

# Cardiovascular Disease and the African-American Patient



DeKalb Medical

This is the eighth article in a series focusing on cardiovascular disease presented by DeKalb Medical.

Cardiovascular disease has been the No. 1 cause of death in the U.S. for over 100 years. This holds true across racial and gender lines. However, the African-American community has a higher incidence of cardiovascular disease risk factors, such as high blood pressure, diabetes, tobacco abuse, sedentary lifestyle and obesity. These risk factors increase a person's chance for heart attacks, stroke, kidney failure and poor circulation in limbs (known as peripheral artery disease) and contribute to the development of atherosclerosis (a build up of plaque in the arteries), which prevents an adequate supply of oxygen rich blood and nutrients from reaching vital organs and limbs.

Every hour an African American dies from complications related to uncontrolled high blood pressure. Most of these deaths are attributed to heart attacks, strokes and kidney failure. Approximately 30 percent of African Americans have high blood pressure, and less than 25 percent of these individuals are controlled on medical therapy. Thirteen percent of African Americans have diabetes.

High cholesterol is another risk factor in the African-American community, which is also undertreated compared to Caucasian patients and is less often treated with appropriate cholesterol lowering drugs. Another significant risk factor is genetics. It is important for individuals to be aware of a history of cardiovascular disease in first degree relatives, such as parents and

siblings, which may put one at risk for heart disease and stroke, even if symptoms are not present.

Primary prevention is very important to address the epidemic of cardiovascular disease in the African-American community. Since risk factors are presenting earlier in life, it becomes important to screen some individuals during childhood and adolescent years, especially if they are obese or have first degree relatives who have had premature heart attack and strokes. Studies have shown the onset of high blood pressure, diabetes and hyperlipidemia in children aged younger than ten years old, which undoubtedly contributes to the higher rates of cardiovascular disease, as well as decreased life expectancy of African Americans. If these risk factors are identified early, then appropriate lifestyle changes and medications can be initiated.

It is very important to see a primary care physician at least yearly and have a full physical exam. I recommend all African Americans at least 20 years of age have blood pressure in both arms, fasting blood sugar and cholesterol levels measured yearly. If children are obese or if there is a family history of premature cardiovascular disease in first degree relatives, then this screening should be performed even earlier.

As patients become aware of risk factors and appropriate screening tests are performed, we can shorten the racial gap of cardiovascular disease. Stay informed and take an active role in becoming healthier. Adjust your lifestyle with a more healthy diet and



Ask The Doctor

By Anthony Dorsey, M.D.

Board Certified Cardiologist Atlanta Heart Specialists, LLC

increase exercise and aerobic activity. Medical therapy may also need to be initiated to ensure that optimal control of high blood pressure, blood sugar and cholesterol levels are maintained. The future health of the African American community will depend on how well we meet these requirements.

Source: American Lung Association

## Healthy Mashed Potatoes

Here's an old favorite that is tasty and good for you. Instead of using whole milk we used non-fat milk, which offers the same fluffy texture with fewer calories and less fat. Soft tub margarine is lower in saturated and trans fat than stick varieties. Just watch that portion size.



- 4 medium russet potatoes, quartered
- 1/2 cup hot skim milk
- 1 1/2 Tbsp. soft tub margarine
- Salt and pepper

In large saucepan, place potatoes with enough water to cover. Bring to boil. Reduce heat and simmer until potatoes are tender, about 25 minutes. Drain well. Transfer potatoes to bowl. Using an electric mixer or potato masher, mash potatoes, gradually adding hot milk and margarine until smooth and fluffy. Add salt and pepper, to taste. Serve immediately.

Source:

American Institute for Cancer Research