

Fayette Family Medicine

May, 2007

Fayette Family Medicine

Volume 1, Issue 5

Fayette Family Medicine

Dr. Andrea Skaggs

1780 Nicholasville Rd Ste 604

Lexington, KY 40503

859-276-5566

859-276-5562 (fax)

www.fayettefamilymed.com

Be the change

You want to see

In the world.

Updating Patient

Information:

Please notify our office of
any changes in...

current Phone numbers,

Addresses, or

Emergency contacts.

(We can't help you,

if we can't reach you.)

National Stroke Awareness Month

In 1989 National Stroke Association received the Presidential Proclamation recognizing May as National Stroke Awareness Month. The goal of this annual campaign is to raise public awareness about stroke risk factors, prevention, symptom recognition and acting fast to treat stroke. In addition, this is a time for remembering those who have survived a stroke and to let them know that we are here for them throughout their lifelong recovery journey.

STROKE SYMPTOMS
INCLUDE:

- Sudden numbness or weakness of face, arm or leg – especially on one side of the body.
- Sudden confusion, trouble speaking or

understanding.

- Sudden trouble seeing in one or both eyes.
- Sudden trouble walking, dizziness, loss of balance or coordination.
- Sudden severe headache with no known cause.

If you have experienced any of the symptoms you may have had a mini-stroke.

--Transient Ischemic Attack (TIA) or "Mini-stroke"--

A TIA is an event, sometimes called a mini-stroke, or stroke symptoms that always last less than 24 hours before disappearing. While TIAs generally do not cause permanent brain damage, they are a serious warning sign of stroke and should not be ignored.

If you think someone may be having a stroke, act F.A.S.T. and try this simple test:

Face-- Ask the person to smile. Does one side of the face droop?

Arms-- Ask the person to raise both arms. Does one arm drift downward?

Speech-- Ask the person to repeat a simple sentence. Are the words slurred? Can he/she repeat the sentence correctly?

Time-- If the person shows any of these symptoms, time is important. Call 911 or get to the hospital fast. Brain cells are dying.

Cocoa, not tea, Calms blood pressure, study says

Chocolate—that traditional antidote for broken hearts—now has another use. Foods rich in cocoa appear to reduce blood pressure, according to researchers at the University Hospital of Cologne in Germany.

Testing the Hypothesis that plant compounds known as polyphenols found in cocoa and tea, have a beneficial effect on blood pressure, researchers analyzed five studies in cocoa and five studies in tea published between 1966 and 2006.

The report, which appears in the

April issue of the Archives of Internal Medicine, found that chocolate lowered systolic blood pressure by about 4.7 points on average and diastolic pressure by about 2.8 points. In short, a healthful daily dose of chocolate could reduce blood pressure of 140/80 to about 135/77.

Curiously, tea did not have a similar effect, possibly because the composition of the polyphenols in tea is slightly different.

“It’s likely that the phenols specific to cocoa represent the active ingredients,” lead author and

pharmacologist Dr. Dirk Taubert said in an e-mail. “A possible candidate is the so-called procyanidins, which are a group of complex phenols.”

So a little chocolate a day may keep the doctor away?

“regular consumption of polyphenol-rich cocoa products like dark chocolate may be considered part of a blood pressure lowering diet, provided” —here it comes—“that there is no gain in total calorie intake,” he says.

There’s always a catch.

Prevention of Hypertension

With an estimated 50 million hypertensive people in the United States, hypertension remains a major public health problem and contributes significantly to cardiovascular morbidity and mortality. Modification of lifestyle behaviors has gained increasing attention as an important focus for both the prevention and treatment of hypertension. In the quest to prevent hypertension, patient education must focus on

maintaining optimal body weight, getting enough exercise, reducing excessive alcohol consumption, and adopting dietary patterns that increase fruit and vegetable intake and decrease fat.

Early detection of hypertension is imperative. The benefits of treating hypertension have been proven and treatment reduces the morbidity and mortality of cardiovascular disease. The sixth report of the Joint National

Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure recommends routine blood pressure monitoring at each healthcare encounter.

At-risk populations — such as patients with a positive family history for hypertension, African Americans, diabetic patients, the elderly, the obese, and pregnant women — warrant special informative attention.

**National
“No Tobacco”
Day
is May 31st,
2007**

It never hurts to try to quit smoking.

Up to 40% of Heart Attacks Involve Atypical Symptoms

Up to 40% of patients with acute myocardial infarction (MI) come to the ED with atypical presentations, including a normal or nondiagnostic electrocardiogram or with complete absence of chest pain.

Perhaps they may just be short of breath, weak, nauseated, and sweaty, which is very typical of MI in those with long-standing diabetes. Three to five percent of acute MIs are sent

home from the emergency department.

Anginal equivalents are most common in elderly patients, those with long-standing insulin-dependent diabetes, women, nonwhite patients, and those with no risk factors for heart attacks.



“What fits your busy schedule better, exercising one hour a day or being dead 24 hours a day?”

Copyright 2003 by Randy Glasbergen.
www.glasbergen.com