



FROM THE HEART

St Charles County
Mended Hearts
Newsletter
Chapter 369

www.MendedHeartsStCharles.org

Issue No.40

Summer 2020 Newsletter – July, Aug, Sept

Welcome to Mended Hearts, Chapter 369! This chapter became official on August 10th 2010. Mended Hearts began in 1951 in Boston and has been providing support to heart patients and their families for 66 years with the theme that there is life with heart disease. There are over 230 chapters nationwide.

President – Larry Mantle
Vice President – Vacant
Treasurer - Charlotte Mantle
Secretary – Marla Fix
Visiting Chairperson – Neal Fix
Facilitators - Susan Dreckshage RN (BJC), (SSM)
Newsletter Editor –Bill Fix
Membership – Neal and Marla Fix

Contact Information

Interested in finding out more information about Chapter 369? Contact Neal Fix @ 636-947-8730.

Message to Recent Heart Patients

We hope you received some comfort and encouragement from our Mended Hearts visitors during your hospital stay. As you become active again, we invite you, your family and friends to attend our meeting as guests. We invite speakers that should interest heart patients and their families. We hope that you will become a member of our organization. Then you, too, can join in sharing the real meaning of our motto. "It's great to be alive"- and to help others.

Summer Birthdays

Nina Harris 8/14, Julie Hillman 7/11, Dennis Schleeper 7/10.

Summer Heart Event Anniversaries

Dean Combs 8/2017, Nina Harris 9/2010, John Hillman 7/2010, Larry Mantle 8/2008, Dennis Schleeper 7/2016.

Please consider becoming a visitor it is a rewarding experience, patients are encouraged by

your success in overcoming heart disease.

Upcoming Meetings

Mended Hearts Chapter 369 meets on the second Tuesday of the month alternating between BJC St. Peters and SSM St. Joseph's in St. Charles. Join us for a light meal before the meeting

Meetings at St Josephs will be at 5:00 pm. All other meetings will be at 6:30 pm.

The upcoming meetings are tentative depending on the restrictions in place because of the Covid 19 virus:

July 7th. Cancelled due to Covid-19 concerns.

Aug 11th @: St. Joseph's St. Charles. In the Doctors Dining Room on the ground floor. Subject: TBT. Tentative due to Covid 19 concerns We will Email if cancelled

Sept 9th. @Barnes-Jewish St Peters in the medical building #6 Jungermann Circle. We meet in the Conference room. Tentative due to Covid 19 concerns We will Email if cancelled

COVID-19 far more dangerous for patients with heart disease or diabetes, CDC says

Patients with an underlying health condition were six times more likely to end up in the hospital and 12 times more likely to die if they contracted COVID-19 than otherwise healthy people, a new federal study shows.

Less than 2% of previously healthy people died from the infection, compared to nearly 20%

with preexisting conditions, most often heart disease, diabetes, or lung disease, according to the new data, released Monday by the Centers for Disease Control and Prevention.

Overall, 14% of people who developed COVID-19 have been hospitalized, and 5% of those people died, according to the CDC study.

According to data from Johns Hopkins University, which is compiling COVID-19 infections and deaths worldwide, more than 2 million people have become infected with the virus in the United States. Nearly 116,000 Americans have died.

The elderly are at highest risk of dying from COVID-19

Age was a major factor in infection, hospitalization and death. The elderly — defined as people over 80 — were at highest risk of dying regardless of any underlying health conditions, according to the study.

The virus killed 50% of hospitalized elderly patients with underlying conditions and 30% of hospitalized elderly patients who were previously healthy, the study found. Age also affected incidence of disease, with people over 80 at nearly twice the risk of contracting the coronavirus, which causes COVID-19, than those just a decade younger.

A new study finds COVID-19 can cause heart injury, even in people without underlying heart issues. According to research from the Chinese Center for Disease Control and Prevention (CCDC), the death rate for COVID-19 patients with heart disease was 10.5 percent.

Experts say it's important for people with cardiovascular disease to be isolated from people with COVID-19 symptoms.

COVID-19, the disease caused by the new coronavirus SARS-CoV-2, has sickened hundreds of thousands and continues to kill large numbers of people worldwide.

Primarily considered life threatening for its effects on the lungs, a [new study](#) Trusted Source published this month in JAMA Cardiology finds COVID-19 can also cause heart injury, even in people without underlying heart issues. We know that the cardiac injury risk is there, no matter if you had prior heart disease or not. So prior heart disease is a risk factor for higher mortality in these patients. Cardiac injury also is a risk factor, but this can happen to people who are free of heart disease," Dr. Mohammad Madjid, MS, the study's lead author and an assistant professor of cardiology at McGovern Medical School at UTHealth, told Healthline.

Not just COVID-19 but also other viruses

According to Madjid, not only COVID-19 but other respiratory illnesses, like influenza and SARS, can worsen existing cardiovascular disease and cause new heart problems in otherwise healthy people.

He emphasizes that during most flu epidemics, more people die of heart problems than respiratory issues like pneumonia. He expects similar cardiac problems among severe COVID-19 cases. "In my experience, I realized that more people actually die of heart disease rather than pneumonia, so that [the study findings] was not a surprise for me — that from China, that myocardial injuries are very much related to death in these patients," Madjid said.

The effects of COVID-19 on the lungs are well-known. As the COVID-19 pandemic continues, more information is becoming available about the role the virus, called SARS-CoV-2, has on the heart. "Individuals with known cardiovascular disease are at an increased risk of more severe complications from respiratory viral illnesses, including the flu and COVID-19," says Dr. Leslie Cooper, chair of the Department of Cardiology at Mayo Clinic.

"We know that during severe SARS-CoV-2 infection, heart function may decrease. Sometimes this decrease is a consequence of the systemic inflammatory response to infection, and occasionally, in some people, because of direct viral infection in the heart."

2 main cardiac issues

According to Dr. Cooper, there are two dominant cardiac issues related to COVID-19: heart failure, when the heart muscle doesn't pump blood as well as it should, and arrhythmias, or abnormal heart rhythms, that can be related to the infection or to the effect of medications used to treat the virus.

Heart failure can develop due to a systemic inflammatory response to the infection, high lung pressures from lung damage, or occur from heart inflammation known as myocarditis.

"For many people who present with heart failure in the context of COVID-19 infection, we don't know if the heart failure is related to myocarditis or to a response to systemic inflammation from COVID-19," says Dr. Cooper.

For older patients, with existing coronary artery disease or hypertension, it is likely heart failure resulting from the increased demand placed on the heart and the body's already decreased cardiac reserve capacity, he says. In younger patients, it's likely primary myocarditis caused by the virus.

Medication concerns

There has been some debate as to whether medications used to support blood pressure may increase a person's risk for heart failure.

"It is unclear if medicines used to support blood pressure are actually leading to some of the deterioration in heart function," says Dr. Cooper. "But right now, there is no evidence that the commonly used medications for any cardiovascular disorders in the United States will put you at heightened risk of contracting COVID-19 or the consequences of infection."

Dr. Cooper advises people to continue their medications, unless their physician has directed them otherwise.

Long-term heart health issues

Since COVID-19 is new, there is little data available regarding long-term cardiovascular issues as a result of the virus. Research has already begun at Mayo Clinic, says Dr. Cooper.

"We need to determine the long-term effects of COVID-19 at both a population health level and individual level," says Dr. Cooper, adding funding from the American Heart Association and National Institutes of Health is spearheading research related to COVID-19's cardiovascular impact.

Staying heart-healthy

"We know this is a stressful time for everyone because of the economic and social impact of this disease, even if you don't have it yourself," says Dr. Cooper. "And that can put people at heightened risk for all sorts of stress-related illnesses."

For those with known heart issues – whether high blood pressure or other disease – stay focused on good heart health practices. "Taking care of yourself, being vigilant with hand hygiene, trying to maintain an exercise regimen if you had been before, eating well, are key to maintaining health," he says.

He adds that while we're also being instructed to avoid large group gatherings and maintain social distancing, build in time to stay connected – which will keep your heart emotionally healthy. "Maintaining social contact through the internet or through the telephone is really important so we don't lose contact and become depressed or otherwise isolated."

Be mindful of emergencies

"Shortness of breath is very common, and only a minority of people today will actually have COVID-19 infection who develop shortness of breath," says Dr. Cooper. "Now, as before, if people develop chest pain or shortness of breath, they should seek medical attention by calling their health care provider or, if it's severe, 911 for assistance."

Medical Humor

One afternoon, a man went to his doctor and told him that he hasn't been feeling well lately. The doctor examined the man, left the room, and came back with three different bottles of pills. The doctor said, "Take the green pill with a big glass of water when you wake up. Take the blue pill with a big glass of water after you eat lunch. Then just before going to bed, take the red pill with another big glass of water." Startled to be put on so much medicine, the man stammered, "Doc, exactly what is my problem?" The doctor replied, "You're not drinking enough water."

A college physics professor was explaining a particularly complicated concept to his class when a pre-med student interrupted him. "Why do we have to learn this stuff?" one young man blurted out. "To save lives," the professor responded before continuing the lecture. A few minutes later the student spoke up again. "So how does physics save lives?" The professor stared at the student for a long time without saying a word. Finally the professor continued. "Physics saves lives," he said, "because it keeps the idiots out of medical school."

A plumber attended to a leaking faucet at the neurosurgeon's house. After a two-minute job, he demanded \$150. The neurosurgeon exclaimed, "I don't even charge that amount and I am a brain surgeon." The plumber replied, "I agree. You are right! I too, didn't either, when I was a surgeon. That's why I switched to plumbing."

A patient complained to his doctor, "I've been to three other doctors and none of them agreed with your diagnosis." The doctor calmly replied, "Just wait until the autopsy, then they'll see that I was right."

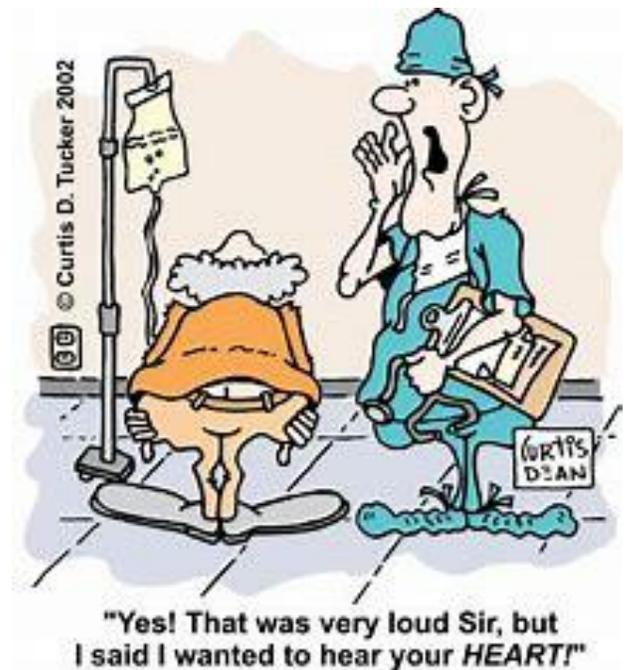
Doctor: Nurse, how is that little girl doing who swallowed ten quarters last night? Nurse: No change yet.

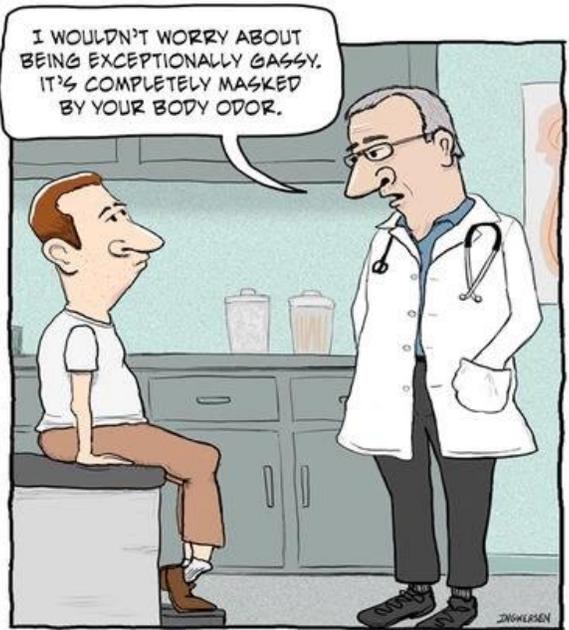
Patient: How much to have this tooth pulled?
Dentist: \$100.00. Patient: \$100.00 for just a few minutes work?
Dentist: Well, I can extract it very slowly if you like.

Due to a job transfer, Brian moved from his hometown to New York City. Being that he had a very comprehensive health history, he brought

along all of his medical paperwork, when it came time for his first check up with his new Doctor. After browsing through the extensive medical history, the Doctor stared at Brian for a few moments and said, "Well there's one thing I can say for certain, you sure look better in person than you do on paper!"

Brian, one of the worlds greatest hypochondriacs, bumped into his Dr. one day at the supermarket. "Doc!" Brian exclaimed, "I've been meaning to tell you, remember those voices I kept on hearing in my head? I haven't heard them in over a week!" "Wow! What wonderful news Brian! I'm so happy for you!" his Dr. exclaimed. "Wonderful?" asked a dismal looking Brian. "There's nothing wonderful about it. I'm afraid my hearing is starting to go now!"

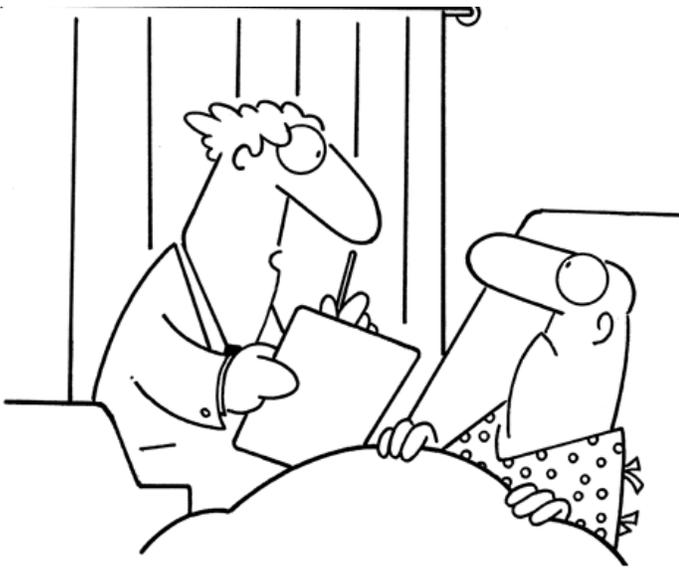




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**“First we insert a balloon to open up your artery.
Then we add helium and a string and bring
you upstairs to cheer up the sick kids.”**

Mended Hearts Prayer

We ask for your blessing, Lord,
we ask for strength
that we may pass it on to others...

We ask for faith
that we may give hope to others...

We ask for health
that we may encourage others...

We ask, Lord, for wisdom
that we may use all your gifts well.

Amen.