Dear Readers,

I am a nurse and proud to be a nurse. In every clinical setting, nurses use all their senses to detect minute changes in their patients’ conditions, early warning signs and minor deviations from the norm that can be precursors to a catastrophe. We intervene to prevent clinical disasters. Over the years of practice, we have developed an ability to “smell trouble”, to become almost functional paranoids.

Couldn’t we all use some of that paranoia?

We know the early warning signs of cardiovascular incidents; mild chest pain, uncomfortable squeezing or pressure in the center of the chest, pain or discomfort radiating to arms, jaw, neck or back, shortness of breath, and so on. We also know that women may complain of unusual tiredness or a lack of energy, lightheadedness, unexplained nausea, or a feeling of heart burn. But how often do we ignore these early warning signs? Why do we not recognise these mild symptoms as precursors to a massive coronary event?

That is why public education is a never ending mission. Events such as the National Heart Week/World Heart Day and Go Red For Women create awareness amongst different segments of Singaporeans. However, their impact reaches far beyond the awareness campaigns. It saves lives. And doing so, has a positive impact on the Singapore economy. This economic impact is not to be underestimated because with a minimal investment in education (mainly conducted by volunteers), we can keep the workforce productive and get those struck by an acute cardiac event back to work in the shortest possible time. This provides the Singapore Heart Foundation with a great ROI (Return on Investment).

Some of our members dedicate their entire life to this cause. Dr C Sivathasan (National Outstanding Clinician 2011) and Associate Professor Tan Huay Cheem (National Clinical Excellence Team Award 2011) received such a reward for outstanding achievements in the field of medicine, clinical research, education, training and mentorship. We congratulate them and thank them for their commitment and service to their patients, families and the community. You are an inspiration to many young Singaporeans, but above all, you make a difference in people’s lives.

Patrick Deroose

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Women and Coronary Heart Disease

“Y.A. is a healthy and active 68-year-old woman with no previous medical problems. She neither smoked nor drank alcohol and was still working. Recently, she found herself becoming more breathless and tired while climbing the stairs. One day, Y.A. developed sudden upper abdominal pain and was urgently admitted to the hospital. After having some tests done, Y.A. was found to have severe coronary artery disease and eventually underwent a successful coronary artery bypass grafting surgery.”

Heart disease is only for men...

Many women still think that heart disease only affects men. The truth is, cardiovascular disease is the leading cause of death in women. Although there has been a decline in coronary artery disease deaths in men in the last two decades, the number of coronary deaths in women remained stable or has increased. Women, in particular young women, have a worse outlook from heart attacks than their male counterparts. Puzzling differences have also emerged between men and women with cardiovascular disease, making it plain that women may exhibit less common symptoms and respond to treatment in a different way. Women may also experience a different kind of heart disease that affects heart muscle or the small blood vessels that supply the heart.

The good news about heart disease is that it can be prevented. And the more women understand about their unique risks and warning signs for heart disease, the more they can do to protect themselves.

What are the symptoms for heart disease? Are they the same for women?

Heart disease often has no symptoms, but there are some signs to watch out for. Chest discomfort, shortness of breath, dizziness, fatigue or irregular heart beats can all be symptoms of heart disease. For both men and women, the most common symptom of heart attack is chest pain or discomfort, described as an achy, tight or “heavy” feeling. However, women are more likely than men to experience other signs of heart attack. This includes shortness of breath, nausea, feeling faint, breaking out in a cold sweat or pain in their arms, back, neck, jaw or stomach. They may also have less common signs of a heart attack, such as heartburn, feeling tired, cough, or “heart flutters”. Women may sometimes discount these clues as they don’t “feel” like a heart attack. It is therefore important that these warning signs are not ignored and they should go and see their doctors right away.

Am I at risk of heart disease?

When it comes to cardiovascular disease, women should recognise these inherent risk factors:

- **Age** – Risk increases with age, especially after menopause.
- **Family** – Risk is higher if your direct family members develop heart disease before 55 years old for male, or 65 years old for female relatives.
- **Gender** – Women usually experience heart attacks a decade or so later in life than men, and are more likely to die from them.
- **Ethnicity** – In Singapore, ethnic differences in heart disease exist; with higher heart attack rates among Indians and higher risk of dying from heart attack among Malays.
With lifestyle modification or medications, women can lower and control these risk factors:

- **Smoking** – Smoking increases the risk of heart attack by two to three times and causes more plaque to form and become unstable.
- **Diabetes** – Diabetes doubles the risk of heart disease.
- **Cholesterol** – High levels of LDL (“bad”) cholesterol or low levels of HDL (“good”) cholesterol increase the risk of coronary disease.
- **Hypertension** – High blood pressure increases the risk of heart attack. The higher the blood pressure, the greater the risk.
- **Obesity** – Being overweight increases the levels of LDL cholesterol and the risk of hypertension and diabetes.
- **Inactivity** – Lack of exercise makes the above risk factors worse.

**How can I find out if I have heart disease?**

Women should consult their doctors for regular screenings to check for potential risk factors such as diabetes, abnormal cholesterol levels or high blood pressure. If appropriate, and for patients with symptoms, the following tests may be organised to further detect coronary artery disease:

- **Electrocardiogram**
  This examines the electrical activity of the heart and may detect previous or current heart attacks.

- **Cardiac stress test**
  If the doctor suspects underlying heart disease, a stress test may help detect signs that the heart doesn’t get enough blood supply because of inadequate blood flow. This may be an exercise electrocardiogram, ultrasound test or nuclear imaging test.

- **Computed Tomography (CT scan)**
  A CT scan of the blood vessels of the heart may detect hardening or blockages within the coronary arteries.

- **Coronary Angiogram**
  This is an x-ray test that uses a special dye and camera to look at blood flow in the arteries directly.

Patients who are diagnosed with heart disease will be recommended to take medication to relieve their symptoms and to reduce their risk of future heart attacks. Those with more severe disease may have to undergo treatment to “unblock” their arteries either by placing metal stents (“spring-like” devices that act as “scaffolding”) in their coronary arteries or undergo coronary artery bypass grafting surgery.

**So what should I do?**

Heart disease is preventable, and women should take action to reduce their risk of heart disease:

1. Exercise regularly.
2. Don’t smoke.
3. Eat healthily and maintain a normal weight.
4. Get your blood pressure and cholesterol levels checked and control diabetes well.
5. Follow your doctor’s advice and take your medication. Recognise that the treatment goals vary by individuals, and you should work with your doctor to develop a plan for healthy living.

Women can take heart that an increasing number of protective lifestyle factors have been shown to markedly decrease the rates and risk of cardiovascular disease for women in Singapore. For those who already suffer from cardiovascular disease, they can still lower their risk of heart disease by up to 80% by leading a healthy lifestyle. Hence by taking responsibility of one’s health, women can be powerful advocates for their own heart!
The referral letter read, “Dear cardiologist, please see this sixty-year-old lady for the problem of chest discomfort.” Certainly one of the most frequently encountered clinical problems in my General Cardiology clinic, and one of particular concern to me. This is because I have come to recognise the typical patient profile of the silent, long-suffering Asian woman in her mid 50’s to 60’s, who has spent her adult life so far worrying more for her family than herself, has grown-up children but is still busy caring for them and their children, has reached menopause uneventfully, and has not seen a doctor since childbirth.

Medical textbooks do not describe such profiles, but clinical experience has taught me to take such patients’ symptoms particularly seriously, since they themselves often do not take their own symptoms seriously.

This time was no different. I greeted her with my usual “Can you please tell me a bit more about your symptoms?”, only to be met with a response that can almost be described as embarrassment – feeling bad to ‘bother’ me, as if as a woman, she had no right to have symptoms of heart disease. After all, wasn’t that a man’s disease? Before she even started describing her chest pain, she was apologising for her symptoms and ‘discounting’ them with “Sorry doctor, perhaps it’s all in my head … maybe it’s just stress… I think it’s really nothing…”. What a vast difference from the young gentleman I had seen earlier, also for chest pain, who simply walked in and said, in effect, “Doc, I have chest pain now please fix it!”
As it turned out, after much probing and encouragement, the woman’s symptoms were far from trivial, and later investigations confirmed that she had undiagnosed risk factors for heart disease (high blood pressure and high cholesterol level) and significant blockages of her heart vessels (coronary artery disease) which required treatment. The man, on the other hand, had musculoskeletal chest pain and needed mild painkillers.

We women are a complex breed. We are not just men lacking the ‘spare parts’. There is ample scientific evidence to support the existence of sex-related differences in heart disease. Women are affected by heart disease an average of 10 years later than men, but their rates of heart disease do catch up to that of men, such that more women die of heart disease and stroke than any other cause, including cancer.

The mechanisms underlying heart disease in women differ from that in men, in that abnormal functioning of the inner lining of small vessels (endothelial dysfunction) predominates in women. Even the shapes of women’s versus men’s hearts are different in the presence of risk factors - women’s hearts tend to become small and stiff, while men’s hearts tend to become big and weak. As a result, heart failure is more likely to be of the ‘poorly relaxing type’ (diastolic heart failure) in women, whereas it is the ‘poorly pumping type’ (systolic heart failure) in men. Finally, the heart-mind connection is stronger in women than men. This is typified in the syndrome known as the ‘broken heart syndrome’ (apical ballooning syndrome or Takatsubo cardiomyopathy) which classically describes a woman who suffers a heart attack after receiving some emotionally stressful news. The heart attack is caused by huge neurohormonal surges from the emotional stress, rather than by sudden blockages of the heart arteries.

Singaporean women need to realise that heart disease and stroke are the top causes of death among us, that we are not protected from heart disease, and that we should feel validated to see a doctor if we experience symptoms of heart disease. It’s high time women take this message to heart, and do something about it.

A/Prof Carolyn Lam is the Programme Director for the Women’s Heart Health Clinic at the National University Heart Centre, Singapore. For more information, please visit www.nuhcs.com.sg or call 6772 2002.
Marathons and sudden cardiac death

A recent study published in the New England Journal of Medicine, studied the incidence of sudden cardiac arrest in long distance runners from 2000 to 2010. It was discovered that the incidence rate of such cardiac arrests were significantly higher in marathons, as compared to half marathons. However, out of 10.9 million runners in the study, only 59 suffered from sudden cardiac arrest during running. The overall rate of cardiac arrest during marathons was 1 per 100,000 runners. Hence, it was concluded that marathons and half marathons are associated with a low overall risk of sudden cardiac death.

Exercise may boost mood for some chronically ill

Exercising regularly can help boost the mood of people who are suffering from health problems like heart disease, cancer and back pain. This was discovered in a meta-analysis (analysis of many studies) that combed through 90 previous studies involving more than 10,000 people with health problems like cancer, heart disease, chronic obstructive pulmonary disorder (COPD), fibromyalgia, chronic pain or obesity. Scientists discovered that people who exercise, tend to feel depressive about 22 percent less than those who don’t. Matthew Herring from the University of Alabama at Birmingham, said, “The magnitude of the effect of exercise training on depressive symptoms among patients found in our review is small but significant.”

Vitamin D does not prevent heart attack or cancer

Researchers in a new study have discovered that taking Vitamin D does not appear to prevent heart attack or cancer. Earlier studies had shown that low levels of Vitamin D in the body appeared to be associated with a higher risk of dying from heart problems. Hence, scientists wanted to know if taking Vitamin D supplements would prevent heart disease. In this latest study, over 5,000 patients were allocated to various doses of Vitamin D and placebo. There appeared to be no difference in the subsequent rate of death, regardless of whether they took Vitamin D or not. Moreover, in several other randomised controlled trials, no link between higher levels of Vitamin D and protection against heart attacks or cancer was apparent.
Introducing MARIGOLD HL Milk with plant sterols.

Plant sterols have been shown to lower blood cholesterol. High blood cholesterol is a risk factor in the development of coronary heart disease.

Singapore’s No.1* pasteurised low fat milk is now available in a new range enriched with plant sterols which have been proven to lower blood cholesterol. With MARIGOLD HL Milk with plant sterols, you can enjoy the added benefit of plant sterols with the same delicious milk that’s high in calcium and protein but low in fat and lactose. Enjoy 2 glasses every day as part of your healthier heart-friendly diet today!

MARIGOLD HL Milk. The Perfect Balance of Highs and Lows.

*Based on Nielsen retail audit
“The super awesome dance moves!”
“The dance instructor is so professional!”
“It is cool, exciting and fun!”

This is what students of CHIJ Our Lady Queen of Peace have to say about the Hip Hop for Heart programme. Hip Hop for Heart is a new school initiative run by the Singapore Heart Foundation, which aims to encourage physical activity through a fun and interactive learning experience.

Students from CHIJ were taught the choreography to the song *Together*, which is from the soundtrack of the popular children’s movie, “High School Musical”. After only four short lessons, they were able to complete a full 2 minute dance routine and even put on an electrifying performance for their Children’s Day concert!

Out of 75 students surveyed:
- 58 said that they would continue to exercise on their own after the programme
- 56 wanted Hip Hop lessons as part of their physical education
- 49 would recommend Hip Hop to their family members and friends
- The lessons were given an overall rating of 4.2 out of 5

Competitive Hip Hop

With performing arts on the rise, Hip Hop has become a popular dance style among youngsters. Competitions such as Singapore Best Dance Crew, Danceworks, Street Bliss and so on are emerging in the performing arts scene. Following this trend, our Hip Hop for Heart trainers will be able to groom students and help them form a Hip Hop dance crew to perform competitively. Interested schools may contact SHF for a competition lesson plan in accordance to school requirements.

Some of the schools enrolled in our Hip Hop for Heart programme thus far include Naval Base Primary School, St Gabriel’s Primary School and First Toa Payoh Primary School.

Hip Hop Aerobics

Looking for an interesting workout for your students? Try Hip Hop Aerobics! Hip Hop Aerobics is a mass workout designed for a more intense and compact routine. It combines the basic moves of Hip Hop dancing with more aerobics moves to create an effective and fun workout for both students and teachers alike. With music and enjoyable dance steps, everyone can burn off some calories and bond at the same time!

For more information, please email Ms Amutha at amutha@heart.org.sg or call 6354 9346.
Heart disease and stroke is the Number 1 killer of women in Singapore and worldwide. Nearly half of Singaporean women share the misconception that the Number 1 killer is breast cancer, when it is actually heart disease. Heart disease and stroke claim the lives of eight times more women than breast cancer in Singapore.

In fact, one in three Singaporean women dies from heart disease and stroke each year. This is more than deaths caused by any other disease, making it the top killer amongst women - yet less than one in ten women are aware of this silent killer in their midst.

Behind these dry statistics is a terrible tragedy. Each death tells a story, one of a life cut short. It is a story of children without a mother, a husband without his wife, and parents without their child.

As women, we are empowered to make good choices for our family. Join us at our Go Red For Women events to learn more about the importance of heart health, and get a better understanding on how to prevent and reduce the risk factors that can lead to heart disease and stroke.

Go Red Healthy Cooking Workshop  
(Conducted in Mandarin)

Date: 17 March 2012 (Saturday)  
Time: 1.30pm to 5.00pm  
Venue: 80 Raffles Place, #01-01 UOB Plaza 1, Singapore 048624  
Participation Fee: $38 (inclusive of goodie bag and high tea)

Programme  
Join us on 17 March (Saturday) for our Go Red Healthy Cooking Workshop which will be conducted by three well-known chefs; Chef Zhang Feng (Executive Chef for Si Chuan Dou Hua Restaurant), Chef Alan Chia (Sous Chef for Hilton Hotel) and Gourmet Consultant Irene Yip. They will be sharing with you the art and joy of healthy cooking and demonstrate LIVE, six creative dishes specially created for the workshop.

After the cooking demonstration, there will be a nutritionist talk and basic health screenings for the participants.

Dishes
1) Healthy power salad with soya citrus honey orange dressing (Chef Alan Chia)  
2) Grilled salmon trout with steamed parsnip paste and passion fruit sauce (Chef Alan Chia)  
3) Sichuan “bear’s paw” tofu (Chef Zhang Feng)  
4) Sichuan style braised tofu (Chef Zhang Feng)  
5) Sour and spicy seafood pasta (Chef Irene Yip)  
6) Organic soymilk pudding (Chef Irene Yip)

About Si Chuan Dou Hua Restaurant  
Established under the Pan Pacific Hotels Group since 1996, Si Chuan Dou Hua has come to be known for delivering excellent culinary experiences, bringing the delectable tastes of authentic Sichuan and Cantonese cuisine to the world.
Go Red For Women Symposium
“Women Do You Know What Your Top Killer Is?”

Date: 8 April 2012 (Sunday)
Time: 2.00pm to 5.00pm
Venue: NUHS Tower Block Auditorium, Level 1, 1E Kent Ridge Road, Singapore 119228

Sistic Admission Fee:
(excluding $1 Sistic charge)
$8 (Early Bird before 19 March)
$12 (Normal after 19 March)
$15 (Door Sales)

The symposium will be conducted by female doctors and professionals, using a holistic approach highlighting the five multidisciplinaries of maintaining heart health. This will allow you to fully understand how and what you can do to improve your heart health.

Topics
1. Cardiovascular disease is a woman’s disease (A/Prof Carolyn Lam)
2. Understanding your risk factors and goals for prevention (Ms Karen Koh)
3. What is a heart healthy diet? (Ms Liong Suet Mei)
4. How much and what kind of exercise is best? (Ms Cammy Tsai)
5. Can stress and lifestyle choices affect my heart? (Ms Ngooi Bi Xia)

There will be a short Q&A session at the end of the symposium to address any doubts or queries.

Go Red For Women Fair

Date: May 2012
Time: 11.00am to 8.00pm

The Go Red For Women fair aims to educate and empower women to take care of their heart health. There will be stage programmes such as yoga, stretching, heart health talks, beauty talks, stage games and more.

There will also be exhibition booths focusing on women’s overall well-being, covering the physical (exercise related) to personal (makeover stations) aspects. In addition, there will be goodie bags giveaways, and attractive prizes to be won!

So ladies, we hope to see you at our events. Remember to love your heart always, and keep it strong and healthy through diet and exercise!

For more details, visit www.goredforwomen.sg
Singapore Heart Foundation (SHF) will be having our Hearty Flag Day on 6 June (Wednesday) this year. It is an important fundraising event for SHF to raise the funds needed to sustain our life-saving programmes and to promote heart health in the community.

Would you like to make a difference? Support us via these ways:

♥ Make a donation through debit/credit card or cheque. Kindly request for the Flag Day donation form* from SHF by emailing levarill@heart.org.sg or calling 6354 9336

*All donations made will be entitled to 2.5 times tax relief for the amount donated

♥ Place our donation tins at your premises

♥ Help us recruit fundraising volunteers

♥ Join us as a fundraising volunteer

Every year, about 1,400 people collapse out-of-hospital in Singapore. Only about 20% of them receive life-saving cardiopulmonary resuscitation (CPR) from members of the public within the first few minutes after collapse.

The current survival rate of such patients is only about 2-3%. This is because the survival of cardiac arrest victims declines rapidly by 7-10% with each passing minute where nothing is done for the casualty.

Heart Safe endeavors to improve the overall out-of-hospital sudden cardiac arrest survival rate in Singapore by creating an environment for more effective use of CPR in the community.

Heart Safe endeavors to improve the overall out-of-hospital sudden cardiac arrest survival rate in Singapore by creating an environment for more effective use of CPR in the community.

**Project Heart 2012 is a new initiative that allows members of the public to be equipped with the life-saving skill of CPR. A mass CPR training session will be conducted alongside other activities.**

Seven schools will also be invited to participate in the “Shape A Heart” challenge. This is where they will each design a section of a 9-part heart to create a mega heart. These schools stand to win attractive prizes and tokens of appreciation.

Sudden cardiac arrests can happen to anyone, anytime and anywhere.

Heart Safe endeavors to improve the overall out-of-hospital sudden cardiac arrest survival rate in Singapore by creating an environment for more effective use of CPR in the community.

**PROJECT HEART 2012 – “Shape A Heart”**

- To raise awareness of out-of-hospital sudden cardiac arrest
- To create the opportunity for people of all ages to learn CPR in a fun and unique manner
- To increase the number of trained CPR responders in Singapore
- To generate greater awareness of the need to be CPR trained
- To educate that the heart is a vital organ in our body

**Event Details**
- Date: 19 May 2012 (Saturday)
- Time: 9.00am – 1.00pm
  (Registration: 8.00am – 8.30am)
- Venue: Pasir Ris Sports & Recreation Centre
- Target: 1,000 participants

For enquiries, please contact Mr Hidayat at 6354 9354 / hidayat@heart.org.sg or Mr Juztin at 6354 9349 / juztin@heart.org.sg. You may also visit www.myheart.org.sg for more information.

**FLAG DAY 2012**

Singapore Heart Foundation (SHF) will be having our Hearty Flag Day on 6 June (Wednesday) this year. It is an important fundraising event for SHF to raise the funds needed to sustain our life-saving programmes and to promote heart health in the community.

Would you like to make a difference? Support us via these ways:

♥ Make a donation through debit/credit card or cheque. Kindly request for the Flag Day donation form* from SHF by emailing levarill@heart.org.sg or calling 6354 9336

*All donations made will be entitled to 2.5 times tax relief for the amount donated

♥ Place our donation tins at your premises

♥ Help us recruit fundraising volunteers

♥ Join us as a fundraising volunteer

**Date:** 6 June (Wednesday)

**Time:**
- Shift 1 (9am - 1pm)
- Shift 2 (11am - 3pm)
- Shift 3 (1pm - 5pm)
- Shift 4 (3pm - 7pm)**

**Reporting Centres:**
- ♥ SHF Office @ Bishan
- ♥ Novena Square
- ♥ Funan DigitalLife Mall
- ♥ Jurong East MRT
- ♥ Choa Chu Kang MRT
- ♥ Tampines Regional Library
- ♥ Toa Payoh Public Library

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No act is too big or small, so do join us on 6 June (Wednesday) and play your part in making Singapore a heart-healthier nation!

For more details or if you wish to be a SHF fundraising volunteer, please contact Ms Levarill at 6354 9336 or levarill@heart.org.sg
National Life Saving Day is an annual event aimed at raising awareness on the importance of vital life-saving cardiopulmonary resuscitation (CPR) skill, the correct usage of the Automated External Defibrillator (AED) and increasing the number of confident life-savers in Singapore.

On 15th January 2012 (Sunday), Singapore Heart Foundation, together with National Resuscitation Council and supporting partners such as the Institute of Technical Education, Nanyang Polytechnic, People’s Association and Singapore Sports Council, officially launched the second National Life Saving Day.

This year, on top of CPR training, we familiarised participants on the use of AEDs. Our Guest-Of-Honour, Mr Gan Kim Yong, Minister for Health, officially launched the event by activating the “shock” button on an AED. Within seconds, the manikin’s heartbeat was stabilised. Thereafter, Professor Anantharaman, Chairman of the National Resuscitation Council Singapore, and Chairman of SHF’s Heart Safe Committee, led participants in the CPR & AED provider pledge.

Every year, about 1,400 people collapse out-of-hospital in Singapore. Only about 20% of them receive life-saving CPR from members of the public within the first few minutes after collapse. Most also do not get the benefit of having an AED used in those vital first few minutes of collapse.

The current survival rate of such patients is only about 2-3%. This is because the survival of cardiac arrest victims declines rapidly by 7-10%, with each passing minute that nothing is done for the casualty. In contrast, if CPR and defibrillation is provided immediately, chances of survival can increase to more than 50%.

More than 2,500 participants from tertiary institutions and corporations joined the 2nd National Life Saving Day. Upon completion of the course, participants earned a 2-year certification in CPR+AED. This year, we are proud to announce that we have entered the Singapore Book of Records for the largest AED training session with 1,708 participants!

A total of 700 instructors from different training centres volunteered their precious time to train the participants. SHF would like to extend our heartfelt thanks to all the instructors and esteemed sponsors – HTM Medico Pte Ltd * Isetan Foundation * Laerdal Singapore Pte Ltd * Lee Foundation * Philips Electronics (S) Pte Ltd * Thong Teck Sian Tong Lian Sin Sia * Zoll Medical Singapore Pte Ltd for their support in making this mass event possible.

We would also like to acknowledge our other in-kind sponsors for their generous contribution to this event - Allswell Trading Pte Ltd * Unilever Singapore Pte Ltd * First Aid Supplies Pte Ltd * Guardian Health and Beauty * Kratos Trading Supplies Pte Ltd * Munchy Food Industries Sdn Bhd * Nestle Singapore Pte Ltd * St John Ambulance Brigade Singapore * Public Utilities Board

For more information about our CPR+AED certification course, please visit www.myheart.org.sg/heart-safe-singapore-2/
Heart4Life is a free handy tool to keep track of your heart health. It features an overview of how to do cardiopulmonary resuscitation (CPR)*, assesses your heart risk and even has a CPR mode for emergency situations. You can also find out the various locations of Automated External Defibrillators (AEDs) around Singapore.

Heart4Life is suitable for both iPhones and Android phones.

You can make a difference. Download this application now!

* Heart4Life is not a substitute for completing the CPR+AED Certification course offered by Singapore Heart Foundation.
1. You are on the Board of Directors with the Singapore Heart Foundation (SHF). Can you tell us more about your involvement with the SHF?

My work with the Singapore National Heart Association (SNHA) (now known as Singapore Heart Foundation) began in 1990. At that time, SNHA was very small and the secretariat was run by a single administrative officer, Mrs Sudha, at the National Heart Centre. We had different committees headed by board members. I was in charge of financial help for the patients. As such, in the beginning, we were very involved in the day-to-day operations of SNHA. We also took turns to run the annual National Heart Week.

In 1991, we worked with the Canadian Heart Foundation to organise a Jump Rope for Heart workshop at the National Stadium. After which, Jump Rope for Heart became one of the signature events of SNHA.

In later years, we expanded and built a cardiac rehabilitation centre in the Singapore General Hospital campus. In 1996, I was elected to the post of Vice-Chairman and I held that post for many years. In 2005 and 2006, Singapore again hosted the Presidency of the Asian Pacific Heart Network and I was appointed as the President. During that term, we established the permanent secretariat of the Network.

2. Congratulations on winning the National Outstanding Clinician Award in 2011! How do you feel and did you celebrate?

I would like to dedicate this award to my fellow colleagues at the National Heart Centre Singapore, for their unswerving support and commitment. It was a team effort from all of my colleagues at National Heart Centre that led to this achievement. We celebrated with a small party for all who had contributed to our progress at the National Heart Centre.

3. Being a pioneer of many heart transplants, can you tell us about your most memorable experience?

Heart transplants are always a team effort with my fellow colleagues and I was a member of the pioneering team. There is one that I remember where a 14-year-old girl had progressed to end-stage heart failure. She was in her last stages of her life. This was a long time ago, where we did not have heart devices to support her while she waited for a suitable heart.

We finally found a heart for her, from an older person. As she was wheeled from the ward to the operating theatre, her heart completely stopped in the lift. We had to administer cardiopulmonary resuscitation (CPR) all the way to the operating theatre. After the transplant, she was in a coma for two weeks before she had a stormy recovery.

The girl finally recovered well, continued her schooling, did her 'O' and 'A' levels and eventually became an Administrative Assistant at the National University of Singapore. It was heartening to see her growing up to lead a productive life, especially knowing that she almost died before having her heart transplanted.

4. What is an average day at work like for you?

I leave home by 7:30 am. If I have an operation, I go straight to the operating theatre. If not, I will make my rounds and see the patients and conduct clinics. Apart from my clinical commitments I am also involved in various committees and organisations. Invariably, these meetings are held after office hours. By the time I get home, it will be about 7 to 8 pm. In addition, I also need to attend emergency calls which are unpredictable.

5. Besides doing transplants, you spend a fair amount of time working with mechanical devices that take over the functions of weakened hearts while the patients wait for donor organs. Can you tell us more about such devices?

My main specialty is heart, lung and vascular surgery. Involvement in transplants and heart devices are my additional commitments. The number of heart transplants done depends on the number of hearts donated. It is not a daily occurrence. In the past, we had more donor organs from younger people who sustained brain deaths from injuries, but it is different now due to advances in the medical field and better safety standards.

Nowadays, our organ donors are older, and are those who have suffered from strokes or other illnesses like diabetes. As such, their hearts are not always suitable. We were losing about 30% of patients because of the lack of donor hearts. For people who are waiting for kidney transplants, they can go for dialysis. However, there were no such options for heart patients, at least before the development of mechanical heart devices.

Heart devices are pumps that can be implanted in the body connected to the heart, to boost the functioning of the heart and restore blood circulation. The pump is connected to external rechargeable batteries through a cable that exits under the chest. We have performed 19 such operations since we started the programme in May 2009.

6. In your line of work, what are some common misconceptions about heart disease that you have come across?

In general, Singaporeans are more educated nowadays and they know what causes heart disease. However, some still think that it will not happen to them. There are also smokers who exercise well and eat well, yet still have heart problems. It is hard for them to accept that smoking is a contributory problem.

7. What are some tips you can offer to reduce one’s risk of cardiovascular disease?

Tips and detailed information on how to reduce one’s risk of cardiovascular disease are readily available on the SHF website at www.myheart.org.sg. You can also connect with SHF via Facebook (www.facebook.com/heartfoundation) and Twitter (www.twitter.com/heartSG).
心脏疾病只属于男性的特有疾病。

许多女性仍旧认为心脏疾病只会影响男性。事实上，心血管疾病是导致女性死亡的主要原因。在过去二十年中，因冠状动脉疾病而死亡的男性有了下降的趋势。相比之下，女性冠心病死亡的数字却保持稳定，甚至有增加的迹象。女性在面对心脏疾病的前景与男性的相比之下较为显得不太乐观，尤其是年轻妇女。男性和女性心血管疾病之间出现了令人费解的差异，这明显的显示女性可能会出现较为少见的症状，而对治疗也会产生不同的反应。除此之外，女性也可能会患有另一种不一样的心脏疾病，间接性的影响心脏肌肉或心脏的血小管。

好消息是，心脏疾病是可以预防的。当更多的女性能够提升对心脏疾病的认识，并了解她们独特的病发症状时，她们就更有能力保护自己，预防心脏疾病。

心脏疾病有什么症状？而女性是否拥有相同的症状？

心脏疾病可能没有症状，但却有一些迹象可寻。其中包括胸部不适，呼吸困难，头晕，缺乏力气或心率不齐等都可能是心脏疾病的症状。对于男性和女性之间，心脏病最常见的症状就是胸部疼痛或不适。这症状常常被描述为剧痛，紧绷或胸口有“沉重”的感觉。然而女性比男性更容易感受到其他心脏病发的迹象，其中包括了，呼吸急促，作呕，感觉昏厥，冒冷汗，或在她们的胳膊，背部，颈部，下颚或胃部感到疼痛。她们也可能出现不太常见的心脏病的迹象，例如胃灼热，感觉疲倦，咳嗽，或“心动过速”（心脏跳动迅速）。许多女性往往会忽略这些症状，因为这些并不像心脏病的迹象。因此若发现自己拥有以上的症状绝不能够轻视应该立刻前往医院做身体检查。

我有心脏疾病的风险吗？

当涉及到心血管疾病，妇女需要辨别的风险因素有：

年龄 - 随着年龄增长，风险也会相对的增加，特别是更年期后。
家庭 - 如果你的直系亲人在55岁之前(男性)或65岁之前(女性)患上心脏疾病的话，你也会有较高的得病几率。
性别 - 女性的心脏疾病的并发症通常会比男性晚十年或以上，而死亡率也比较高。
种族 - 在新加坡，种族差异有着不同的发病率，印度人患有较高的心脏疾病，而马来人死于心脏病发作的风险却较高。
女性们可以通过改变生活方式或靠药物来降低和控制以上的危险因素。例如:

**吸烟** - 吸烟会把心脏病发作的风险提高二至三倍，并导致更多不稳定的脂肪而导致堵塞。

**糖尿病** - 糖尿病会把风险增加一倍。

**胆固醇** - 太高的低密度脂蛋白(“坏”胆固醇)或太低的高密度脂蛋白(“好”胆固醇)会增加冠状动脉疾病的危险。

**高血压** - 高血压会增加心脏病发作的风险。血压越高,得病率就越大。

**肥胖** - 体重过重会增加高血压,糖尿病和低密度脂蛋白胆固醇的风险。

**闲置** - 缺乏运动会使以上描述的因素恶化。

**我要如何得知我是否有心脏疾病?**

定期向医生要求身体检查，提早发现潜在的风险因素，如糖尿病,胆固醇异常或高血压等。如果适当的话，以下的测试可以进一步检测冠状动脉疾病:

**心电图**
检查心脏的心电活动频率，可能会探查到过往或目前的心脏疾病。

**心脏负荷检验**
若医生怀疑你有心脏疾病潜在的可能性，负荷检验可能发现因为血液不循环而导致心脏没能得到足够的血的供应。这种检验可能是心电图，超声波检验或核成像测试。

**电脑断层扫描 (CT扫描)**
CT扫描能够帮助检测到冠状动脉是否有硬化或阻塞。

**冠状动脉造影**
这是一个X光扫描的测试，使用一种特殊的染料来观察动脉的血液流动。

对于一般的心脏疾病患者，医生通常会建议以服用药物来减轻他们的症状，并减少心脏病发作的机率。较为严重的患者可能要接受更深切的治疗来，如在冠状动脉里植入金属支架(一种将类似“弹簧”的仪器植入心脏动脉作为“支撑”血管的手术)以“疏通”阻塞的动脉或接受冠状动脉移植手术。

**那我应该怎么办?**

心脏疾病是可以预防的，而女性们应采取以下的行动以减低心脏疾病的风险:

1. 经常运动。
2. 不要吸烟。
3. 吃得健康和维持良好的体重。
4. 经常检查血压与胆固醇，控制血糖。
5. 听从医生嘱服按时服药，了解治疗的效果因人而异。紧密的与医生合作，建立一个健康良好的生活方式。

健康的生活方式已被证实了能够明显地降低新加坡女性患上心血管疾病的风险。即使已经患有心血管疾病，女性们仍然可以通过良好的生活方式来降低高达80%心脏病的风险。每个人都需要对自己的健康负责，女性也能拥有强大的能力来保护自己的心脏。

谢思立医生是新加坡国家心脏中心心内科部门顾问。请浏览网页
www.nhcs.com.sg 以索取更多详情。
女性与女性 -
一个女性心脏病专家的视眼

那封转介信写着：“请心脏专家为这位六十岁的年长妇女检查胸口不适的病状。”在我工作的心脏专科诊所里，这种病例相当的普遍，也是我最为关注的。因为我逐渐意识到这种个案的病患，通常是介于五十至六十岁，为家庭、子女默默耕耘的亚洲女性。这些女性自成年以后，常无时无刻都在忙碌于孩子和家庭之间而忽略了自己的身体。有些甚至已经到了更年期还不断地为子孙操劳，从生孕那天起就从未到诊所让医生做身体检查。

医学教科书从未有这种个案的解说，但在医学实践和经验的累积，我对这些女性胸口感到不适的个案更为注意，因为这些女性本身也通常不会认真地看待这些症状。

和往常一样，我以平时看病时的语气问道：“请您为我述说多点关你的病状？”她的回复中充满了愧疚和尴尬——感到不好意思来麻烦我，好像是女人就不应该有心脏病的症状。何况，心脏病不是男人才会有的病症吗？在她开始为我讲述她胸口疼痛的症状之前，就不断地向我道歉，不停以“心理作用”、“压力”来撇除这些症状。这与我较早前为一名年轻男士因为胸口不适看病时的情景截然不同。那名男士就那样走进我的诊所，单刀直入的说：“医生，我胸口疼痛，请为我检查。”
在不断的询问和鼓励下，那名女士终于把症状向我描述了一遍。事实上，那名女士所感受到的并不是一些微不足道的症状。在进一步的调查显示，她有未确诊的心脏病风险因子（高血压和高胆固醇）和明显的心血管阻塞（冠心病），而这些病状都必须接受治疗。相反的，那名男士所患上的只是肌肉骨骼胸部疼痛，只需吃些轻微的止痛药就行了。

我们女人是一群复杂的群体，有别于男性的不仅仅是那“器官”上的不同罢了。在学术界里也有足够的证明显示，心脏疾病与性别之间有着息息相关的关系。女性一般患上心脏疾病的岁数会比男性晚十年，患病的几率也追男性来得高。因为这样，比起任何其他因素包括了癌症，死于心脏疾病和中风的妇女越来越多。女性心脏病的内在机制也不同于男性：女性的小血管内层功能异常（内皮功能失调）的机率偏高，男性与女性心脏形状的不同也反映在风险因素上，女性的心脏会偏向逐渐缩小和僵硬的趋势，而男性的则是扩大和微弱。因此，女性的心脏衰竭更可能是“欠缺放松类型”所导致（舒张性心力衰竭），而男性的则是“欠佳泵送类型”（收缩性心力衰竭）。最后，女性的心脏与心理的连接比性强，“悲伤症”（心尖球综合征或Takatsubo心肌病）是其中典型的例子，这种心脏衰竭是在得知不好的消息后由巨大情绪波动导致神经激素激增所造成的，而不是由突发心脏动脉堵塞。

新加坡妇女必须意识到，心脏疾病和中风是我们女性的首号杀手。我们并不免疫于心脏疾病，而且若我们遇到心脏疾病的症状，我们应该给医生检查。女性们应该慎重地对待这则讯息，并且做出行动。

蓝淑彬副教授是新加坡国立大学心脏中心妇女心脏保健诊所的项目总监。请浏览网页 www.nuhcs.com.sg 或拨打6772 2002以索取更多详情。
Go Red Healthy Cooking Workshop
17.03.2012 (Sat)

*** Workshop will be conducted in Mandarin ***
1.30pm to 5.00pm @ 80 Raffles Place #60-01 UOB Plaza 1 S(048624)
Participation Fee: $38 (includes Goody Bag & High Tea)

Go Red For Women Symposium
08.04.2012 (Sun)

“Women, Do You Know What Your Top Killer Is?”
2.00pm to 5.00pm @ NUHS Tower Block Auditorium, Level 1
1E Kent Ridge Road S(119228), Circle Line - Kent Ridge MRT Station (Exit B)
Sistic Admission Fee: $8 (Early Bird before 19 March) | $12 (Normal after 19 March) | $15 (Door Sales)
*** Prices exclude $1 Sistic charge ***

Go Red For Women Fair
25.05.2012 - 27.05.2012 (Fri - Sun)

11.00am to 8.00pm
Admission is FREE!
*** 1,000 goodie bags will be given out! (while stocks last) ***

For more details, visit www.goredforwomen.sg