



■ OCTOBER 2007

NORTH SHORE HEART RESEARCH FOUNDATION NEWSLETTER

DONOR LINE: 1800 999 060

Grahame's race against the clock

North Shore resident Grahame Hawkins believes he owes his life to ETAMI.

Last year, the 55 year old had just finished a 1.4 kilometer swim at Balmoral Beach, when he suddenly felt "wonky and unusual".

A heavy pain came on across his chest, so Grahame called an ambulance.

Suspecting a heart attack, ambulance officers hooked him up to a 12-lead electrocardiogram machine.

Within a minute of him being wired up, doctors at RNSH were sent data of Grahame's heart via mobile phone technology.



■ Cardiologist Dr Peter Hansen shows his patient Grahame Hawkins how ETAMI saved his life.

By the time Grahame arrived at the hospital he was taken straight to theatre where Dr Peter Hansen was ready waiting for him.

Within three days he was back at work.

Heart research project gets world recognition

INNOVATIVE DOCTORS AT THE ROYAL NORTH SHORE HOSPITAL HAVE FOUND A WAY TO USE MOBILE PHONE TECHNOLOGY TO REDUCE TREATMENT TIME FOR HEART PATIENTS BY 100 MINUTES.

A new early triage system, developed by Royal North Shore Hospital doctors, that uses mobile phone technology is dramatically cutting the death rates of heart attack patients.

The program, developed through support of the NSHRF allows information about a patient's condition to be instantly transmitted from an ambulance before reaching the hospital.

According to the head of the RNSH's Cardiac Catheterisation Laboratory Dr Greg Nelson, this early triage system for heart patients has reduced treatment time from the onset of a heart attack by 100 minutes.

Cardiac mortality rates at RNSH have dropped significantly from eight percent to two percent since the system was introduced.

So successful was the research program, known as Emergency Triage of Acute Myocardial Infarction (ETAMI), that the results have been recently published in the prestigious European Heart Journal, the official medical publication of the European Society of Cardiology.

"This early triage approach has reduced the time to open blocked arteries, despite victims often travelling further than their nearest hospital to be treated at North Shore or Westmead Hospital. The time to open an artery is much less than any other



■ A heart attack patient is connected to a electrocardiogram machine (ECG), which is broadcasting the data via mobile phone technology back to the Emergency Department for diagnosis.

reported studies undertaken around the world and is now the benchmark to which others aspire," Dr Nelson said.

Ambulance paramedics transmit the results of a 12-lead diagnostic ECG (electrocardiogram) – using the same technology as making a mobile phone call – to the Emergency Department either at the scene of the heart attack or in the ambulance.

This ECG information allows doctors to make a diagnosis and determine what the best treatment option is and where the patient should be transported for treatment. Patients with heart attacks are sent directly to the catheter lab of Royal

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Jason Seow
'Under The
Microscope'



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Dedes
Sportsmen's
Lunch



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Sue Ewart
tells her
remarkable
story



PAGE 12

Heart
healthy
recipe



■ Ray Knight, Chairman.

CHAIRMAN'S MESSAGE

When information from heart research is thoughtfully analysed by great minds, and implemented, it can save lives. A perfect example of this is ETAMI.

Through ETAMI cardiac mortality rates at RNSH have dropped significantly from eight percent to two percent. However ETAMI is not a new wonder drug or a surgical breakthrough. It is a thoughtfully analysed simple early triage system for heart patients that was the brainwave of two Royal North Shore Hospital heart specialists.

Dr Greg Nelson and Professor Helga Rasmussen first conceived the concept by analysing figures written on a napkin while having a cup of coffee. However, the concept only came to fruition after world leading medical technology company, Medtronic Australasia Pty Ltd, provided 40 special ECG machines to use in ambulances.

Despite ETAMI's life-saving results, cardiovascular disease remains one of the most serious challenges facing modern medicine. As heart attack survivor Sue Ewart also tells in this edition, its deadly potential can appear suddenly.

We are grateful for the ongoing support from former heart patient Con Dedes who organised the annual Sportsmen's Lunch, raising more than \$30,000 for the Foundation. We would also like to thank our donors for their support which helped us raise more than \$175,000 during our appeal in June.

Whether you're a major corporate supporter, a person who will bequest heart research funds in their will, an enthusiastic individual or community fund raiser or an individual donor... a big hearty thank you for your partnership and support.

With Christmas and New Year just around the corner, I take this opportunity on behalf of all of us at the Foundation to send our best wishes for the season and merry and healthy holidays!

Ray Knight
Chairman



■ Members from the Royal North Shore Hospital's Department of Cardiology who contributed to the development of ETAMI.



■ Former test cricketer Michael Slater with Con Dedes and his son Stavros Jnr at this year's Sportsmen's Lunch.

DIARY



DIARY DATES

Women's Heart Health Lunch

Two course lunch with heart health information. \$85 per person.

Hunters Hill Club

Noon to 3pm. Friday, October 19.

Cardiology Information Seminar

Fun and knowledge about healthy living. All welcome.

Tickets \$15 per person.

North Sydney Leagues Club

9.30am – Noon. Saturday, November 3.

Gold Bullion Lottery Prize Draw

Win Gold Bullion valued at \$20,000
Lottery 1007 closes Friday, December 7.
Winner will be notified by phone and mail.

BOOKINGS AND ENQUIRES

events@heartresearch.com.au
1800 999 060

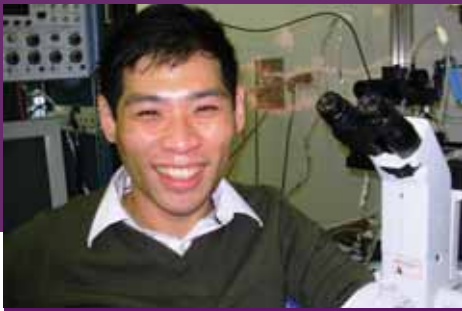
TAKE HEART lottery winner announced

Congratulations to Mrs Christine Suter from the NSW South Coast who has won the latest TAKE HEART Lottery 0707 with ticket number 12106. She has won a new Toyota Yaris valued at \$23,148 which was generously sponsored by Bill Buckle, located in Brookvale on Sydney's northern beach suburbs.

A hearty thank you to all those who supported us by buying a lottery ticket.



Disclaimer: Whilst due care is taken in the preparation of articles, the information contained in this newsletter is not intended as specific medical advice, and should be used as a guide only. Consult your doctor or health care professional before following any health information.



UNDER THE MICROSCOPE

JASON SEOW – NSHRF RESEARCHER

Meet Jason Seow a bright and personable young man and one of the NSHRF scholarship recipients.

He is a biomedical scientist who is completing his PhD. His research concerns heart tissue repair in the field of molecular and cell developmental biology using bone marrow and cardiac stem cells.

At school I... was the noisiest in the class because I talk a lot in class.

I wish I had... Magical powers to zap evil people and turn them into good people.

My last meal would be... A big tube of black sesame ice cream, and the biggest Toblerone chocolate bar ever made.

When I was a child I wanted to be... A commercial pilot. Now I imagine it would be kind of boring, just sitting there, playing with controls.

Friends say I am... Friendly, caring, kind, understanding, handsome, enchanting, intelligent, strong, hero-like and the list goes on and on. Most say a dreamer!

The hardest thing I have ever done was... to ask a girl out on a date when I was 14-years-old. She was so pretty and I was so nervous.

Medical research is important because.... it gives hope and help to people.

The hardest thing about being a scientist is... to be a bad scientist.

The biggest misconception about the heart is... that it lies on the right side of the chest. ■

Doctors call for ETAMI to become standard practice

ROYAL NORTH SHORE HOSPITAL HEART SPECIALISTS ARE CALLING FOR MORE AMBULANCES TO BE EQUIPPED WITH THE 12-LEAD ECG MACHINES IN ORDER TO SAVE MORE LIVES.

As part of the ETAMI study, 40 NSW ambulances were equipped with 12-lead ECG machines, thanks to the generosity of medical technology company Medtronic, who provided them for the trial.

“The paradigm of how heart patients are treated has to change now that a better way has been established on medical and scientific grounds,” Dr Nelson said.

“In an ideal situation, there could be four or five Regional Heart Centres in a city of about four million. Heart attack patients could be taken directly to these centres rather than to a district hospital as currently happens.”

For example under the ETAMI system, patients on the North Shore who live within the referral areas of Ryde, Hornsby, Mona Vale and Manly District hospitals are being taken directly to Royal North Shore Hospital and are being treated on average about 100 minutes earlier than normal.

“It is a fallacy to think that because a patient is suffering a heart attack and is being transported past a district hospital to a Regional Heart Centre, that they are not receiving immediate care,” Dr Nelson said. ■



■ Head of the Royal North Shore Hospital's Cardio Catheterisation Unit, Dr Greg Nelson, is calling for ETAMI to be rolled out across Australia.



■ The 12-point ECG machines used in the ETAMI study.

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North Shore or Westmead Hospitals (the 2 major regional heart centres) consequently reducing time delays to urgent treatment bypassing emergency departments of district hospitals.

“When we are able to treat a patient earlier, more of the heart muscle survives because it hasn't been starved of oxygen,” said Dr Nelson. “Equally, the potential of scarring of the heart tissue has been quite markedly reduced and we believe that is why fewer patients are dying.”

Critical to the success of the program was the installation of the high-tech ECG machines in forty ambulances, which was facilitated by the North Shore Heart Research Foundation.

The ETAMI pilot project has been running at the Royal North Shore Hospital since 2004, and has been a successful collaborative effort between the Northern Sydney and Western Area Health Services and NSW Ambulance. ■

Family genetics cause life threatening cholesterol levels

FAMILIAL HYPERCHOLESTEROLAEMIA (FH) IS A SERIOUS GENETIC CONDITION THAT AFFECTS ABOUT ONE IN FIVE HUNDRED AUSTRALIANS. IT IS THE MOST COMMON POTENTIALLY FATAL INHERITED CONDITION, BUT IT CAN BE SUCCESSFULLY TREATED.

FH is a condition that lessens the body's ability to remove cholesterol from the blood resulting in high cholesterol levels.

This cholesterol build up leads to early heart disease and premature death in some families.

"Everybody has a pair of genes that control the body's removal of cholesterol from the blood. If

one of these genes is faulty, the removal process breaks down," says Dr Greg Fulcher, Senior Staff Specialist in the Department of Clinical Endocrinology.

"This results in blood cholesterol levels that are approximately twice as high as they should be, even in

people with a healthy diet," he said.

"The high concentration of cholesterol in the blood speeds up the narrowing of the arteries. This results in vascular diseases that cause heart attacks, strokes and other circulation problems. Sometimes these are brought on 20 or 30 years earlier than could be reasonably expected," Dr Fulcher said.

According to Dr Fulcher, there is a 50:50 chance the faulty gene can be passed down through the generations. Consequently, high cholesterol and the risk of early heart disease will affect about half of the members in families with FH.

People with FH are usually unaware of having the condition because it doesn't affect the way they

feel, and diagnosing the illness FH relies on finding two distinct characteristics:

- A family history or a relative who has experienced a heart attack at a young age
- The presence of lumps of cholesterol in the tendons on the back of the hands or the back of the heels.

Since most people with FH are unaware of having the condition, screening is vitally important.

When families with FH are identified, affected patients can be treated while unaffected family members can be reassured. Healthy lifestyle choices can be encouraged.

Who do you call?

The FH Clinical Support Service aims to detect FH in people who are currently undiagnosed but who have affected family members. This free service offers specific blood tests and the potential for genetic testing to individuals and families. ■



■ A clue for diagnosing Familial Hypercholesterolaemia is the presence of lumps of cholesterol in the tendons on the back of the hands or the back of the heels.

Inquiries about FH can be made to:

Toni Monico, RN
Project Coordinator
Clinic 1, Level 3,
Dept of Endocrinology
Royal North Shore Hospital
Tel: 9926 8168
Mob: 0416 077 249



ADVICE: ASK THE DOCTOR

TAKE heart

by Prof. Geoffrey Tofler

*Q: Dear Doctor,
I felt my heart beating*

irregularly, and my doctor told me I had atrial fibrillation. Is it dangerous? Can it be fixed?

A: Atrial fibrillation (AF) is one of the most common abnormal heart rhythms. Although it can occur in young people, it appears more frequently with advancing age. Like you, a person with AF may first be aware of an irregular heart palpitation. AF may also contribute to a lack of energy or increased breathlessness on exertion, although it is sometimes detected on a routine electrocardiogram in someone with no symptoms.

Normally, the action of the heart is coordinated so that the atria (the filling chambers) transfer blood to the ventricles (pumping chambers) in a rhythmic manner. When there is fibrillation of the atria, this coordination is lost and overall pump function is reduced in efficiency by up to 1/3, hence the possible lack of energy or breathlessness. With time, the lack of normal emptying sometimes leads to stagnant blood flow and blood clot in the left atrium and a small offshoot called the left atrial appendage. The feared complication is that clot can travel to an artery in the brain causing a stroke. For that reason, doctors will prescribe medication that lessens the risk of clot formation such as aspirin or warfarin (coumadin).

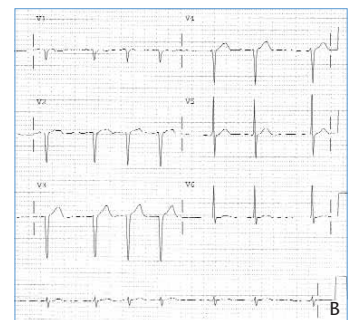
Whether the AF can be fixed depends in part on whether a specific cause can be found. An alcohol binge can sometimes cause it (picturesquely called the "holiday heart"); in these people, avoiding excess alcohol can prevent it. When AF results from elevated

thyroid activity, high blood pressure, heart valve disease or a weakened and enlarged heart, specific treatment for the underlying condition may also reverse the AF. In younger people, AF may occur in the absence of any other heart problem (so called "lone AF").

A variety of medications are available to help restore the AF to normal rhythm, to prevent AF from returning again, or in some situations to keep the heart rate in a favourable range although the AF continues to be present. Each medication has its benefits and potential side effects, so your doctor will be able to consider which is the best combination for you. When medications are not successful at restoring normal rhythm, doctors will occasionally arrange for a small electric shock to restore the person to normal rhythm. Also, in some specific situations where people have bad symptoms of palpitations due to the AF, which are not alleviated by medication, my electrophysiology colleagues at Royal North Shore Hospital and elsewhere will consider special pacemaker techniques or ablation procedures where the heart cells responsible for the AF are prevented from exerting their effect.

We welcome your questions via email to information@heartresearch.com.au or by post to PO Box 543, St Leonards, NSW 1590.

We recommend each person receives their own advice on their particular condition from their doctor, but as we answer a question or two each issue we hope to cover areas of interest and new developments for our readers. ■



■ Atrial fibrillation (AF) is one of the most common abnormal heart rhythms. Graphics of a patient's heart beat taken from an electrocardiogram machine show the results of a normal heart beat on graph A. However, graph B shows the irregular beat of a patient suffering from AF, which is shown on line 1 and line 4.

Going for gold to support heart research

Age has no barrier for the many who find they are battling to survive a serious heart defect.

Each and every one of the Royal North Shore Hospital's heart patients, from an hour old baby to an elderly grandparent, hope for a better future.

North Shore Heart Research Foundation provides financial support to cardiologists and medical researchers for a wide range of research programs on cardiovascular disease and associated medical conditions.

Such work is vital. So is your financial contribution – not just for today's patients but also for future generations.

Simply by entering into our latest TAKE HEART LOTTERY 1007, you are supporting research into the prevention and treatment of heart disease.

Purchase a ticket in the lottery before Friday, 7 December 2007 and you will have a chance to win gold bullion valued at \$20,000.

To enter our \$20,000 Gold Bullion Lottery just complete an entry form and post it back to NSHRE, PO Box 543, St Leonards, NSW 1590 or fax it to (02) 9906 7539.

Entry forms are available by calling (02) 9926 7443 or from our website www.heartresearch.com.au ■



Dancing, laughing and learning at this year's diet and exercise forum



■ Willoughby's Mayor Pat Reilly opened this year's Diet and Exercise Forum with an Elvis Presley song.

WHAT DO A MEDICAL PROFESSOR, AN EXERCISE PHYSIOLOGIST, A GOURMET COOK, A DIETITIAN, A LAUGHTER EXPERT AND A SINGING MAYOR ALL HAVE IN COMMON?

They were all presenters at this year's North Shore Heart Research Foundation's annual Diet and Exercise Forum.

200 people attended the event at the Centenary Lecture Theatre, which was proudly sponsored by Pfizer Australia and supported by Johnson and Johnson, Riverina Oranges and The Northbridge Shoe Shop.

Ballroom dancers from the Firefly Dance Club provided some introductory dancing demonstrations, before an Elvis Presley impersonator took the stage.

It was a big surprise when he then announced that he was in fact Willoughby's Mayor, Pat Reilly, and was there to officially open the Diet and Exercise Forum.

"I commend you all for supporting the North Shore Heart Research Foundation and hope that the good research work that comes from your support will lead to the saving of more lives," he said.

Attendees were equally entertained and informed by heart researcher, Professor Geoffrey Tofler and Kirsten Jennings, an exercise physiologist from the North Shore Cardiovascular Education Centre

(NSCEC), who showed how simple things around the house can be used as gym equipment to help stay fit and healthy.

Former executive chef Fran Neylon had mouths watering when she gave an on-stage cooking demonstration preparing delicious heart healthy meals – two of her recipes are included on the back page of this *Take Heart* newsletter.

The forum ended with a fun and light-hearted presentation from laughter strategist, Helene Grover.

"Don't put off till tomorrow the fun you can have today, because laughter is an exceptionally useful health booster to body and minds," Grover said.

According to Helene, laughter induces natural body pain killers, assists the immune system, improves blood circulation and is beneficial for the respiratory and cardiovascular systems amongst other health benefits.

If you would like to receive an invitation to next year's Diet and Exercise Forum, simply call **Danielle Heilman** on 9926 8319 or send an email to enquiries@heartresearch.com.au detailing your name and address. ■



■ Laughter strategist, Helene Grover, showed how laughter is good medicine.

PARTNERS IN HEART HEALTH

North Shore Heart Research Foundation gratefully acknowledges the generous contributions of our corporate supporters in 2007



DEDES RESTAURANT • ERNST & YOUNG • HOLMAN WEBB • THE CREATIVE ZOO • L'OCCITANE AUSTRALIA PTY LTD • NORTH SHORE PRIVATE HOSPITAL • WATERSHED WINES

Sportsmen's Lunch a winner for heart research

The annual Dedes Restaurant Sportsmen's Lunch is always a highlight on the North Shore Heart Research Foundation's calendar – and this year was no exception

150 guests at the Hunters Hill Club enjoyed an afternoon of fine food and wine, generously provided by restaurant owner Con Dedes – while raising a record sum for the NSHRF.

Con and his family presented the Foundation's Chairman Ray Knight with a cheque for \$30,000.

"I was born in 1970 with a congenital heart disease and in 1976 and in 1999 I was a guest at Camperdown Children's Hospital and North Shore Private respectively," said Con, who is the owner of the iconic Sydney restaurant Flying Fish, and manages restaurants at Hunters Hill, Kirribilli and the Sydney Rowing Clubs.

"They took tremendous care of me then and I owe them a great deal."

Guests enjoyed a sumptuous three-course lunch accompanied by fine wines from Watershed Wines and had the opportunity to bid on some truly extraordinary sports memorabilia.

"The financial return from this event indeed makes a significant contribution to our Foundation's grants to cardiologists and medical researchers across a wide range of heart research projects," said North Shore Heart Research Foundation Chief Executive Officer, Derek Minett.

Con Dedes has supported the Foundation since 1999 and is a director of the Foundation.

North Shore Heart Research Foundation, the Dedes family and all staff from the Hunters Hill Club extend a hearty thanks to the many guests, sponsors, corporate partners and suppliers who ensured the success of the event.

Thank you to the regular supporters – Canterbury Bankstown Leagues Club, Police Credit Union, Cabe Developments, Watershed Premium Wines, Kintyre Guttering Pty Ltd and Ward Partners.

A special thanks to MC Ray Seagar and to everyone who so generously participated in this year's luncheon and we look forward to seeing you at next year's event which will be held during June. ■

- (Below left) MC Ray Seagar who helped raise funds and kept people laughing.
- (Below) Each table offered an array of mementos and prizes to be won.



- Television presenter and former test cricketer Michael Slater gave guests some wonderful insights into touring the world with the international players.



- With hearts of gold, the Dedes family presented NSHRF's Chairman Ray Knight with a \$30,000 cheque to go towards funding future heart research projects.

Giving back to research

WITH A HISTORY DATING BACK TO 1886, PFIZER AUSTRALIA IS ONE OF THE NATION'S LEADING PROVIDERS OF PRESCRIPTION MEDICINES. IT SPENDS ABOUT \$40 MILLION ANNUALLY ON LOCAL RESEARCH AND DEVELOPMENT, HELPING TO KEEP SOME OF THE NATION'S LEADING RESEARCHERS IN AUSTRALIA WORKING ON CONDITIONS THAT HAVE THE POTENTIAL TO IMPACT EVERY AUSTRALIAN FAMILY.

The company is a long-standing and major supporter of the North Shore Heart Research Foundation.

Pfizer could be described as the world's largest medicine laboratory, with 12,500 innovative researchers. With over two-thirds of its cash flow reinvested into research and development, Pfizer's worldwide commitment to a healthier world is double that of any other private sector organisation. Annual exports from their three manufacturing plants have an Australian market value in excess of \$100 million

Pfizer Australia has a long history of being a significant contributor to Australia. As the nation's leading research-based healthcare provider, it is Pfizer Australia's mission to improve access to quality healthcare, build scientific knowledge in the community and encourage the country's brightest scientists to remain in Australia.

Its commitment to the Australian community is

fostered in partnerships with community and health consumer organisations. By developing new medicines Pfizer seeks not to only save lives and keep Australians fit and well, but also to help save millions of dollars by avoiding premature death, hospitalisation and nursing home care.

North Shore Heart Research Foundation has similar values but needs resourcing. So Pfizer Australia is proud to be able to provide some of the resources it needs to fulfill its mission of providing funds for heart research.

Pfizer Australia recognises that some of the best research and development occurs through partnerships. For this reason, Pfizer Australia has established dozens of strategic collaborations with local companies, individuals, academic institutions and organisations such as the North Shore Heart Research Foundation, all of whom are focused on developing better treatments for conditions that affect Australians. ■

Lucky supporter scores second win



■ Lottery winner
Dr Kathleen Thomas.

Dr Kathleen Thomas, a retired GP, won the Ord Minnett "Healthy Heart and Healthy Wallet" \$20,000 share portfolio in the Take Heart Lottery 0207 drawn on the 25th of May.

It is the second time Dr Thomas has won a Take Heart Lottery, winning the same prize in 2003.

"Being a doctor, I have always believed in supporting heart research and that's why I bought the lottery tickets in the first place but I never thought I would win," Dr Thomas said.

"After I won the first prize I told myself that I would continue to support the North Shore Heart Research Foundation by buying Take Heart lottery tickets each time. Who would have thought that I would win a second time? I was absolutely astounded. Thank you North Shore Heart Research Foundation and thank you Ord Minnett." ■

Welcome to the Summer Edition

Welcome to the third newsletter for 2007 – is it a sign of age that each year seems to pass more quickly than the last? I do hope not! Anyway the good news is that as summer approaches the days are getting longer giving us all more time for those healthy outdoor activities.

Life is never dull at the NSCEC! More and more we are seeing patients who are admitted following a heart attack and emergency stent procedure and then discharged within 2-3 days (the “drive-through” scenario!). The trend for reduced length of stay is increasing and whilst it has numerous benefits it also provides significant challenges for staff at the NSCEC. The limited time frame means that it is not always easy to ensure that patients have access to the necessary information and education following such an

event – understandably patients are not always very receptive during the first 48 hours following a heart attack. So we have formed an alliance with Acute and Post Acute Care (APAC) – a multi-disciplinary team who are now providing follow up in the home within 24 hours after discharge from hospital for patients who live within the Northern Sydney Area. Helen Glinatsis recently presented her data on this program at the Cardiac Society Conference in New Zealand and also at the Australian Cardiac Rehabilitation Conference (ACRA) in Hobart.

At the end of 2006 we initiated a pilot weight management program – as you know there are many health problems associated with being overweight or obese. We have collaborated with the Diabetes

Education Centre in this project and results are promising. Preliminary data was presented by Ann Kirkness and Nicole Costello in Hobart at the ACRA conference.

We also have some of our team members on the move. Congratulations to Nicole who has recently accepted a position as Health Promotions Officer with Breast Clinic on the RNSH campus. She has been a very valuable member of the team and will certainly be missed. Rebecca Trethowan is also leaving with plans to embark on further study and likewise we wish her all the best with her future plans.

As always, there is lots of interesting reading in this edition, so enjoy!

Vanessa Baker



■ Vanessa Baker, Nurse Manager, North Shore Cardiovascular Education Centre.



Major sponsor of cardiac rehabilitation and education programs at RNSH.

Implantable Cardioverter Defibrillator (ICD) Support Group

Sponsored in 2007 by:
Boston Scientific, St Jude, Medtronic, Biotronik

The ICD Support Group is coordinated by the NSCEC.

The Group's primary aim is to provide ongoing education, information and support for ICD patients and their families.

Meetings are held 4 times a year at the Royal North Shore Hospital and include an education session with light refreshments provided.

All ICD patients, their families and friends are welcome.

Contact: Ann Kirkness 9926 6560

Our sincere thanks to: Boston Scientific, St Jude, Medtronic and Biotronik for their ongoing financial and educational support of the ICD Support Group in 2007.

**North Shore
Cardiovascular
Education
Centre**

Office Hours:
Monday – Friday
8.30am – 4.30pm

Office Address:
Lvl 4 Vindin House,
Royal North Shore
Hospital, St Leonards
NSW 2065

Phone:
(02) 9926 6560 or
(02) 9926 8286

Fax:
(02) 9926 7844

Email:
vbaker@nscchahs.
health.nsw.gov.au

How my life changed after heart surgery

HEART INCIDENTS ARE NOT STRAIGHT FORWARD. IN THE MOST UNUSUAL CASES, EXPERTS BECOME MEDICAL DETECTIVES RACING AGAINST TIME TO SAVE A LIFE.



■ Heart patient and North Shore Heart Research Foundation supporter, Sue Ewart, who says she has been given a second chance at life after a life threatening heart incident.

When North Shore resident Sue Ewart was rushed to hospital a year ago complaining of chest pain, doctors were at a loss to know exactly what was wrong. That was until her aorta exploded on the operating table.

In part one of a two part series, Sue Ewart gives her personal account of the day her life changed forever.

On 19 June, 2006, I had been for my usual one-kilometre swim, as I did regularly during the week.

I had always thought of myself as pretty healthy and led a physical life – Himalayan trekking, competitive ‘A’ grade tennis player, ran in the City to Surf. I ate well on low fat diets and simply enjoyed a glass of wine on the weekends – never anything too excessive.

But that all changed this wintry morning. I had just opened the door to let some tradesmen into my house when suddenly my body felt very abnormal. A rippling pain came on heavily across my chest, down my back and down my legs. I had never felt anything like this before. I became very scared and panic-stricken.

My legs were wobbly and I knew straight away something was wrong... very wrong!

It was a struggle to get to the kitchen. I had to hang on to the walls as I moved. The situation was so out of the ordinary I knew I had to call an ambulance.

The tradesmen noticed my behaviour and became very concerned.

The ambulance arrived within 10 minutes and I was told I would need to go straight away to the hospital.

I remember looking out the window back at my house, wondering if I would ever come back.

Sheer panic was setting in. My feelings were on an emotional rollercoaster ride as my mind went to

being very scared and anxious – I didn’t want to die. I kept telling myself to remain calm and don’t panic... have faith.

I was admitted into the emergency ward at the Royal North Shore Hospital and began a series of tests.

I was not feeling good at all. I was not hungry or thirsty. I could feel myself shutting down... mentally... physically... spiritually.

By the following day, there were still no results and no answers to what was making me so sick.

Dr Choong, a medical angel, arrived on the scene and ordered that I have a CAT scan – that move saved my life.

After that, everything became a blur. A team of doctors rushed in to tell me my condition was life threatening and I would need immediate surgery.

“I will not go to surgery until I speak my family. I have to tell my daughters I love them.”

Dr Huang grabbed a phone and helped me make the calls as I was being rushed to the operating theatre. It was a relief just to tell them that I love them very much.

People were rushing into the operating theatre from everywhere, tying on their gowns and headscarves. Little was said in the tension. A gentleman arrived shortly after – a cardiologist named Dr Brereton, who is my hero.

As I lay on the operating table, and tubes started going down my throat, I remember asking him to not to damage my vocal cords, as I am a singer. He gave me a confused look. So I told him I was going to live and do the things I loved doing.

At 2.15pm, the 6th of June 2006, 13 hours of life saving surgery began. That was the start of my life number two.

As I was going into the operating theatre, my aorta had literally ruptured. There was horrific bleeding and the surgeons were struggling to control it.

My family were told there was a possibility of permanent brain damage.

As I regained consciousness, the days just dissolved into each other. I do remember the wonderful care, given with such professionalism and loving kindness. I also remember a man died. I remember being very sad and the staff being very distraught.

I remember the joy of starting to be more awake and having a heightened sense of awareness.

I saw people in a new light, I understood situations in positive manners.



■ One of the magic moments Sue seeks in her daily life is being with her beloved grandson, Aden.

My mind was sharp but my body was blunt.

I was so glad to be alive. I kept telling myself life will never be taken for granted ever again. My grandson, that dear little boy Aden, and his mother Liza-Jane came every day. Their arrival was one of those magic moments I counted every day.

I saw the sun rise each morning and set each evening. They were the magic moments. ■

In the next edition, this extraordinary survivor will explain life after returning home and how she now looks for a 100 magic moments to inspire her day.

Weight loss program helps support people to strip the pounds

THE PREVALENCE OF OBESITY IN AUSTRALIA HAS MORE THAN DOUBLED IN THE LAST 20 YEARS.

According to the National Diabetes, Obesity and Lifestyle study (AusDiab, 2006) there are 275 new cases of diabetes and 600 cases of obesity occurring each day.

Obesity is a well established risk factor for both coronary heart disease and diabetes. Evidence suggests that both groups derive significant benefits from aggressive lifestyle management combined with a moderate weight loss.

So the North Shore Cardiovascular Education Centre has joined forces with the Royal North Shore Diabetes Education Centre to develop a “pilot” collaborative Weight Management Program (WMP) for patients with heart disease and diabetes.

The overall aim of the program is to achieve 5 to 10 percent weight loss amongst patients and improved levels of physical activity.

“Approximately 70 percent of patients entering our cardiac rehabilitation program are overweight or obese and 68 percent remain so at completion – this data reflects national figures. Likewise we know that 85 to 90 percent of patients with Type 2 diabetes are also overweight” says NSCEC’s Clinical Nurse Consultant, Ann Kirkness

Obesity poses one of the greatest public health challenges for the 21st Century and increases the risk of heart attacks, strokes, Type 2 Diabetes, insulin resistance, high blood pressure, high blood cholesterol and some cancers.

However research demonstrates that a 5 to 10 percent weight loss can provide significant health benefits.

The new program focuses on providing patients with a practical insight into healthy eating and increasing physical activity levels with exercise programs tailored to suit individual needs and abilities.

After an initial assessment, patients participate in four education sessions and a minimum of 20 exercise sessions conducted in the physiotherapy gym at RNSH.

“The education sessions cover the health risks associated with being overweight and a diet and exercise component with a weight management focus. We then help them to explore and identify realistic goals, identify potential barriers and develop skills to achieve and sustain these lifestyle changes” Ann said.

Follow-up assessments occur every four months with the option for ongoing follow-up and support. Evidence demonstrates that a combination of diet, exercise and behavioural components in conjunction with ongoing support gives the best long-term outcomes. ■

Healthy Eating

AS THE FESTIVE SEASON BECKONS, IT'S EASY TO LOSE SIGHT OF THE HEALTH GOALS THAT YOU'VE BEEN TRYING TO ACHIEVE ALL YEAR. RICH FOOD, ALCOHOL AND LACK OF EXERCISE THAT CAN COME WITH THE SEASON CAN ALL CONTRIBUTE TO A SLUGGISH SYSTEM.

As a substitute, have bowls of fruit available and help fill kids' stockings with an orange or apple, too.

Here are two easy-to-do recipes to try that will not only help minimise the damage to your body beautiful but are heart healthy too! These recipes are from Fran Neylon, an experienced chef with over 18 years of experience in hospitality. She is also a registered nurse who works part-time in the Emergency Department at Royal North Shore Hospital.

LOW FAT MUFFINS

Ingredients

- 1 cup self raising flour
- ½ cup sugar
- 1 cup of bran
- 1 tablespoon melted spread
- 1 tub low-fat natural yoghurt
- 1 cup of nuts/sunflower seeds/raisins/apricots/sultanas (Dried fruit of choice)

Method

1. Preheat oven to 200 degrees Celsius. Mix all ingredients in a bowl with wooden spoon and then divide into muffin trays lined with paper cups.
2. Bake for 25 minutes.

Nutritional Tips

Low fat, high fibre sweet snack option



ROAST APPLES AND RAISINS WITH PISTACHIO NUTS

Ingredients

- 4 large Cox or Gala apples
- 4 tablespoons low-fat yoghurt
- 25gm heart recommended spread
- 4 small cinnamon sticks
- 40gm pistachio nuts or almonds
- 1 large orange – juiced
- 3 tablespoons brown sugar
- 100gm raisins or sultanas
- 100ml grappa or brandy

Method

1. Preheat oven to 170 degrees Celsius. Core apples using apple corer or very small paring knife and place apples in oven proof dish.
 2. Divide the spread into 4 and stuff into middle of apple, then push in cinnamon stick.
 3. Scatter with nuts and fruit.
 4. Pour grappa and orange juice over the apples and bake in oven for 20–30mins. Remove from oven and baste with juices.
 5. Test fruit with a skewer to see if it is cooked.
- Serve warm with low-fat natural yoghurt.

Nutritional Tips

Low calorie, low-fat, high fibre choice
Apples are a good source of Vitamin C
The spread and nuts can be omitted if on a strict diet