Back To Health and Living SDC News Letter

DATE: February 20, 06, Letter 66

WEEKLY MEETING BHLC: ST MARK'S LUTHERAN CHURCH The Church is located at the corner of Route 19 South & Route 98 (Davisson Run Road) Next to the United Hospital Center. (Every Thursday 5:00 pm)

EDITORIAL: In this newsletter we have provided general notes from the 3rd annual SDC meeting held 10/28/2005. These are general notes and not exact quotes, please forgive any mistakes.

THIRD ANNUAL SELF DIRECTED COMMUNITY MEETING NOTES 10-28-2005

This Annual Meeting Was Dedicated To The Memory of Mr. Joe Capozzi from UHC Cohort I.

The meeting was started with a Welcome speech from Vicki D'Amico (Cohort 1 SDC member), then introduction of our Clarksburg SDC President Wesley Miller. Wes was recently featured in an article in the Forbs Magazine. Vicki gave recognition to the UHC staff for the program. Each attendee stood and introduced them selves to the group.

We had attendance from Morgantown, Martinsburg, Pittsburgh & New Castle, PA. Rochester NY, Clarksburg, and High Mark BlueCross BlueShield.

Wes Miller talked about the camaraderie of the Ornish Communities. And explained some of the miracles he has received from the Ornish Program.

<u> Glarksburg WV</u>

Toni Marascio (Program director at UHC) gave compliments to her staff and how the Ornish program has helped her. UHC has 135 people to complete the program and 48 to complete the Ornish Advantage program.

Marlene Janco (High Mark BlueCross Blue Shield) Complimented the comentment of each Cohort Participant. The commitment of the present groups gives support to help provide information to other insurance companies so many others will have the opportunity to go through the program. She emphasized that each person in the room was a pioneer in establishing the program. She discussed present meetings with the Upper Ohio Valley medical Insurance Group to support the program. West Virginia was the foundation for the Pennsylvania program. Now 17 hospitals in PA have the program because of the success of the program in West Virginia. She discussed a nursing program that a nurse on the cardiac floor would inform the patients about the Ornish program.

Jennie Wilkins (UHC Dietician) Provided some excellent guidelines of the diet and any changes to the diet. SALAD DRESSINGS – Must be 0 fat, if olive oil, or butter milk is in the ingredients list, then we cannot have it. EGG SUBSTITUTE – ½ cup = 1 protein, now ½ cup = 1 protein. COOKED BEANS – ½ cup = 1 protein now 1/3 cup = 1 protein. ZERO FAT MAYO - is acceptable. Nayonnaise is the best choice. Look for hydrogenated on the ingredients list, it is there we cannot have it. FAT FREE

READY WHIP - is now acceptable. Cool whip 0 fat is not acceptable. TUCCINO flavored coffee and WONDER COCO is acceptable. You can also use BUTTER NUT flavor. BUTTER - we can use I cannot believe it's not butter, Promise ultra, Smart Beat. (All must be fat free, always look at the ingredients list because the ingredients can change). The new WHITE WHEAT BREAD is being looked at and appears to be acceptable. Remember anything above 3 grams of fat is not acceptable. RANCH LIQUID FAT FREE DRESSING - is not acceptable it contains butter milk. The powder fat free ranch dressings are acceptable. NUTS - are not acceptable because we are reversing heart disease. CAFFEINE - is not acceptable because it interferes with stress management. Other changes are listed below as a hand out from 2004 changes.

FROM: Ornish Nutrition Team 2004 As food manufacturers continue to make advancements in fat free food products and ingredient content, Dr. Dean Ornish has found it necessary to refine the label and food product recommendations for the Program.

These updates apply to food labels and certain food products that fall into the following areas:

Fat free food products (foods with 0 grams of fat per serving)
Fat free dairy products
Caffeine free products

These updates will help to ensure that our participants have access to a variety of food products, which will help to promote long-term adherence to the reversal eating plan.

All other nutrition guidelines remain the same. As always, please call your dietitian with any questions.

I. Packaged Fat Free Food Products with Added Oil

2004 Updated "Fat Free" **Food Label Guideline**

All fat free foods (foods with 0 grams of fat per serving) that contain ACCEPTABLE fats or oils can now be included in the reversal eating style in moderation, regardless of where the acceptable added fats or oils fall in the ingredient list. Servings of any foods with trace amounts of added oils are still limited to 0-3 servings per day. By following this serving limit, you will continue to maintain an eating style that is 10% fat.

This update applies only to fat free food products (foods with 0 grams of fat per serving). Other packaged foods (food with 1 to 3 grams of fat per serving) that contain added fats or oils need to have the acceptable oil listed at or near the end of the ingredient list. As a reminder, any Ornish friendly food with added oil should be limited to no more than 3 servings per day.

Acceptable oils that can be found in <u>fat</u> <u>free</u> packaged food products:

canola oil, corn oil, lecithin
mono and diglycerides, nut oils
nuts and seeds, olive oil
peanut oil, safflower oil
sesame oil, soybean oil, sunflower oil

Unacceptable oils that cannot be found in packaged food items:

beef and chicken fat, butter

coconut oil, cream*, egg yolks*

hydrogenated oils, lard

low fat* and whole milk products*

margarine, mayonnaise

palm and palm kernel oil

partially hydrogenated oils, shortening

^{*} These particular ingredients may be present in certain fat free dairy products

Promise Ultra fat free spread and I Can't Believe It's Not Butter fat free spread, are examples of foods that fit the revised nutrition guidelines. They contain acceptable oils in their ingredient lists and both contain 0 grams of fat per serving.

I Can't Believe It's Not Butter spray and Coffee-Mate fat free French Vanilla Non-Dairy Creamer, are examples of foods that do not fit the revised guidelines. They contain unacceptable oils, butter and partially hydrogenated oils.

Note: Fat free toppings such as fat free Cool-Whip and fat free Reddi-Whip still do not fit the reversal nutrition guidelines because they contain hydrogenated oils or other unacceptable fats such as cream. (Changed for 2006)

II. Packaged Fat Free Dairy Products:

Over the past year, many fat free dairy products that used to fit the nutrition guidelines now contain trivial amounts of saturated fat in the ingredient list. Examples of these products include; fat free sour cream, fat free cream cheese, fat free cheese products and fat free cream based dressings.

2004 Updated Fat Free Dairy Guideline:

All "fat free" dairy products are now acceptable, regardless of the type of fat added. All fat free dairy products are still limited to no more that 2 servings per day. Due to the trivial amounts of these added fats and the restriction of no more than 2 servings per day, overall fat consumption is minimal and still falls within the reversal nutrition guidelines.

Examples of fat free dairy products that fit the guidelines include: fat free cheese slices, fat free shredded cheese, fat free cream cheese, fat free sour cream, fat free yogurt, fat free cottage cheese, fat free mayonnaise and fat free milk.

III. Caffeine Free Products 2004 Updated Caffeine Guideline:

Any caffeine free product is now acceptable, not just naturally caffeine free products. Examples include products such as caffeine free Diet Coke and caffeine free Diet Pepsi. Decaffeinated coffees and teas continue to be excluded, including beverages that have been naturally decaffeinated.

For those chocolate cravings - a new product called **Wondercocoa** made by Wonderslim is fat free and 99.7% caffeine free. This product can be used as a chocolate substitute and is now approved for use in moderation. If interested in this product, please refer to the following ordering and contact information:

Erin Hunt (Exercise Physiologist UHC) discussed the importance of strength training. Always check with you doctor. It is important to start with warm stretches. Start with a short work out. 1-3 lbs weights for women and 3-8 lbs for men. Always alternate days so your body can rest. Below is the handout with important benefits from strength training.

Sticking With Strength Training

Erin Hunt, M.S. EXPH
Exercise Physiologist, United Hospital
Center—The Health Connection

Remember why you started strength training?

Benefits of a regular strengthening program:

- □ Increase bone density
- ☐ Improve cholesterol, especially triglycerides
- □ Increase metabolism
- □ Decrease resting blood pressure
- ☐ Increase ability to perform daily tasks

Getting Started

- □ Schedule an exercise appointment with yourself
- □ Short workouts—10-20 minutes
- □ Find a partner
- Document progress

Strength training Safely

- ☐ Talk to physician before starting a new program
- □ Always warm up before
- □ RPE scale (11-14, on the 6-20 scale)
- ☐ Give 1 day of rest between sessions
- □ Avoid holding your breath
- □ Start with light weight:8-15 reps, 1 set for each body part

Sticking with your program

- □ Keep exercise part of your routine
- ☐ Try new activities to avoid boredom
- □ Reward yourself when reaching goals

Setting realistic goals

□ What are my goals?

What time frame can I expect to achieve these goals?

Beth Carlyle, (RN, Case Manager, UHC) discussed Nutrition supplement from the hand out below.

NUTRITION SUPPLEMENT RECOMMENDATIONS

Beth Carlyle, RN

Case Manager, United Hospital Center—
The Health Connection

RECOMMENDED

Multivitamin with Minerals 1 per day, with vitamin B12 (2.4 micrograms/day), without iron (unless woman of childbearing age or prescribed by your doctor), providing 100% RDA.

Flaxseed

Women 1 gram per day in capsule form or 1 teaspoon freshly ground flaxseed

Men Not recommended

Fish Oil

Women 2 grams per day in capsule form Men 3 grams per day in capsule form *Fish Oil Supplements should **not** contain cholesterol.

OPTIONAL

(Choose food sources first for these nutrients)

Vitamin C 1-3 grams per day

Folic Acid 400-1000 mcg per day

Selenium 100-200 mcg per day

UPDATED RECOMMENDATIONS

Vitamin E No more than 150 IU per day from supplements (Check with doctor if using statin medication)

Dan Webster (Clarksburg SDC) Dan talked on travel and challenges of vacations and complying with the program. One thing is to ask the restaurants to cook the way we need our meals prepared, I have had good success with this approach. I take my stress management CD with me. One vacation at the beach it was 95 degrees and I went inside and enjoyed an hour of stress management and I was completely refreshed. When traveling take your lifestyle changes with you, take your tennis shoes, yoga mat, dumb bells, be prepared. Take you good habits and tools with you.

Larry Snyder (Clarksburg SDC) Hunting – At hunting camp everyone wants their steaks. I fix my food and my buddies want to try it and they love it. In the tree stand I do breathing exercises. During the evening I would also do stretches and my buddies would join in and say this feels good. Also during golf outings on hot days doing breathing exercises would help and my friends would want to know what I am doing. And they would try it. I see some of my friends that I have not seen in a year and I have went from 247 lbs down to 187 lbs and they want to know what I have done. Each of us is an example for others. We have to preplan outings. Tea bags in our pockets, I call ahead and talk to the chef and they are very helpful. I use the military IAO, Improvise, Adapt, Overcome.

Elisabeth Connor (RYT UHC Stress Management Specialist) Breath and sigh breath out before speaking. Maintain life style change you have to make stress management a priority. Keep it as part of your daily life. Stretching improves circulation, increases self esteem, increases productivity. Find the opportunity to slow down, this helps the body to heal. Deep rest is like a power nap. And you can always take a deep breath with a slow exhale. The handout below was discussed.

Stress Management – A Healthy Habit Elizabeth Connor, RYT

Stress Management Specialist connore@uhcwv.org

Strategies for Maintaining Lifestyle Change

> Experience the Benefits - "Just Do It!"

Don't stress about being perfect, just aim for an earnest, daily effort.

➤ Meditate on the Consequences – "Cause and Effect!"

Muscular Relaxation –
Skeletal Alignment –
Improved Circulation Healthy Heart (organs,
glands, and nerves) – Mental
Clarity – Better
Concentration and Wellbeing –
Increased Self-esteem and
Productivity.

- Visualize your Highest Potential -"I practice Stress Management!" Remember: A good idea becomes a good action. Action becomes habit, and habits shape our health and character.
- ➤ Rest and Heal "Take time to take care of yourself!"

Deep relaxation is a daily opportunity to slow down and encourage healing.

Create Reminders – "Breathe Deep!"

Use stickers, post signs, design a new screensaver.

Charlotte Swiger (Group Support Facilitator UHC) Just starting at UHC and my short time with the Ornish program I am so impressed by the life changing journey. I am impressed that you have overcome so many challenges. I am starting to use the program myself. I wish a successful future to each and everyone with the Ornish life style change.

Ed Ehlers (From the Ornish Support Group in Rochester, New York) In 1987 I was diagnosed with heart disease. I read the Dean Ornish book for reversing heart disease. I signed up for one of his retreats, which I paid for from my pocket. That last meal before I left was a liverwurst sandwich. I knew I could never be a vegetarian. After the week retreat with excellent people. I said I think I can do it. So to learn I will try to teach. My wife does not do the diet. I went to Senior citizen meetings to teach, some were good and some were bad. I spoke at a vegetarian meeting which was good. Then I spoke at a Mended Hearts meeting and everyone was interested. They talked about starting a group and the chemistry was there and we grew to 250 people at one time. Ten years later we are still going with about 70 active participants. I feel a national group would be a dream and would like for us to pursue the idea. Our website is http://www.heartbeats4life.org/ . Dr. Colin Campbell gave a lecture and his book the China Study is excellent reading. It discusses the relationship between diet and the risk of developing disease; I would recommend it to everyone.

Dr. Dean Ornish Teleconference.

Congratulations to everyone attending, I want to talk about what you are doing not only for yourself but for others. We have been working hard to get reimbursement for the program. Past programs have had to

be shut down at other hospital because of reimbursement. You are lucky because High Mark BlueCross BlueShield was invisionary enough to see the benefits of the program. We just completed working with Medicare January 25 with a 17 person review board. Data was reviewed from 2000 people including your data. The study from Mutual of Omaha that saved 30,000 dollars per patient. High Mark cut their cost in half. We are working with Senators to influence Medicare. Long term out comes provides the proof of less angeplasticies and less cardiac events. This is why what you are doing is so important. A study 10 months ago with 30,000 people in 11 continents proved that changing life style can prevent heart disease in 95% of the people. Medicare spends tens of millions of dollars for angioplasty, which does not cure the problem, and life style change reverses the process. We are prepared to change that.

We are working with major CEO's of food companies, McDonalds, Gader Aid, Fruit-O-Lay, and others to make healthy foods. McDonalds sold 800 million Fruit & Walnut salads last year – that replaced a lot of cheeseburgers. Also the addition of baked chips. Working with McDonalds and the Bill Clinton Foundation to educate people on eating healthy. And how to change Global Health, the Asian diet is the type of diet that can reverse heart disease, but this generation in Asia is showing an increase in heart disease because of their change in diet.

Stay with the program for yourself and many others because we have a long term grant to study how well people adhere to the program and the outcomes. What you are doing is making a difference in lots and lots of people. I would encourage you to continue what you are doing. We are here to grow in health and grow in love.

Questions:

1. How many mg's of epa and dha should we take each day? 3 gram per day

- (1 gram dha epa) Fish oil from Nordicnatural.com has less taste and odorless. It is proven that fish oil will reduce heart disease, and has many other benefits.
- 2. Have you read the book The China Study which recommends no milk and what do you think? I do not think the diet is strict enough, I feel Soy milk should be used because of its benefits.
- 3. Should you give fat free Soy milk to a child? I think children need Fat in their diet. Kids need fat because they are growing, but a healthy diet is important to prevent childhood obesity as they grow.
- 4. What is your opinion about the amount of cholesterol in yogurt? I am more concerned about the amount of sugar in yogurt. For heart disease reversal we need less than 5-10 mg of cholesterol per day. It depends on your goal to reverse heart disease or a maintenance program. I have a new book coming out in a year that looks at maintenance vs. reversal.
- 5. Pomagranet is rich in anti oxidants, how much should we have per day? A study published last month in the American Journal of Cardiology says that pomegranate is rich in Flavonoids, Polyphenols, probably one eight ounce glass per day.
- 6. When cooking with fat free Pam how much should we use? The principal is to spray a light coating to stop sticking. If you spray to much you are defeating the purpose and adding fat to your diet.

Dr. Ornish discussed his appearance on the Oprah show and we could get a tape of the show on line.

Dr. Ornish – I want to say how proud of you I am, and how important not only for you but millions and millions of other people that you stay on the program. My heart felt appreciation for what you are doing. You inspire me and many other people. Thank you.

Elizabeth Quintana – (Dietitian at WVU Morgantown) Discussed the Morgantown SDC and the progress they have made over the last few years.

Roy Cline – (Morgantown SDC) Roy thanked the Morgantown SDC they were a major help to him with eating out. He now feels happy about is future with the program. The Morgantown SDC has there meetings on Wednesday. They are planning a mystery evening to get additional people to participate.

Questions – 1. Is there a program to educate doctors? Marlene Janco – WVU is doing a good job on educating the doctors and nurses. In the hospitals it is easy, but with doctors outside the hospital environment it is harder to do.

2. How people decide where they take the program? Marlene Janco — It depends on where the program is backed by the insurance company and if a hospital close to them is offering a program.

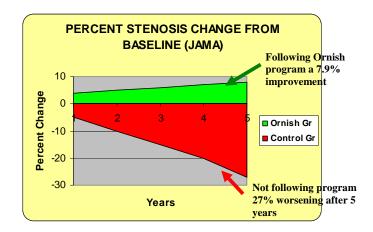
Medi Home Care – Tammy Russell (877-769-6334) Discussed their Glucometer programs and diabetic shoes that are covered under Medicare.

Larry Massey (Clarksburg SDC) Discussed the importance of staying on the program and placed emphases on the graph following the next paragraph and what happens after 1 year and 5 years adhering to the program.

From the JAMA 1999 #282— Patients following the Ornish life style change program, the average percent diameter stenosis at baseline decreases 1.75 absolute percentage points after one year (a 4.5% relative improvement) and by 3.1 absolute percentage points after 5 years (a 7.9% relative improvement). In contrast the average percent diameter stenosis in the control group increased by 2.3 percentage points after 1 ear (a 5.4% relative

worsening) and by 11.8 percentage points after 5 years (a 27.7% worsening) (P=.001 between) groups. In the control group (non-Ornish group) coronary arteriosclerosis continued to progress and more than twice as many cardiac events occurred.

STENOSIS = Diameter of the artery.



Dinner – To top off a great day we had dinner prepared by the Hospital Chef (Scott Hayes who donated his time for this meeting).

The menu below was excellent with the best part being great connection and communications with the other SDC members.

BUFFET MENU:

<u>Appetizer</u> – Assorted Fruit and Vegetable Trays, with Fat Free Dressing. Baked Lays Chips with Salsa.

Soup – Italian Wedding Sour (meatless)

<u>Salad</u> – Twelve Layer Salad with Fat Free Dressing.

<u>Entrees</u> – Spinach Lasagna, Spaghetti Primavera, Whole Wheat Rolls.

<u>Dessert</u> – Pineapple Angel Food Cake with Raspberry Topping.

<u>Beverage</u> – Herb Tea, Bottled Water, Tuccino.

Final Notes – A program book was given to each person attending. The book contained an outline of the meeting, a copy of the Clarksburg SDC bylaws and Modality adherence program. A copy of the

stress management CD was included with the booklet. If anyone needs a copy of the CD please contact me and I will send you one. lmassey@ma.rr.com. I would also like to thank Ed Elhers and Jeff Adams for making the long trip from Rochester, New York. They were an inspiration to everyone they talked with.

Satisfaction Survey – 17 survey sheets were turned in which is about 40% of the attendees. From the comments of the attendees the meeting was an overall success. Positives: 12 of 17 rated the meeting a 7 out of 7, and 3 or the 17 rated the meeting a 6 out of 7. From the comments received the majority of the people liked the talk with Dr. Ornish the best. We would really have liked to have had the video conference with Dr. Ornish, however technical difficulties stopped us this year. Another thing the people really liked were getting to share experiences and ideas with the other attendees and all the information they learned from the meeting. One negative comment was the temperature of the room was too cold and too hot. It is hard to adjust the temperature in a conference room and is normally cold; we would suggest wearing layered clothes to the next meeting.

We would like to thank everyone for attending and helping make this years meeting a success! As the SDC program grows we would also like for our attendance to grow so be sure to share your experience with the members of your SDC that could not attend. WE HOPE TO SEE YOU NEXT YEAR.

APPRECIATION:

We want to thank Dr. Dean Ornish and the people involved with bring the Ornish Program for Heart disease Reversal to West Virginia and Pennsylvania. Many thanks to Marlene Janco for her help and continuous support, Highmark BlueCross BlueShield and Lifestyle Advantage.

We want to thank the Staff of the Health Connection at United Hospital Center in Clarksburg, West Virginia. (Toni Marascio, Jennie Wilkins, Erin Hunt, Beth Carlyle, Elisabeth Connor, Charlotte Swiger and Dorothy Wick) We want to give special tanks to Frank Taylor for his help with starting our Self directed Community. Thanks to all the staff at United Hospital Center. Thanks to the Medical Director Dr. David Church, and his staff.

We want to thank Terri Merritt-Worden (PMRI) for her guidance in setting up our Self Directed Community.

We want to thank the ST MARKS'S LUTHERAN Church of Clarksburg for their support and letting us have our weekly meetings at the Church.

We want to thank our fellow participants and cohorts for their support, love, and friendship as we all battle heart disease.

And most of all we want to thank our Families and Friends for their support, with out them and God we would not be here today.

Quick Recipe - By Willie Mutschelknaus

For those who can have sugar this is excellent. We had a taste at our SDC meeting and it hit the spot.

ORNISH CHOCOLATE FUDGE:

4 cups Sugar
1 can carnation fat free milk
1/4 to 1/3 cup Wonder Coco
1 jar marshmallow cream
Cook (medium to High) until it forms a ball when dropped in cold water.
Add marshmallow cream and stir.
Let stand for a few minutes, then stir until it starts to set up, then pour into two pie plates.