



SUPERVALU Pharmacies Intern Express

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COMPANY NEWS

Heart Awareness Month and Heart Health

Since February is American Heart Awareness Month, it is appropriate to review heart health and what we can do as pharmacists to help our patients become more “heart healthy.” As a leader in providing pharmacy services to patients across the nation, SUPERVALU is in a great position to advocate heart health and improve the lives of its patients. The following will contain an overview of cardiovascular disease and recommendations that pharmacists can discuss with their patients to help them lead healthier lives.

Looking back to the year 1900, cardiovascular disease has been the number one killer in the United States every year except 1918. It kills more Americans every year than cancer, accidents, and diabetes combined. Every 34 seconds, someone in the U.S. dies from heart disease, and every 20 seconds, someone suffers from a heart attack. It was estimated that in 2006, over 81 million Americans suffered from at least one form of cardiovascular disease, the majority of the cases (about 73 million) being hypertension. These are staggering figures, especially considering that the problem is only getting worse.

Cardiovascular disease is an umbrella term comprised of hypertension, congestive heart failure, stroke, atherosclerosis, angina pectoris, coronary artery disease, myocardial infarction, peripheral vascular disease, and cardiac arrhythmias. The causes of cardiovascular disease are therefore dependent on the specific type of cardiovascular disease in question. However, there are known culprits that cause problems with the cardiovascular system, including sedentary lifestyles, diets high in saturated fats and sodium, obesity, and smoking. The following four changes to lifestyle habits are easy recommendations for improving the cardiovascular health and quality of life of your patients:

1) Exercise – Roughly 250,000 deaths in the U.S. every year can be linked to a lack of regular physical exercise. Studies and reports over the last several decades have shown that individuals who exercise were much less likely to develop coronary heart

disease (CHD) than individuals who lead sedentary lifestyles. When more “fit” individuals do develop CHD, it is usually much less severe and tends to show up later in life. Regular exercise has also shown benefits in preventing other chronic diseases like type II diabetes, osteoporosis, and colon cancer. Additionally, it has been shown to be beneficial in reducing body weight, reducing blood pressure, reducing LDL and raising HDL cholesterol, increasing insulin sensitivity, and increasing exercise tolerance. So what kinds of recommendations can we make for our patients? A report from the Surgeon General recommends moderate activity with a daily accumulated duration of 30 minutes on most days per week (preferably every day). Moderate activity is anything that is of roughly equal intensity to brisk (3-4 miles per hour) walking. Not all patients will be able to this, but a recommendation of any increase in physical activity will be helpful in the long term. It may be easier to motivate patients to increase their activity level by recommending exercises that the patient will enjoy doing, such as biking, gardening, or pick-up games with friends. Be sure to stress that exercise should be increased gradually as tolerated, not abruptly. Other great ways to increase physical activity in daily tasks are listed below.

- Take the stairs instead of using an elevator or escalator
- Park your car at the far end of the parking lot
- For those that ride the bus or subway, get off one stop early and walk the rest of the way
- Spend a few minutes of a lunch break taking a walk
- Housework and yard work are great ways to get exercise and get things done at the same time
- Walk your dog daily; it will benefit both of you
- Set time aside, such as after dinner, for a family walk

2) Weight loss – The effects of weight loss on reduction of cardiovascular risk factors has been studied, and weight loss has been shown to significantly reduce preexisting risk factors. Some researchers will correlate this risk reduction with reductions in waist circumference instead of actual weight reduction. Whichever the case, slow and steady reductions are recommended. Most experts recommend weight loss at a rate of ½ to 2 pounds per week, depending on starting weight. Fad diets often rob the body of important nutrients, and diet pills and other “quick fixes” have very short-lived effects. Appropriate weight loss recommendations should be for gradual loss with some permanent changes in lifestyle habits that will yield life-long benefits.

3) Diet – Diet has a direct impact on the development of atherosclerosis as well as blood cholesterol, body weight, blood pressure, and blood glucose. Making healthy diet choices can enormously impact the cardiovascular health of your patients. The theme of “slow and steady” applies here too, as many patients will not stick to major long-term dietary changes all at once. Try to advocate working in very small changes in diet and gradually achieve the heart healthy diet that your patient is comfortable with. Here are some heart-healthy recommendations:

- Limit unhealthy fats and cholesterol
 - saturated fat: < 7% of total daily calories
 - whole milk, ice cream, whole-milk cheeses, butter, lards and meats
 - trans fat: < 1% of total daily calories
 - cookies, crackers, cakes, french fries, fried onion rings, donuts
 - cholesterol: < 300mg/day for most
 - meats (esp. organ meats), egg yolks, dairy products, fish, and poultry
- Choose monounsaturated fats instead (olive and canola oil)
- Choose low-fat protein sources
 - low-fat or fat-free dairy products (yogurt, cheese, skim or low-fat 1% milk)
 - egg whites or egg substitutes
 - fish (especially cold water fish like salmon)
 - skinless poultry
 - legumes
 - soybean and soy products
 - lean ground meats
- Eat more fresh and frozen fruits and vegetables
- Eat more whole grains
 - whole grain bread
 - high fiber cereal
 - oatmeal
- Reduce salt intake (< 2,300mg/day for most adults)
- Eat moderate portions of food

Simple changes that can be safely recommended to most patients are increasing the intake of foods high in fiber, low in fat, and high in nutrient value. There are some populations that you need to be careful about making recommendations to, such as young children (< 2 years of age) and renal failure or inflammatory bowel disease patients, as they should be following special recommendations. *Be sure to find out your patients' underlying disease states before giving any advice.*

4) STOP smoking – smoking has been extensively tied to many health conditions, including cardiovascular disease. It is estimated that as many as 30% of all CHD deaths in the U.S. are tied to cigarette smoking. Smoking is the biggest contributor to premature morbidity and mortality in the U.S. The message here is simple: encourage your patients to stop smoking. It is never too late to quit. There are a variety of both prescription and OTC products available to help smokers quit, and there are numerous smoking cessation programs available for support (for a more extensive discussion of stop smoking aids, refer to last month's issue). With both a health and financial benefit to quitting smoking, there is no excuse not to encourage your patients to kick the habit.

As the most accessible health care resource, we as pharmacists can have a

large impact on the cardiovascular health of our patients. So try and take some time out in honor of American Heart Awareness Month and have a heart-to-heart with your patients!

References: Information obtained from a variety of sources, including articles from the CDC, American Heart Association (AHA), Americanheart.org, Mayo Clinic, Franklin Institute, Mamashealth.com, Weight-control Information Network, and International Journal of Obesity

ANNOUNCEMENTS

The Cardiovascular Benefits of Omega-6 Fatty Acids

According to the American Heart Association (AHA), omega-6 fatty acids may play a beneficial role in a heart-healthy diet. Nuts, seeds, and vegetable oil are rich sources of omega-6. It is recommended that at least 5-10% of an individual's total calorie intake should come from these fatty acids. More specifically, the recommended daily dose of omega-6 ranges from 12-22 g/day, depending on a person's age and level of physical activity. Because our bodies are unable to produce these essential fats, we must ingest them through our food or supplements, usually in the form of linoleic acid. Most Americans are able to get more than adequate amounts through their usual diet, such as through their intake of cooking oils and salad dressings.

Omega-6 is a polyunsaturated fatty acid as is omega-3, which is found in fatty fish like tuna and salmon. These fatty acids are essential to the body's growth and development, as well as brain function. They are necessary for skin and hair growth, bone health, metabolism, and reproduction. Additionally, many health benefits have been associated with the appropriate intake of omega-6, one of which is improvement in cardiovascular health. For example, studies have demonstrated a decrease in the risk of heart disease among individuals with increased intake of omega-6. This may be due to the fact that cholesterol levels have been shown to fall when saturated fats in a diet are replaced with omega-6 fatty acids. Similarly, it has been shown that patients with cardiovascular disease had lower levels of omega-6 in their body than healthy individuals.

Deficiencies in omega-6 can result in symptoms of fatigue and dermatitis, increased risk of cardiovascular disease, and a decrease in growth and immune function. Though, as mentioned earlier, lack of omega-6 fatty acids is extremely rare in the U.S. and other western countries because their diets are rich in both omega-6 and omega-3 fatty acids. In fact, the average American diet provides more than ten times the amount of omega-6 fatty acids necessary. An excess amount of omega-6, especially in relation to omega-3, can also negatively impact our health by contributing to the long term development of diseases such as heart disease, cancer, and arthritis. A healthy diet should consist of only two to four times more omega-6 than omega-3.

Dietary supplements of omega-6 fatty acids are available in the form of oils that contain linoleic and/or gamma-linolenic acid. Example supplements are black currant and evening primrose oil. Reported uses of omega-6 supplementation include treatments for atopic dermatitis, attention-deficit hyperactivity disorder, blood pressure control, cancer, immune enhancement, menopausal hot flashes, migraine, osteoporosis, premenstrual syndrome, pruritis, rheumatoid arthritis, and ulcerative colitis.

Some theoretical drug interactions with omega-6 supplements exist, which include anticoagulant medications, aspirin, NSAIDs, antiplatelet agents, ceftazidime, chemotherapy, cyclosporine, and phenothiazines. Patients interested in omega-6 supplementation should be reminded to discuss this with their health care provider before initiating supplement therapy. It is also important to stress a well-balanced diet that meets all the nutritional needs of the body through a healthy diet.

EVENTS

APhA 2010 Annual Meeting

It's that time of year again! The APhA Annual Meeting is just around the corner, taking place over the weekend of March 12th–15th. This four-day event, set in Washington D.C. at the Walter E. Washington Convention Center, summons leaders from all different pharmacy practice settings, including retail, independent, hospital, federal, and more, exhibiting more than 80 core programs. The meeting brings pharmacy professionals together, giving them the chance to share knowledge and ideas that will influence the way that pharmacy is practiced. The program will also highlight emerging trends and best pharmacy practices. Keynote speakers include Secretary of Health and Human Services Kathleen Sebelius and Alan E. Guttmacher, MD, Acting Director of the National Institute of Child Health and Human Development and Former Acting Director of the National Human Genome Research Institute. Registration for the 2010 APhA Annual Meeting is still open. If you are planning to attend, be sure to stop by our booth, booth #553, and say hello!

References: Information obtained from www.aphameeting.org.

PHARMACY CAMPUS EVENTS

SUPERVALU is dedicated to supporting the Colleges of Pharmacy and our Interns, please visit with us during these fall recruitment events.



Patients

Opportunity

Passion