



Leading Our Community to Improved Health...

# Take an Active Part in Your Health Care!

#### Dear Member:

AultCare and Aultra offers a Care Coordination program to advocate for you to get the care, information and community services you need. We have combined the traditional services of Utilization Management, Case Management and Disease Management into one service, provided by one Care Coordinator, who will be your advocate and help you navigate through the health care system. Our team of registered nurses, licensed practical nurses and licensed social workers are available by phone to help you take control of your health and well-being!

#### Our services are free and we provide:

- · Assistance with the referral process to out-of-network specialists
- Help with transitioning your care to panel providers, if appropriate
- Care coordination to help you get the most from your plan benefits while maintaining quality, cost-effective treatment
- Community resource information to provide assistance with prescriptions, utilities and transportation if you are having financial difficulties
- Phone calls with a nurse who specializes in managing care for health conditions
- Educational materials to supplement information your physician has provided
- Informative mailings and handouts about your condition
- Equipment such as the Cardiocom Telescale® and GlucoCom Telemonitoring System to help you manage your condition from the convenience of your home
- Staff to guide you in the right direction and help you work with your doctors to improve your health
- Reliable referrals to service agencies in the community

#### You may benefit from our Care Coordination services if you:

- Have questions about your health status or health care
- Are in need of a transplant
- Have been newly diagnosed with cancer
- Are experiencing complex medical issues
- Are receiving specialty care outside of the network

#### Best Regards,

Your Chronic Care Management Team

# Women and Heart Disease: Understanding the Risks

Risk factors are habits and conditions that make heart disease more likely. The more you have, the higher your chances of heart attack and other problems. Most risk factors can be managed to help make your heart healthier. Below are factors that increase your risk for having heart disease.

**Smoking** - Smoking damages the lining of the blood vessels and raises blood pressure. Research shows that smoking makes women up to 6 times more likely to have a heart attack. This is the biggest of all the risk factors you can change. Also avoid secondhand smoke (smoke from other people's tobacco products).

**Diabetes** - Diabetes causes high blood sugar, which can damage blood vessels if not kept under control. Having diabetes also makes you more likely to have a silent heart attack—one without any symptoms. You're at risk if your blood sugar level is above 100 mg/dL.

**Unhealthy Lipid Levels** - Lipids are fatty substances in the blood. LDL cholesterol and triglycerides (both bad lipids) can build up in artery walls, narrowing the arteries. HDL cholesterol (a good lipid) helps clear bad lipids away. You're at risk if you have: HDL cholesterol 50 mg/dL or lower; LDL cholesterol 100 mg/dL or higher; triglycerides over 150 mg/dL or higher.

**High Blood Pressure** - High blood pressure occurs when blood pushes too hard against artery walls as it travels through the arteries. This damages the lining of the blood vessels. You're at risk if your blood pressure is 120/80 or higher.

**Excess Weight** - Excess weight makes your heart work harder. This raises your risk of a heart attack. Being overweight also puts you at risk of developing diabetes. Excess weight around the waist or stomach increases your risk the most. You're at risk if your BMI (body-mass index) is 25 or higher.

*Lack of Exercise* - Without regular exercise, you're more likely to develop other risk factors, such as being overweight and developing diabetes. High blood pressure and unhealthy lipid levels are also more likely.

**Negative Emotions** - Emotions such as stress and pent-up anger have been linked to heart disease. Over time, these emotions could raise your heart disease risk. If you have heart disease, emotion such as anxiety and depression can make it worse.

#### Metabolic Syndrome

This is caused by a combination of certain risk factors. It puts you at extra high risk of heart disease, stroke, and diabetes. You have metabolic syndrome if you have three or more of the following: low HDL cholesterol; high triglycerides; high blood pressure; high blood sugar; extra weight around the waist.

#### Risks You Can't Control

A few risk factors can't be changed. But they still raise your heart disease risk.

- Family history. If your mother or sister had heart trouble before age 65 or your father or brother before age 55, you're at higher risk of having a heart attack.
- Age. The older you are, the higher your heart disease risk.

When your heart isn't getting enough oxygen, you may experience a feeling called angina. It's not the same as a heart attack, but it's a sign that you're at risk of having one. Angina is often referred to as "chest pain," but this can be misleading. It's not always painful, and it's not always in the chest. Many women have other symptoms along with or instead of—chest pain or discomfort. Talk to your health care provider if you notice any of the following:

- Discomfort, aching, tightness, or pressure that comes and goes. This may be in the back, abdomen, arm, shoulder, neck, or jaw. It can also be in the chest.
- Feeling much more tired than usual, for no clear reason.
- Becoming breathless while doing something that used to be easy.
- Heartburn, nausea, or a burning feeling that seems unrelated to food.

# **Risk Factors for Heart Disease**

A risk factor is something that increases your chance of having heart disease. Heart disease (also called coronary artery disease) involves damage to arteries - blood vessels that carry oxygen-rich blood through your body. Things like smoking or unhealthy cholesterol levels can damage arteries. You can't control some risk factors, such as age and a family history of heart disease. But most, including those listed below, are things you can control.

#### Unhealthy Cholesterol Levels

Cholesterol is a fatty substance in your blood. It can build up inside your arterics and block the blood flow to your heart or brain. Your risk of heart disease goes up if you don't have enough HDL cholesterol ("good" cholesterol that clears the bad cholesterol away). You're also at risk if you have high levels of LDL ("bad") cholesterol or triglycerides (another substance that can build up).

#### Smoking

This is the most important risk factor you can change. Smoking damages your arteries. It reduces blood flow to your heart and brain. It greatly increases your risk of heart disease, stroke, lung disease, and cancer. If you keep smoking after a heart attack, you can double your risk of a second heart attack.

#### High blood pressure

High blood pressure occurs when blood pushes too hard against artery walls as it passes through the arteries. This damages the artery lining. High blood pressure raises your risk of heart attack and especially stroke.

#### **Negative Emotions**

Stress, pent-up anger, and other negative emotions have been linked to heart disease. Over time, these emotions could raise your heart disease risk.

#### Metabolic Syndrome

This is caused by a combination of certain risk factors. It puts you at extra high risk of heart disease, stroke, and diabetes. You have metabolic syndrome if you have three or more of the following: low HDL cholesterol; high triglycerides; high blood pressure; high blood sugar; extra weight around the waist.

#### Diabetes

Diabetes occurs when you have high levels of sugar (glucose) in your blood. This can damage arteries if not kept under control. Having diabetes also makes you more likely to have a silent heart attack—one without any symptoms.

#### Excess Weight

Excess weight makes other risk factors, such as diabetes, more likely. Excess weight around the waist or stomach increases your heart disease risk the most.

#### Lack of Physical Activity

When you're not active, you're more likely to develop diabetes, high blood pressure, abnormal cholesterol levels, and excess weight.

Most people with heart disease have more than one risk factor.

# Stroke and Heart Disease

Every part of your body, including your heart and your brain, requires oxygen to work. Oxygen is carried in the blood. Blood vessels called arteries carry oxygen-rich blood throughout the body. Both heart attack and stroke are due to problems in the arteries. The same factors that cause heart disease can make you more likely to have a stroke.

- Heart Attack: A heart attack is caused by blockage in an artery that carries blood to the heart muscle. If blood is blocked, that part of the heart muscle is damaged or dies.
- Stroke: If an artery supplying the brain is blocked, a stroke may result. A stroke may also be caused by a piece of plaque breaking loose from an artery (such as a carotid artery in the neck) and lodging in the brain.

Both heart attack and stroke are medical emergencies that can lead to serious health problems. They can even be fatal.

#### Healthy Artery

A healthy artery is a tube with flexible walls and a smooth inner lining. Blood flows freely through it.

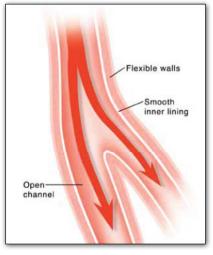
#### Unhealthy Artery

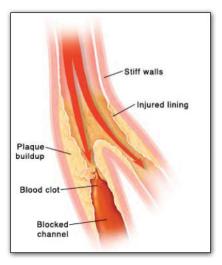
Artery problems start when the inner lining gets damaged. This is often due to risk factors such as smoking and high blood pressure. These can make the artery walls stiff. Plaque, a fatty mix of cholesterol and other material, forms in the lining. This narrows the channel. Plaque can break, restricting blood flow further. It can also cause a blood clot to form. A blood clot may block the artery's channel completely.

#### **Reducing** your Risk

The good news: Making changes that make your arteries healthier will help lower your risk for both heart attack and stroke. If you have heart disease, you may need to work on a few aspects of your lifestyle. But remember that the things that are good for your arteries, heart, and brain are also good for the rest of your body. Your doctor will help you find a plan that works for you. It will likely include:

- Controlling risk factors (health problems and habits that raise your chances of a heart attack or stroke). Lose excess weight. If you smoke, quit. Lower your blood pressure and manage your cholesterol. If you have diabetes, keep it under control.
- Eating healthier. Choose healthier fats and limit harmful ones. Replace high-sugar and high-fat foods with fruits, vegetables, and whole grains. Get the right amounts of the foods you need.
- Becoming more active. Get out and walk. Build up to 30 minutes or more most days. Try to find other ways to be more physically active in your daily life.
- Taking medications as prescribed. Take your medications as directed and keep track of them all. Don't stop any without your doctor's okay. Give each of your health care providers a list of all your medications.





# The First Few Hours After a Stroke

When you have a stroke, time is crucial. If you have any stroke symptoms, go to the hospital right away. Do not delay! The earlier treatment is started after symptoms begin, the more likely you are to survive and recover. Your doctor can be alerted as you are traveling to the hospital. Any relatives or friends who were with you when your symptoms started should go with you to the hospital.

#### At the Emergency Room

In the hospital, a doctor will assess your symptoms and when they occurred. You will also be asked about your medical history. You'll also be asked about your health and risk factors. Family or friends can answer if you cannot. Tests are then done. You will likely have blood tests. You may also have a CT scan or an MRI. This will help determine what kind of stroke you have. The two types are blockage (ischemic stroke) or bleeding (hemorrhagic stroke). The type is important to know before treatment is started. This is because treatment that helps an ischemic stroke can kill a person who had a hemorrhagic stroke.

#### Acute-Phase Stroke Treatment

Treatment can begin as soon as your doctor knows what type of stroke you had and where it occurred, Phase one begins from the first minutes to the first hours after you begin having symptoms. It involves one or more of the following, depending on what kind of stroke you have:

- Medication to dissolve clots (ischemic)
- Medication to prevent blood clots (ischemic)
- Tests to look for damage from the stroke
- Procedures to stop bleeding (hemorrhagic)

The goal of the acute phase treatment is to minimize damage from the stroke. After the first several hours, treatment turns to your recovery and on preventing future strokes.

#### Symptoms of Stroke

Call 911 right away if you have any of the following, even if the symptom seems to get better:

- Weakness in an arm, hand, or leg
- Numbness on one side of the body
- Sudden dimness or loss of vision, particularly in one eye
- Sudden difficulty speaking
- Inability to understand what someone is saying
- Sudden dizziness or loss of balance
- Sudden, excruciating headache, unlike headaches you've had before, or a severe headache accompanied by nausea and vomiting

#### If you are at risk for having a stroke:

- Keep a list of important telephone numbers next to your phone. Include your doctor and relatives or friends you want to be contacted.
- Carry a list of all medications you take, and the dosage of each, in your wallet. Include over-the-counter drugs, vitamins, and supplements.
- Write a brief medical history, including any other medical problems you have had and the dates. Keep this with the medication list.

# Taking Aspirin for Atherosclerosis

Aspirin is a medication often prescribed to treat atherosclerosis—a condition that affects the blood vessels that carry blood away from the heart (arteries). Having atherosclerosis means you're at increased risk of a heart attack or stroke. Aspirin is prescribed to help prevent these from happening.

#### Why You Need Aspirin

Plaque (a fatty material) can build up in your arteries, making it harder for blood to flow through them. A blood clot can then form on the plaque. This may block the artery, cutting off blood flow. Conditions such as coronary artery disease (CAD) and peripheral arterial disease (PAD) can result. CAD occurs when plaque builds up in the coronary artery. This artery supplies the heart with oxygen-rich blood. PAD occurs when plaque forms in leg arteries. The same factors that cause CAD and PAD can also cause plaque to form in other arteries in the body, such as those in the heart or brain. When plaque occurs in any of these arteries, it raises your risk of heart attack or stroke.

#### What Aspirin Does

Aspirin is an antiplatelet medication (also called a blood thinner). It helps keep blood clots from forming. This reduces the risk of blockage. Aspirin can be taken daily by

people at high risk of heart attack or stroke. It is also used after a stent placement, a procedure that involves placing a tiny wire mesh tube in an artery. Aspirin helps prevent blood clots from forming on the stent.

#### Taking Aspirin Safely

Tell your health care provider about any other medications you take. Also, mention if you have a history of ulcers or bleeding problems. Ask whether you will need to stop taking aspirin before having surgery or dental work. Always take medications as directed.

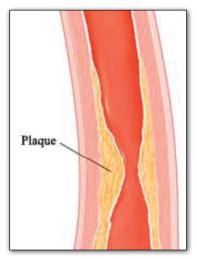
#### Tips for Taking Aspirin

- Develop a routine. For example, take aspirin with the same meal each day.
- Don't take more than prescribed. A low dose gives the same benefit as a higher one, with a lower risk of side effects.
- Don't skip doses. Aspirin needs to be taken daily to be effective.
- Keep track of what you take. A pillbox with days of the week can help, especially if you take several medications. Or use a list or chart to keep track.

#### When to Call Your Health Care Provider

Side effects of aspirin are not usually serious. If you do have problems, a dosage change may help. Call your health care provider if you have any of the following:

- Excessive bruising (some bruising is normal)
- · Nosebleeds, bleeding gums, or other excessive bleeding
- An upset stomach or stomach pain



Aspirin helps prevent blood clots from forming on plaque and blocking an artery.

# **Controlling Hypertension & Cholesterol:** volume 2

# Planning to Quit Smoking

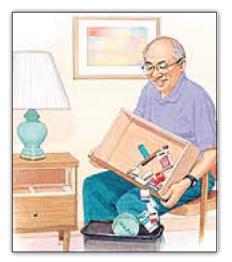
Your doctor may have told you that you need to give up tobacco. Only you can decide if and when you are ready to quit. Quitting is hard to do. But the benefits will be worth it. When you decide to quit, come up with a plan that's right for you. Discuss your plan with your doctor. And talk to your doctor about medications to help you quit.

#### Line Up Support

To quit smoking, you'll need a plan and some help. Pick a date within the next 2 to 4 weeks to quit. Use the time between now and that date to arrange for support.

Classes and counselors: Quit-smoking classes coach people like you through the process. Get to know others in a class, and support each other beyond the class. Telephone counseling also helps you keep on track. Ask your health care provider, local hospital, or public health department to put you in touch with a class and a phone counselor.

Family and friends: Tell your family and friends about your quit date. Ask them to support your change. If they smoke, arrange to see them in smoke-free places. Forbid smoking in your home.



#### Quit Smoking Products

There are many products that can help you quit smoking. Some are medications that help curb your cravings and withdrawal symptoms. Others slowly lessen the level of nicotine your body absorbs. Nicotine is the highly addictive substance found in cigarettes, cigars, and chewing tobacco. These products include a nicotine patch, gum, lozenge, nasal spray, and inhaler. Be sure you follow the directions carefully. Do not smoke while you use nicotine products. Doing so can be very harmful to your health.

- Finding something to replace cigarettes may be hard to do. Be aware that some things you choose may be as harmful as cigarettes.
- Smokeless (chewing) tobacco is just as harmful as regular tobacco. Tobacco should not be used as a substitute for cigarettes.
- Herbal medications or teas may affect how your body handles nicotine. Talk to your doctor before using these products.

#### Classes That Can Help

Aultman Hospital offers a free series of tobacco cessation, or quit-smoking classes. These can be helpful whether you smoke or use any other form of tobacco. They can supplement the use of medications that are geared toward quitting tobacco. To sign up for the "Give it Up" classes, call (330) 363-QUIT (7848). If you don't live in the Canton area, check your local hospital or health care facility to see if similar classes are offered.

Making or breaking a habit takes time. If you're trying to create a new habit remember that it will get easier after the first few weeks. Focus on sticking with your change on a daily basis. For something like exercise, write it into your schedule each week. To eat more fruits and vegetables, make sure they're handy and appealing to you. When making any change, write a list of why it's important for you to make that change. Read the list on a daily basis, especially when your willpower is weak. Reward yourself regularly for achieving your goal. At first you may choose daily rewards, and as it gets a little easier you can go to weekly rewards. Choose rewards that are significant to you. They don't have to be expensive. Something like a bubble bath, splurging on your favorite fruit, or getting together with a friend are all examples of rewards you can do for yourself.

# Coping with Smoking Withdrawal

For the first few days after you quit smoking, you may feel cranky, restless, depressed, or low on energy. These are symptoms of withdrawal. It's your body's way of recovering from smoking. Your symptoms should lessen within a few days.

#### Coping with the Urge to Smoke

- Deep-breathe. Inhale through your nose. Count to five. Slowly exhale through your mouth.
- Drink water. Try to drink eight or more 8-ounce glasses of water a day.
- Keep your hands busy. Wash your car. Draw. Do a puzzle. Build a birdhouse.
- Delay. The urge to smoke lasts only 3 to 5 minutes.

#### Get Support

Individual, group, and telephone counseling can help keep you on track. Ask your health care provider for more information about resources available to you.

#### **Control Stress**

After you quit, you may feel irritable and stressed. Try taking a warm bath or shower. Listen to music. Try yoga or meditate. Call friends or talk with a professional.

#### Exercise

Exercise helps your body and mind feel better. There are many ways to be more active. Find something you enjoy doing. See if a friend will join you for a walk or a bike ride.

#### Sleep Better

You may feel tired but have trouble falling asleep. Try to relax before bed. Do a few stretching exercises. Read for a while. Also, avoid caffeine for a few hours before bedtime.

#### Get Fit, Not Fat

You may notice an increased appetite. Many people who quit smoking gain a few pounds. To limit weight gain, try to watch what you eat. Cut back on fat in your diet. Snack on low-calorie foods, like fresh fruits and vegetables. Drink low-calorie liquids. Regular exercise can also help you stay fit. And remember: Your main goal is to be a nonsmoker. Stay focused on that goal.

#### Quit-Smoking Products

There are a number of products that can help you quit smoking. They are available over the counter or by prescription. Ask your healthcare provider if any of these could help you quit smoking.





# Staying Smoke-Free

Quitting smoking is a big change. People will congratulate you. You have the right to be proud. But later at times you may miss smoking. Plan ahead to resist temptation.

#### Prepare to Be Tempted

- If you feel the urge to smoke, distract yourself for about 5 minutes. Drink water. Call a friend, walk around the room, or try deep breathing.
- Don't trust yourself to have "just one cigarette." Many exsmokers get hooked again that way.
- Remind yourself why you quit. Tell yourself you can stay quit.
- Avoid people or places that can trigger you to smoke. Ask others not to smoke in your home or car.
- Spend time in places where you can't smoke— a museum, a library, a store, or a gym.
- Take your nonsmoking life one day at a time. Mark each day on your calendar.
- HALT your desire. Keep yourself from feeling too hungry, angry, lonely, or tired. Deal with your real needs. Eat, talk, or sleep.
- Put aside cigarette money and reward yourself.



#### If You Slip

You may slip and smoke again. Many ex-smokers slip on the way to success. If you do, it's not the end of your quit process. Think about what triggered you to smoke. Then think of ways to prevent future slips. Ask yourself what you can learn from the slip. Decide how you will handle this trigger better in the future. Then get back on track—right away!

#### Don't Give Up

Keep telling yourself you're no longer a smoker. Don't lose hope. Most people have tried to quit several times before being successful. Try to stay focused on your plan to be smoke-free. Keep in mind all the benefits of staying quit. Millions of people have given up smoking. You can too.

#### Did You Know...

- According to the American Lung Association, today more than 35 million Americans are living with chronic lung disease such as asthma, emphysema and chronic bronchitis. In 2004, 11.4 million U.S. adults (aged 18 and over) were estimated to have COPD. However, close to 24 million U.S. adults have evidence of impaired lung function, indicating an under-diagnosis of COPD.
- In 2004, it was estimated that 20.5 million Americans currently have asthma. Of these, 11.7 million Americans had an asthma attack.
- Asthma is the most common chronic disorder in childhood, currently affecting an estimated 6.2 million children under 18 years of age, of which four million or more suffered from an asthma attack or episode in 2004.
- Secondhand smoke can cause serious harm to children. Estimates are that more than 500,000 asthmatic children have their condition worsened by exposure to secondhand smoke.

# **Taking Blood Pressure Medications**

If you have been diagnosed with high blood pressure, you learn that diet and excerise help control blood pressure. Many people also need the help of one or more medications. Here are the main types of blood pressure drugs and how they work.

#### Diuretics

Diuretics are sometimes called "water pills" because they work in the kidney and flush excess water and sodium (salt) from the body.

#### **Beta-blockers**

Beta-blockers reduce nerve impulses to the heart and blood vessels. This makes the heart beat slower and with less force. Your blood pressure drops, and your heart does not have to work as hard.

#### ACE inhibitors

ACE inhibitors cause the vessels to relax. This helps the blood flow better and lowers blood pressure.

#### Angiotensin antagonists

Angiotensin antagonists shield blood vessels from a hormone that causes the blood vessels to get stiff and narrow. Your vessels become wider, and your blood pressure goes down.

#### Calcium channel blockers (CCBs)

CCBs keep calcium from entering the muscle cells of the heart and blood vessels. This causes blood vessels to relax, and your blood pressure goes down.

#### Alpha-blockers

Alpha-blockers reduce nerve impulses to blood vessels. This allows blood to pass easily, causing blood pressure to go down.

#### Alpha-beta blockers

Alpha-beta blockers work the same way as alpha-blockers but also slow your heartbeat. As a result, less blood is pumped through your blood vessels and your blood pressure goes down.

#### Vasodilators

Vasodilators directly open blood vessels by relaxing the muscle in the vessel walls, causing blood pressure to go down.

#### Suggestions from the Chronic Care Management Team

- Never hesitate to ask for more information about your medicine. Ask your doctor, pharmacist or nurse if you have questions about your medicine.
- Keep a record of medicines that don't agree with you. It is easy to forget.
- Let your doctor know if you are having problems with any medication (including affording them) or tell your doctor when your medicine does not seem to be working for you. Never make changes in the dosage unless your doctor agrees.

# **Cholesterol Medications**

Your doctor has prescribed medication to help control your cholesterol. This sheet tells you how cholesterol affects your health. It also explains how medications can help improve your cholesterol levels.

#### Understanding Cholesterol

Cholesterol is a type of fat (lipid) that's carried in the blood. Your body makes cholesterol in the liver. You also get it from certain foods. The body needs some cholesterol to stay healthy. But high cholesterol increases buildup of plaque (a fatty substance) in the blood vessels. This lessens or blocks blood flow in these vessels. This raises your risk of heart attack, stroke, and other health problems.

#### Types of Lipids

There are three key lipids in the blood:

- LDL (low-density lipoprotein) cholesterol. This is called "bad" because it can cause plaque buildup in the blood vessels.
- HDL (high-density lipoprotein) cholesterol. This is called "good" because it helps remove LDL cholesterol from the bloodstream.
- Triglycerides. These are a special form of fat your body uses to store energy. Like cholesterol, they can cause plaque buildup in the blood vessels.

#### Healthy Cholesterol Levels

The American Heart Association provides standards for healthy blood lipid levels. These general standards are:

- Total cholesterol: Lower than 200
- HDL cholesterol: 40 or higher for men, 50 or higher for women
- LDL cholesterol: Lower than 100
- Triglycerides: Lower than 150

You can find out your levels by having a blood test. Talk to your doctor about what levels are best for you. To find out more about cholesterol levels, visit www.heart.org/cholesterol.

#### Types of Cholesterol Medications

Medications can help control the amount of cholesterol in the blood. There are several types. Each controls cholesterol in a different way. Your doctor will prescribe the type that is best for you. They may be used alone or combined. The main types are:

- Statins (HMG-CoA reductase inhibitors). Statins are thought to be the best at lowering cholesterol. They do this by keeping the body from making cholesterol. Benefits: Statins lower LDL cholesterol. They also slightly raise HDL cholesterol and lower triglycerides.
- Selective cholesterol absorption inhibitors. These prevent the body from taking cholesterol from food. They may be prescribed for use alone or with a statin. Benefits: These medications lower LDL cholesterol. They also slightly raise HDL cholesterol and lower triglycerides.
- Resins (also called bile acid sequestrants or bile acid-binding drugs). Resins work by binding to bile (a substance that helps the body digest food). Normally, most bile is absorbed by the body during digestion. But when bile is bound to resin, it is excreted from the body. So, the body must make more bile. To do this, the body takes cholesterol from the bloodstream. Benefits: Resins lower LDL cholesterol.



Your pharmacist can help answer any questions about your cholesterol medications.

# **Cholesterol Medications (continued)**

- Fibrates (fibric acid derivatives). These reduce the amount of triglycerides the body makes. They also help to clear these lipids from the blood. Benefits: Fibrates lower triglycerides. They also raise HDL cholesterol.
- Niacin (nicotinic acid). Niacin (vitamin B3) affects how the liver makes blood fats. (Note: Non-prescription niacin should not be used to treat cholesterol problems.) Benefits: Niacin raises HDL cholesterol. It also lowers triglycerides and LDL cholesterol.
- Omega-3 fatty acids. These reduce the amount of triglycerides the body makes. They also help to clear these lipids from the blood. Omega-3 fatty acids are found in many foods. These include salmon and other oily fish, and walnuts. Your doctor may prescribe these fatty acids in capsule form. Benefits: Omega-3s lower triglycerides. (Note: They may increase LDL cholesterol in some patients.)

#### Taking Cholesterol Medications

Take your medication exactly as your doctor instructs. This will help it work best. Here are tips for taking cholesterol medications:

- Know when and how to take your medications. Some may need to be taken with food. Others may need to be taken on an empty stomach or at a certain time of day.
- Stick to a schedule. Try the following:
  - Don't skip doses or stop taking your medication. This is important even if you feel better or if your cholesterol numbers improve.
  - Set things up to help you remember. For instance, work taking your medications into your routine. You could plan to take them when you get up in the morning or when you go to bed at night.
  - Keep track of what you take. You may take a few different medications. If so, a list or chart can help you take the right pills at the right time. A pillbox with days of the week or times of day is also a good tool for keeping track.
- Prevent drug interactions. Some medications interact (affect how other drugs work when taken together). Be sure to tell your doctor about all other medications you take. This includes vitamins, herbs, and over-the-counter medications.
- Know how to deal with side effects. Many people have side effects when they first start taking a medication. These are things like headache and stomach upset. Side effects should go away in a few weeks. Tell your doctor about any side effects you have. Certain side effects should be reported to your doctor right away. These include yellowing of the eyes and blurred vision. Also report muscle aches and breathing problems.

Note: If you are pregnant or breastfeeding, tell your doctor before taking any cholesterol medications.

#### A Healthy Lifestyle Can Help Too

In addition to medications, your doctor will likely suggest lifestyle changes. These can help to improve your cholesterol levels and your overall health. Your doctor can tell you more about these changes. And he or she can help you create a plan to make them part of your routine. Changes may include:

- Healthy eating. Certain changes in eating patterns can help you lower LDL and triglyceride levels. Start by choosing healthy fats (such as olive oil) and adding fiber. Also, reduce the number of calories you eat.
- Exercise. Daily exercise can help raise HDL levels.
- Keeping a healthy weight. Being at a healthy weight can help raise HDL levels. It can also lower triglycerides.
- Quitting smoking. Being smoke-free can improve your lipid levels.

# Eating Healthy on the Go

Need to eat on the run? Are you running low on energy to plan and cook nutritious meals? This often means grabbing "junk" or fast food full of fat, salt, sugar, and cholesterol. But being in a rush doesn't mean that you can't eat healthy.

#### "Fast" Food Made Healthy

Try these ways to get good nutrition, fast:

• Go to a grocery or convenience market instead of a fast-food restaurant. Look for choices like sandwiches, yogurt and fresh fruit.



- Buy precut, prepackaged fresh or frozen fruits and vegetables. You can open the package for a snack, salad, smoothie, or stir-fry.
- Microwave a frozen dinner that is low in sodium and has no more than 25% of the recommended daily intake (RDI) for saturated fat. Complete the meal with a whole grain roll, vegetables, and fresh fruit.
- Look for canned vegetables and fruits (packed in water, not heavy syrup). If you have to buy fruit packed in syrup, rinse the fruit with water and throw away the syrup.
- Use whole grain products like brown rice, corn tortillas, and 100% whole-wheat bread. Look for the words "whole grain" on the package, not just "wheat."
- Good sources of protein are canned beans, tuna canned in water, eggs, low-fat or non-fat milk, and low-fat or non-fat cheese and yogurt.
- Avoid the snack foods! Don't be drawn in by all the chips, candy, soda, and sugar-filled cereals.

#### At a Fast-Food Restaurant

Eating healthy at fast-food restaurants means choosing the right foods.

- If you must have fast food, consider your options. Go for veggie burgers, broiled and skinless chicken breast sandwiches, or dinner salads with low-fat dressing.
- Instead of fried foods, try grilled meats like chicken and fish. Look for baked potatoes topped with vegetables or salsa.
- Fast-food restaurants often have printed nutrition information available. Ask for this information and look up your favorite items before you order.
- Blot the extra oil from food with a napkin before you eat it.
- Order low-fat or non-fat milk instead of soda.
- Get fruit or yogurt instead of milkshakes or cookies.
- If your family is not ready to stop ordering french fries, get one serving for everyone to share. This gives everyone a taste without making french fries the center of the meal.

Many of us have questions about our health. Would you like to hear about simple changes that can make your meals healthier? Do you want help to become more active? How do you decide if you should call the doctor? Call your Customer Service Center and ask to speak to the Chronic Care Management Team for answers to these and other important questions.

# Healthy Eating

Changing the way you eat can reduce many of your risk factors. It can lower your cholesterol, blood pressure, and weight. Your diet doesn't have to be bland and boring to be healthy. Just follow these 3 steps: eat less saturated fat and less salt, and eat more fiber. Your whole family can benefit from healthy eating habits.

#### 1. Eat Less Saturated Fat

- Eat fewer fatty cuts of meat and more fish.
- Limit or avoid butter and lard. Use less margarine.
- Limit or avoid foods containing palm, coconut, or hydrogenated oils.
- Eat fewer high-fat dairy products like cheese, ice cream, and whole milk.
- Get a heart-healthy cookbook and try some low-fat recipes.

#### 2. Eat Less Salt

- Don't add salt to food when cooking, and keep the salt shaker off the table.
- Limit or avoid high-salt ingredients such as MSG, soy sauce, baking soda, and baking powder.
- Instead of salt, season your food with herbs and flavorings such as lemon, garlic, and onion.

#### 3. Eat More Fiber

- Eat fresh fruits and vegetables.
- Add oats, whole-grain rice, and bran to your diet.
- Beans and potatoes are excellent sources of fiber.
- When you eat more fiber, be sure to drink more water to prevent constipation.







#### Did You Know...

Dietary fiber can be found in vegetables, cooked dried peas and beans (legumes), wholegrain foods, bran, cereals, pasta, rice, and fresh fruit. Fiber helps move food along the digestive tract, better controls blood sugar levels, and helps reduce your cholesterol level. For a grain to be considered a "high fiber" food it should have at least 1 gram of dietary fiber per 45-calorie serving (2 grams per 90-calorie serving or 3 grams per 130-calorie serving). You should be checking your cereals, crackers, bread, pasta, bagels, and other types of starches with this rule of thumb.

# AultCare and Aultra Members...

If you have questions regarding provider information, coverage, benefits, services, business hours or any other health plan topics we are here to help!

Please contact our friendly customer service staff for fast answers to your questions!

#### AultCare Service Center:

330-363-6360 or 1-800-344-8858 TTY: 330-363-2393 or 1-866-633-4752 Call Center & Walk-In Hours: Monday - Friday 7:30 am - 5:00 pm EST

Aultra Group Service Center: 330-363-2050 or toll free: 1-855-270-8497 Call Center Hours: Monday - Friday 7:30 am - 5:00 pm EST



# 24 Hour Health Line

By calling the Aultman Health Line at **330-363-7620**, or tollfree at **1-866-422-9603** you will be directed to an experienced nurse to answer your health-related questions. This service is available 24 hours a day. All calls are **FREE** and entirely confidential!

- Provide first aid instructions and general health information
- •Determine what level of care is most appropriate for you
- •Answer your medication questions
- •Other suggestions for self care

