

Have a

Heart

Diana Johansen helps you stay out of ticker trouble

HIGHLY ACTIVE ANTIRETROVIRAL THERAPY (HAART) has worked wonders for most PHAs, improving health and prolonging lives. But side effects can spell HAART—and heart—trouble. For example, many HAART users, particularly those on protease inhibitors, develop elevated levels of fats—cholesterol and triglycerides—in the blood. These, along with other factors (see sidebar), can increase the risk of damage to your heart and blood vessels that supply blood to the heart and brain. This is called cardiovascular disease (CVD).

The most common CVD condition is atherosclerosis, a narrowing and hardening of the arteries. Fats and other substances accumulate in the lining of the artery, forming plaques which can grow big enough to block the artery or break off into clots that travel to other parts of the body. They can obstruct blood vessels to the heart, causing a heart attack; to the brain, causing a stroke; and to the legs, making it difficult to walk.

FAT STUFF

Doctors monitor CVD risk with blood tests that measure four types of fats, or lipids:

■ The first, HDL-cholesterol (high-density, or “healthy,” lipoprotein), is a “good” fat because it helps to remove fats from the blood.

The “bad” fats clog blood vessels:

- triglycerides
- LDL-cholesterol (low-density, or “lousy,” lipoprotein)
- total cholesterol

Along with your blood sugar, these fats should be measured before starting HAART and regularly ever after. Most HIV care providers test lipids every three to six months. Eating affects these levels, so it’s a good idea to fast—no food or drink for 12 hours before the test and no alcohol for a couple of days prior.

Here are some heart-felt nutritional strategies shown to help keep lipid levels—and the overall danger of CVD—in check:

EAT HEARTY

Don’t chew the fat. Dietary fat directly affects both the type and amount of fat in your blood, so check food labels and pick lower-fat products. Avoid partially hydrogenated fats/oils and greasy, fried and fatty foods. Baked goods, fast foods and snacks (chips, cheesies, crackers) tend to pack lots of fat and cholesterol.

Choose healthier fats like olive oil, canola oil and nuts. Limit saturated fats (in dairy and meats) and trans-fatty acids (in margarine and processed foods). Meat, dairy, egg yolk and shellfish also contain lots of cholesterol.

Consume less sugar.

High amounts of the sweet stuff turn into triglycerides when digested. Fruit juice (even pure), pop and candy all contain concentrated sugar.



Increase omega-3 fatty acids, found in fish and flax. Eating fatty fish (canned tuna, cod, halibut, herring, salmon, sardines) at least twice a week has been shown to benefit heart health. Six to 10 grams of omega-3 fatty acid supplements a day (usually salmon oil or a blend of fish oils) can reduce triglycerides. Lower the dose if these supplements cause diarrhea or unpleasant burping. Flax seed or oil is a vegetarian source of omega-3.

Fill up on fibre, especially soluble fibre like psyllium (Metamucil), oats and legumes (dried peas and beans), to reduce cholesterol absorption. Legumes are also a healthy alternative to animal sources of protein, which are generally higher in fat and cholesterol.

Try more soy products such as tofu, soybeans and soy milk. They’re high in phytoestrogens, which reduce the risk of CVD if you eat enough of them (about 25 grams of soy protein a day—four glasses of soy milk or about 225 grams, or 8 ounces, of tofu).

KICK THE HABIT

Limit alcohol to a couple of drinks a week—booze boosts triglycerides. You may have heard that wine is good for the heart, but not necessarily so if you have high triglycerides to begin with.



Get help butting out because smoking is one of the most powerful CVD risk factors.

Quit cocaine. It promotes CVD and may increase your danger of heart attack.

BE HEART SMART

Get moving. Exercise regularly—even 30 minutes of cardio training three times a week is great. Exercise can reduce triglycerides and decrease your overall CVD risk. Aerobic exercise also helps deflate fat build-up in the belly, which is strongly associated with CVD.

Maintain a healthy weight. Being overweight scales up the likelihood of CVD. By reducing fat and sugar while increasing exercise, you’ll shed those extra pounds.

Keep blood sugar in the normal range with diet (consult a dietitian), exercise and, if necessary, medications. High blood sugar can raise the risk of diabetes, which makes heart disease more likely.

Hold your blood pressure down. If it’s high, a dietitian can help you find dietary strategies to lower it. If needed, speak with your doctor about medications.

Chill out. Stress is hard on your heart. To take the edge off, try meditation, yoga or exercise. Counselling can help you learn how to cope with stress.

SUPPLEMENT YOUR SUPPLY

Some complementary therapies can interact with your meds, so evaluate them carefully before taking them.

Antioxidants, such as vitamin C (500-1,000 mg) and vitamin E (400-800 IU), may help slow down atherosclerosis by reducing oxidative damage in blood vessels, which speeds plaque growth.

Flavonoids, found primarily in fruits and vegetables (especially colourful ones), help your health flourish and protect against heart disease. It’s better to get your flavonoids from food (which also delivers other health benefits) than supplements.

The B vitamins—B₁₂, B₆ and folate—lower homocysteine levels in the blood. High homocysteine has been linked to heart disease risk.

Niacin, a B vitamin, reduces triglycerides and LDL cholesterol and increases HDL cholesterol. However, niacin isn’t for everyone: The required dose can cause flushing and itching. Niacin can also promote insulin resistance, so you shouldn’t use it if you’ve got high blood sugar. If you’re on protease inhibitors, consult your doctor before using niacin—PIs can raise blood sugar, and in some cases, niacin may make this worse.

To get to the heart of the matter, there are lots of things about your family history and health profile that you can’t change. But you *can* lower your overall CVD risks by adopting a heart-healthy lifestyle. Sometimes changing your diet can be rough, especially if you have multiple nutritional problems. A registered dietitian can help you develop the plan that’s right for you—and help keep you from breaking that heart. **X**

RISK FACTORS for CVD

- heredity (do your mom, dad or other close relatives have CVD?)
- getting older
- being a guy (men have an increased risk of CVD)
- taking HAART
- pre-existing diabetes that is not well controlled
- abnormal lipid levels—high cholesterol or triglycerides
- high blood pressure
- being overweight and/or having fat build-up in the belly
- smoking

Illustrations by Beverly Deutsch