

## Heart Disease

### 1. Introduction (Page 170)

#### A. Statistics

[http://www.cdc.gov/dhdsp/data\\_statistics/fact\\_sheets/fs\\_heart\\_disease.htm](http://www.cdc.gov/dhdsp/data_statistics/fact_sheets/fs_heart_disease.htm)

### 2. Background

#### A. Endothelia and Clotting

<http://www.dnatube.com/video/29917/The-Process-of-Blood-Clotting>

#### B. Arteriosclerosis

##### i. General Characteristics

##### ii. Results

##### iii. Causes

##### iv. Symptoms

#### C. Atherosclerosis

<http://www.dnatube.com/video/29917/The-Process-of-Blood-Clotting>

##### i. Development

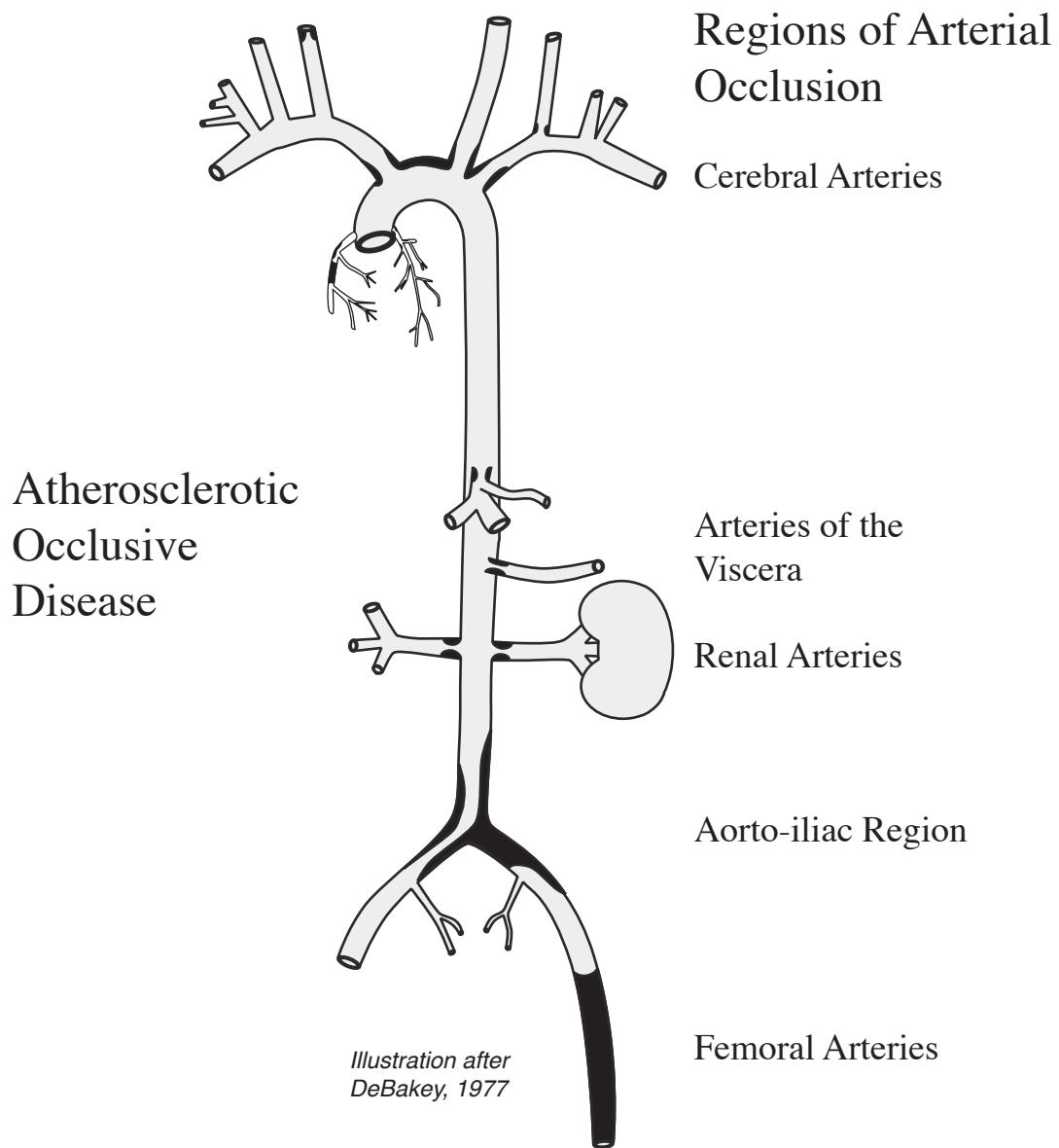
##### ii. Clot Formation

###### a. Thrombus

###### b. Embolus

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### D. Atherosclerotic Occlusive Disease



### E. Disease Outcomes

- i. Coronary Artery Disease or Myocardial Infarction
- ii. Stroke
- iii. Other Blood Supply Related Outcomes

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### 3. Development of Heart Disease

#### A. General Developmental Phases

- i. Initiation Phase
- ii. Progressive Phase

#### B. Detailed Steps of Development

- i. Damage to the endothelial lining
  - Characteristics
  - Progression
- ii. Focal accumulation of lipids in the inner lining (intima)
  - Ateromatous Plaques
- iii. Smooth Muscle Cell and Fibroblast proliferation
  - a. Continued Lesion Development: Fibrous Plaque
  - b. Foam Cells
    - Fibroblasts
  - c. Fibrous Plaque
    - “Hardening of the Arteries”
  - d. Dangers

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iv. Cell death and injury

v. Formation of necrotic lipid rich core

a. Cholesterol Core

b. Fibrous Cap

C. Conditions and Secondary Diseases/Symptoms

i. Angina Pectoris

ii. Myocardial Infarction

iii. Stroke

iv. Thrombus → Embolus

4. Physiology and the Lipid Profile

A. See Handout - HDL and LDL Hand out

B. Relative Risk Factor Statistics

i. Cholesterol: >200 mg/dl

ii. LDL: >130 mg/dl – 160 mg/dl

iii. HDL: <35 mg/dl

iv. Ratio of Total Cholesterol to HDL: >4:1

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### 5. Symptoms of a “Heart Attack”

- Myocardial Infarction
- Coronary Thrombus

### 6. Risk Factors

#### A. Genetic

#### B. Lifestyle

i. Smoking

ii. Hypertension

a. Normal Blood Pressure:

120 mm Hg (Systolic) / 80 mm Hg (Diastolic)

b. Hypertension:

> 140 mm Hg (Systolic) / > 90 mm Hg (Diastolic)

#### C. Risk Factor Statistics (again)

i. Cholesterol: <200 mg/dl

ii. LDL: <100 mg/dl – 129 mg/dl

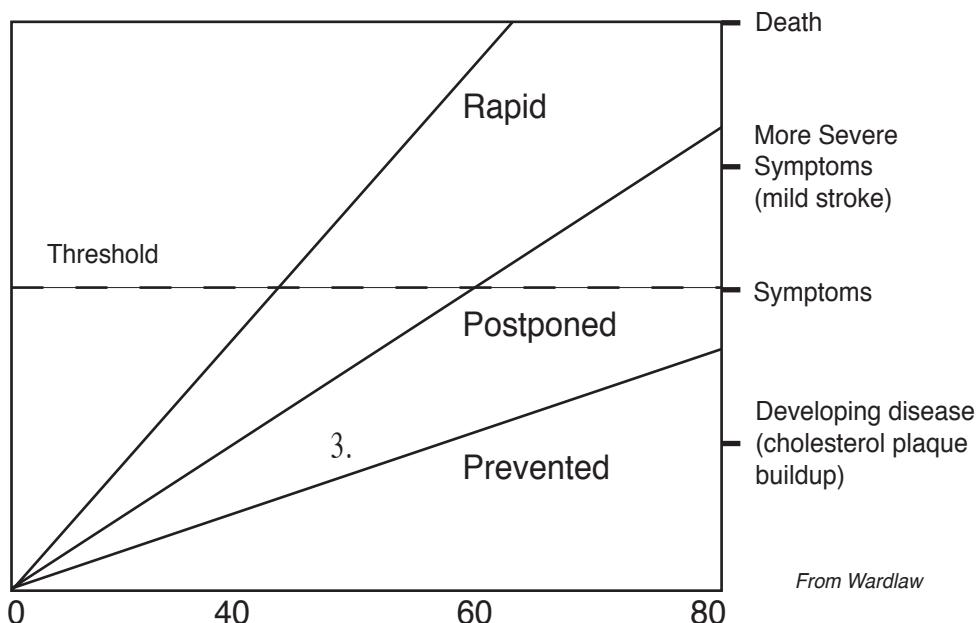
iii. HDL: >60 mg/dl

iv. Ratio of Total Cholesterol to HDL: >4:1

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### 7. Prevention

#### A. Compression of Morbidity

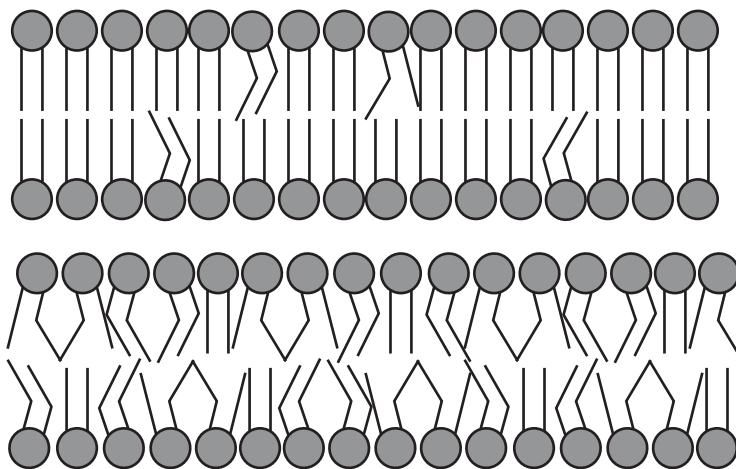
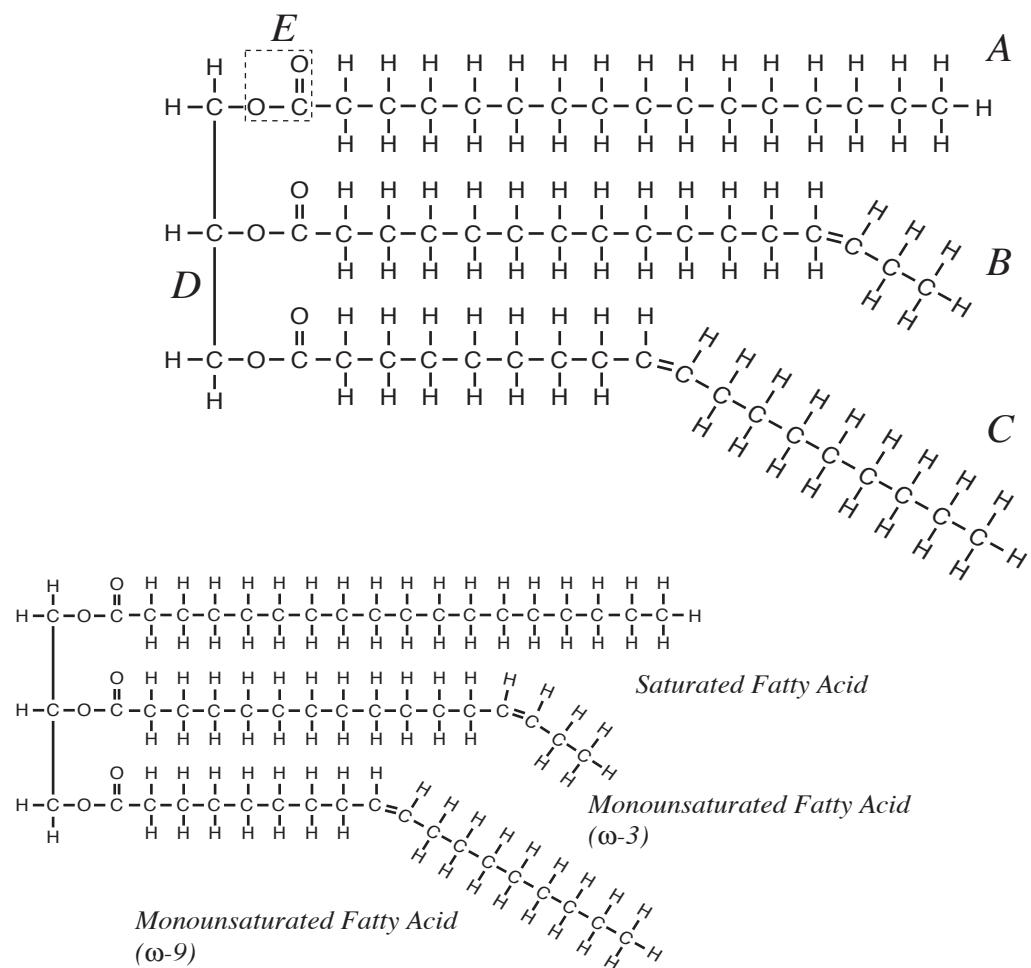


#### B. Actions: Start Early

##### i. Dietary

###### a. Reduction of Saturated Fatty Acid Intake

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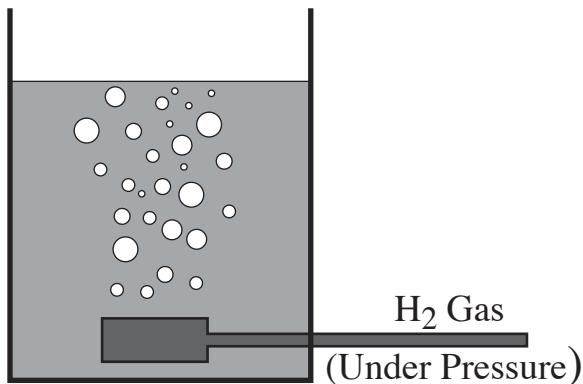


Hypothetical Cell Membrane with substantial *saturated* fatty acids

Hypothetical Cell Membrane with substantial *unsaturated* fatty acids

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### b. Reduction of Trans Fatty Acids



- c. Increase Monounsaturated (and Polyunsaturated) Fatty Acids
- d. Lower Triglycerides
- e. Raise HDL
  - Physical Activity
- f. Dietary Fiber

## 8. Treatment and Therapy

### A. Primary Prevention

- i. Life Style
  - a. Exercise
  - b. Diet

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- ii. Medication
  - a. Statins
  - b. Bile Acid Sequestrants
  - c. Triglyceride Reduction
  - e. Estrogen Replacement
  - f. Virtamin E