventional cardiology and general cardiology.



Olivia Bradshaw, Rhonda Norton, Jenna Cassels,
Haleigh Berst (pictured left to right)

Fresh from the Coast: Heart Healthy Shellfish



In North Carolina, summer and seafood go hand-in-hand. With one of the nation's largest estuaries along our coast, we're fortunate to enjoy an abundance of fresh, locally harvested shellfish all season long. Whether you're eating at home or dining out, NC shellfish can be incorporated into a heart-healthy diet to flavor up your summer menu.



FAST FACT

The American Heart Association recommends eating **2 SEAFOOD SERVINGS PER WEEK**, making shellfish a heart-healthy option. A serving is 3 ounces cooked. Oysters and mussels are the shellfish highest in omega-3 fatty acids.

What Exactly Is a Shellfish?

Generally speaking, shellfish are aquatic animals with external shells and no backbone, making them invertebrates. They are divided into two primary categories: mollusks, which include North Carolina favorites such as clams, oysters and scallops; and crustaceans, which include shrimp, crabs and crawfish.

Best Practices for Enjoying Local, Fresh Seafood

Even though North Carolina is one of the largest producers of shellfish in the country, many of our restaurants and larger retailers sell frozen varieties shipped from outside the United States. In fact, 90% of the seafood consumed in the US is imported from other countries. If you're committed to enjoying fresh, local seafood from our state, here are a few best practices.

- **Always ask.** Whether you're at the grocery store or a restaurant, you can kindly ask the chef or grocer where their shellfish are coming from, whether they've been frozen, etc.
- **Shop local.** Often, the best way to enjoy fresh North Carolina seafood is to frequent independent, locally owned restaurants and markets. Most coastal towns have one or more local seafood markets, and here in the Triangle, there are quite a few offering local seafood.

What's in Season?

Ryan Spekman, co-owner and founder of Locals Seafood, tells us that North Carolina shrimp season really ramps up in July, making it a great summer shellfish. Blue crab and clams are also harvested in the summer months in North Carolina. Oysters peak between November and January, whereas scallops are freshest in February and March. While fresh is best, seafood that has been flash frozen will maintain its full flavor and nutrient profile, making it easier to enjoy all year long.

Healthy Heart Benefits

Shellfish are naturally high in protein and low in fat, making them a great staple for a heart-healthy diet. They are nutrient-dense – providing essential vitamins and minerals, while remaining relatively low in calories and saturated fat. Shellfish are also unique because many varieties contain all three forms of omega-3 fatty acids, including EPA, DHA and ALA. Omega-3s are essential fats that help with cell function and hormone production – particularly the hormones that regulate blood clotting, inflammation and movement within the arterial walls. Research published in a 2019 issue of *The New England Journal of Medicine* suggests that a diet rich in omega-3 fats may reduce the risk of a major cardiovascular event. Earlier research published in the *American Journal of Epidemiology* found that healthy men who ate more

SPOTLIGHT ON: Locals Seafood



Locally owned and operated, Locals Seafood is committed to expanding access to safe, locally-harvested seafood across North Carolina. Their team, led by co-owner and founder Ryan Spekman, travels to the NC coast four to five times per week to harvest fresh inventory. Through their retail market in central Raleigh, in farmers markets throughout the Triangle and via online ordering, they make it easy to get high-quality shellfish year-round. Their work also supports local fishermen, farmers and processors, and reinforces a more stable, resilient North Carolina coastal economy.

than seven ounces of omega-3-rich shellfish per week were 59% less likely to die from a heart attack than those who ate significantly less.

Tips for Healthy Preparation

- **Choose fats wisely.** Replace butter with extra virgin olive oil, which has less saturated fat and is higher in antioxidants, anti-inflammatory compounds and is rich in monounsaturated fats, which can help lower LDL (bad cholesterol) and raise HDL (good cholesterol). Use cheese and high-fat dairy products sparingly, or substitute with low-fat options.
- **Add healthy flavor.** Aromatics like garlic and onions can add lots of flavor without increasing sodium or fat content. Likewise, herbs such as parsley, thyme, dill, chives and tarragon are great choices for creating flavorful shellfish and can reduce the need for prepared seasonings that are high in sodium.
- **Choose a healthy cooking method.** Boiling, broiling, steaming and grilling are great options for keeping shellfish healthy – and can help preserve and elevate the shellfish's natural flavor.

.....

"I find some people are intimidated by preparing seafood, but there's no need to overcomplicate it," Spekman says. "The truth is that cooking shellfish is arguably easier and faster than cooking chicken. My top go-to ingredients are white wine, homemade stock, garlic and onions, and my personal favorite dish is steamed clams. Particularly when you're using freshly caught, local shellfish – the less complicated the recipe is, the more you'll be able to taste the true flavor of the dish."

.....

"A Low Country Boil is the South's version of a clambake, and is usually made with sausage, a salty seasoning blend, and regular butter. This modified recipe uses a no-sodium seasoning blend, skips the sausage, uses a smaller amount of unsalted butter to decrease sodium and saturated fat. We've also added more fibrous vegetables for a heart-healthy makeover – and incorporated a favorite among shellfish – shrimp. If you wish to make it even heart healthier, olive oil could also be substituted for butter to decrease saturated fat even more and increase anti-inflammatory, monounsaturated fat."

- Patrick Mahaney, RD, LDN, WakeMed Registered Dietitian



Low Country Boil

SERVES 12

INGREDIENTS

6 ears of corn, cut in half
 1½ pounds unpeeled fresh shrimp (medium)
 12-14 baby red new potatoes (30 ounces)
 1 yellow onion, sliced
 4 cloves garlic, minced
 2 cups fresh green beans, trimmed
 2 large bell peppers, sliced
 4 T. unsalted butter, melted
 2 whole lemons, sliced into wedges for serving
 2 teaspoons low-sodium **No Sodium Seafood Seasoning Blend** per quart of water

No Sodium Seafood Seasoning Blend

2 t. ground bay leaves
 3½ t. celery seed
 1 T. sweet paprika
 1 t. dry mustard powder
 1 t. garlic powder
 1 t. onion powder
 ¼ t. ground ginger
 ½ t. ground black pepper
 ¼ t. ground nutmeg
 ¼ t. ground cinnamon
 ¼ t. cayenne (more or less to taste)
 ⅛ t. ground allspice

INSTRUCTIONS

Add about 6 quarts of water to an 8 quart pot. Add the seasoning blend and bring to a low, rolling boil. Add corn, onions, peppers and garlic, and cook for 10 more minutes. Add shrimp and green beans and cook for 3-4 minutes. Drain and serve on a table covered with newspaper, and add additional seasoning to taste. Drizzle the melted butter on top and serve with lemon wedge garnish. Pairs well with warm, crusty bread or cornbread.

Nutritional Information Per Serving: 290 calories, 5g fat, 3g saturated fat, 131mg cholesterol, 546mg sodium, 4g fiber, 6g sugar, 18g protein

DID YOU KNOW?

The Albemarle-Pamlico Estuarine system (comprised of the Albemarle and Pamlico sounds) is the second largest estuary in the country, just behind the Chesapeake Bay. The 3,000 square miles of water that spans from North Carolina's southern Outer Banks up to Virginia Beach, VA, is a productive ecosystem with rivers and sounds that gives us access to some of the freshest, highest-quality seafood in the United States.



How Mended Hearts Helped 'Heal' a Heart - Michelle Bennett's Story



Hazel Covington (far right) and David Cottengim (left) with WakeMed's Mended Hearts Program provide support to Michelle Bennett and her daughter Bella.

In 2023, Michelle Bennett was a perfectly healthy 45-year-old, stay-at-home mom. As a former certified athletic trainer, EMT, volunteer firefighter and CPR/First Aid trainer, Michelle was dedicated to her health and those around her. Having a heart attack was not on her radar.

But on February 6, 2023, everything changed. Early that morning, Michelle woke up with classic heart attack symptoms – chest pain, numbness in both arms, nausea and vomiting. Her then 6-year-old daughter Bella called for help, and Michelle was rushed to the hospital. After undergoing a procedure in the cardiac catheterization lab, she learned she had experienced a SCAD heart attack, caused by a spontaneous tear in the inner layer of her left anterior descending artery (LAD).

This rare condition cannot be predicted or prevented, making the experience especially unsettling for someone who had always been healthy. Although Michelle recovered physically, she says that the mental recovery is where her story truly begins.

"After my heart attack, I followed my doctor's strict orders, attended cardiac rehab and was finally cleared to get back to my normal activities. While my physical recovery period was over, I was really struggling mentally," Michelle said. "I couldn't stop worrying – 'What if this happens again? What if I'm on vacation? What if I'm driving or hiking?'"

And sleep didn't end the worrying. "At night I couldn't sleep, I would jump up in bed thinking I was experiencing a heart attack; I would panic only to realize it was just a dream," Michelle said. "This was a reoccurring nightmare; I was exhausted and couldn't stop thinking about having another SCAD heart attack."

Then everything started to change again, and this time for the better. A family friend suggested to Michelle that she attend a Mended Hearts meeting. And what happened next was life-changing.

For her first meeting, Michelle was encouraged to bring her husband and daughter, and all three were welcomed with open arms. For the first time, Michelle felt surrounded by people who could understand what she had experienced. They reassured her that the fear and anxiety she was feeling was completely normal after a cardiac event.

Within a few months, the nightmares were gone and Michelle was sleeping through the night. She credits Mended Hearts with getting her life back.

"Because of the WakeMed Mended Hearts support group, I'm now able to travel, run, exercise, live my life and sleep without nightmares," Michelle said. "Not only has this support group helped me, but the members have embraced my daughter Bella, too. She's attended meetings with me, and I truly believe it has helped her process her own fears and emotions around what happened to me."

Learn More About Mended Hearts and Our Upcoming Meetings on page 3.

While she credits her incredible doctors and nurses with the physical aspects of her recovery, Michelle says the emotional support provided by the Mended Hearts program helped her move on with her life. "Yes, my doctors and nurses absolutely fixed my heart physically, and I'm so grateful for that, but it was the members of Mended Heart who truly healed me."

Now, every third Monday of the month, Michelle looks forward to gathering with the people she now considers close friends.

Eat the Rainbow: Visit Your Local Farmers Market



What's in Season?

In North Carolina, these tasty and colorful fruits and veggies will reach their peak flavor during the later summer months.



Blackberries
Corn
Cucumbers
Eggplant
Figs
Honeydew
Nectarines
Okra
Peaches
Peppers
Plums
Snap Beans
Summer squash (yellow)
Tomatoes
Watermelon
Zucchini



If you want to enjoy the true taste of summer in North Carolina, there's no better place than your local farmers market. While the number of farms in North Carolina has decreased for decades, the demand for fresh, local produce is still strong here in the Triangle. With dozens of farmers markets to choose from, you can find all the colors and flavors you need to reap the many health benefits of incorporating more fresh, locally-grown produce into your diet this summer.

The Farmers Market Experience

Whether you live in Raleigh, Chapel Hill or Durham – or any town in or around the Triangle, chances are there's a farmers market not too far. Browsing the diverse stands, sampling what's in season, and having the opportunity to talk firsthand with those who are growing the food are just a few of the benefits. And, farmers markets aren't just about food. They're also about community and craftsmanship. Many small local business owners, bakers and artisans have booths filled with unique items to peruse and enjoy. In an era where big business and digital life loom large, there's something even more enjoyable about stepping out, interacting with neighbors and putting your hands on locally-made foods and merchandise.

"I was raised visiting farmers markets, so it's something I feel deeply connected to," explains Brett Pinsent, market manager for the Cary Farmers Market. "It's almost like they're our last 'analog' community space. When you walk around our farmers market, you're unlikely to see people on their phones. Instead, people of all ages are engaged with one another in a beautiful, outdoor setting. You may hear in-depth discussions

about where the food is coming from and what farming methods are used – it's a true interactive experience."

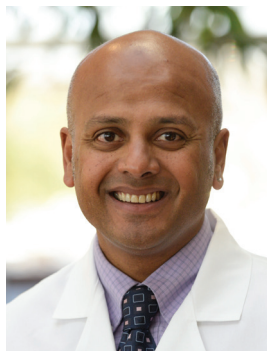


The Cary Farmers Market is open every Saturday from 8 am to noon next to the Downtown Cary Park, featuring dozens of NC farmers, small businesses and live music.

Health Benefits of 'Eating a Rainbow'

Eat More Color

For years, nutrition experts and physicians have touted the benefits of 'eating a rainbow,' but what does it really mean? It's just about as simple as it sounds – incorporating fruits and vegetables of different colors into your diet every day. And, it's not about the colors, exactly – it's about the diversity of phytonutrients or pigments that give the produce its unique appearance. Specific phytonutrients offer unique health benefits as outlined in the chart below.



HEMANT SOLOMON,
MD, FACC, RPVI

WakeMed Heart & Vascular

"Adding a variety of colors to your diet means you're getting a wide range of vitamins, minerals and phytochemicals," says Dr. Hemant Solomon, WakeMed Heart & Vascular. "And, by default, when you start incorporating more colors through the use of fresh produce, you're adding high fiber, low-calorie ingredients that can support a heart-healthy diet. Plus, eating a produce-heavy diet can support weight management and the improvement of certain cardiovascular risk factors such as high cholesterol, blood pressure and diabetes – so there's really no downside to adding more color to your plate."



WakeMed is the proud sponsor of the Cary Farmers Market's 'Eat a Rainbow' program, which allows children to collect an interactive rainbow card and \$5 voucher to shop the market. Children are encouraged to choose foods in a variety of colors and to try new fruits and vegetables.

Rainbow of Health Benefits



RED

Rich in lycopene, these foods can improve heart health, decrease cancer risk, increase brain function and reduce stroke risk.

Top picks: tomatoes, beets, radishes, cherries, strawberries, red peppers and red onion.



ORANGE & YELLOW

Filled with carotenoids, these fruits and veggies can reduce the risk of heart disease and inflammation, improve vision and skin health and strengthen immunity. **Top picks:** carrots, yellow peppers, sweet potatoes, peaches, oranges and tropical fruits.



GREEN

Featuring indoles and isothiocyanates, which are high in vitamin K, potassium, fiber and antioxidants, these fruits and veggies may help prevent cancer. **Top picks:** spinach, arugula, broccoli, Brussels sprouts, avocados, kiwis, asparagus.



BLUE & PURPLE

Containing antioxidants and anthocyanins, these foods can help lower blood pressure, and reduce the risk of stroke and heart disease. They're also associated with improved brain health and memory. **Top picks:** blueberries, blackberries, eggplant, figs, purple cabbage, concord grapes and plums.



WHITE & BROWN

High in flavonoids, these foods can help reduce cholesterol and blood pressure, improve bone strength and decrease the risk of stomach cancer. Allicin found in garlic and leeks can prevent tumor cell growth. **Top picks:** onions, mushrooms, cauliflower, garlic and leeks.



The WakeMed Farmers Market brings fresh food to the more than 5,000 employees, 300 volunteers, and thousands of patients and visitors on the Raleigh Campus, as well as residents of southeast Raleigh and surrounding neighborhoods.

**Join us every Tuesday
from 10 am to 2 pm
from now through
August 11** in the courtyard (or in the Main Lobby on extremely hot days).

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