



UpBeat
Mended Hearts Newsletter
Chapter #130– February 2022
Olympia, WA

**It's Great
To Be Alive
And
To Help
Others!**

Meeting Notice

Program: Cardiac Medications

Date: Thursday, February 10, 2022

Time: 2pm via Zoom, Link will be emailed the week of the meeting

Upcoming Dates

- ⇒ Feb 3-Board Meeting
- ⇒ Feb 10-Chapter Meeting
- ⇒ Mar 3-Board Meeting
- ⇒ Mar 10-Chapter Meeting

Happy Valentine Day

President's Message
Michael Blonden

Sometimes I wonder if we are in some sci-fi movie with everyone running around in masks. Who would have thought that we would be dealing with COVID this long. I was struck by the writings of a neighbor on a neighborhood app...."My husband and I are both over 65. We are both fully vaccinated and boosted. I'm afraid to go out anywhere other than go on a walk outside or a drive to a quiet beach or somewhere away from most people. Are there others like me that are staying in and isolating?"

I thank you for joining in with our group. I hope in some small way our time together helps you find support and sanity in this difficult time. Like the lady said, find time to walk outside. I love my walks with my dog, Danny. He forgets all about masks and greets people and dogs with a friendly wag of the tail.

For those of you who missed Dr. Charles Rossow's talk on Risk Factor Modification for primary and secondary prevention of cardiovascular disease in January here is the link to his presentation-

https://us06web.zoom.us%2Frec%2Fshare%2FREu26gopJ5K2Rvp9vZ6yHsDi7xfR72GfUgSA6JRm1K1_5eCU33tqJ09sR2WUbuW.vr3dh1PLtmkRggNe Passcode:#&=3GuhE

Chapter Newsletter

Virtual Reality Allows Surgeon To Walk Through a Human Heart

When Brayden Otten was born, his tiny heart, about the size of a walnut, couldn't effectively pump his blood.

A team of surgeons at Cincinnati Children's Hospital Medical Center managed to save his life with some workarounds to help his blood circulate, but even then, they knew those solutions were not perfect or permanent. Brayden enjoyed a relatively normal childhood, according to the Cincinnati Enquirer, but his doctors knew that without further interventions, heart failure was inevitable. And so at 12, Brayden found himself back in the operating room, but this time, his surgeons had a new and exciting tool in their arsenal: virtual reality (VR).

Brayden's medical team worked with a 3D medical imaging specialist to create a model of Brayden's heart that allowed surgeons to "walk" into his heart instead of relying on images and a 3D-printed model. According to Brayden's surgeon, instead of reprinting the model every time he wanted to change his plan, he simply had to hit reset and he could dive in again. With VR, his surgeons were able to plan a procedure that would have otherwise required several surgeries and increased the risk of complications and other surprises. Brayden himself was able to explore the virtual operating room, the tools that would be used, and take a walk inside his own heart. The procedure itself, which took 12 hours, went perfectly, and Brayden's recovery is going well.

While the use of 3D VR in cardiothoracic surgery is still somewhat new and surgeons are still experimenting with the best applications, preliminary data is promising. One study, published in the European Heart Journal in 2020, suggests that the immersive technology is more useful in preoperative planning than flat two-dimensional images. Cardiothoracic surgery, the study authors note, has become incredibly complex over the decades and a surgeon must think in three dimensions to effectively plan and perform complicated procedures.

According to the Vanderbilt University Medical Center, very few pediatric cardiac surgery centers currently use virtual reality, but mounting evidence of its benefits will likely translate into broader availability at more hospitals.

A literature review published in the Annals of Thoracic Medicine concluded that even though virtual reality is off to a promising start in the field of cardiothoracic surgery, more research and refinement are still needed to fully understand all the applications.

Is Your Knee Pain Coming From Your Back?

The bad pain in your knee could be telling you something!

It could be telling you that you have a bad back!

These are two parts of the body that may seem totally unrelated, but they are not. The lower back has all sorts of nerves that control muscles around the knees. When these nerves in the back misfire, they can cause pain in the knee.

A back that feels tense or tight could result in mild pain, but it could be cause worse pain in the knee, according to Regenexx.

Another notable symptom is pain and tightness in the hamstrings. Tightness in the hamstrings that can't be relieved by stretching could be a sign of back problems. The L5 nerve runs from the lumbar spine to the outside of the hamstring muscle. A nerve problem in the back can cause inflammation in the hamstring, which causes damage to the meniscus, a cartilage pad in the knee. The knee can swell and stay inflammed and painful.

One other unusual sign that pain in the knee is coming from the back is bunion formation. The back has separate nerves that support the inside and the outside of the foot. When these nerves are stressed or injured, the muscles don't move the foot correctly. The foot unnaturally tilts the big toe, creating a bunion and probably knee pain, too.





**Wear RED on Friday, February 4
to raise Awareness for Heart
Disease**

February marks the 52nd anniversary of American Heart Month. When President Lyndon B. Johnson announced the creation of the national awareness month in 1964, cardiology was very different than it is today. Statins were not yet being prescribed to lower cholesterol. Physicians were just beginning to identify the link between heart disease and factors such as smoking and a sedentary lifestyle.

The implantable cardiac defibrillator and echocardiography had not yet been developed, and the first successful coronary artery bypass surgery on a human was still more than a decade away. It's no wonder annual deaths from cardiovascular diseases have fallen by nearly 1 million per year since the 1960s.

American Heart Association President Mark Creager, M.D., says in addition to the prescription of life-saving drugs such as statins, blood pressure-lowering medications, and antiplatelet medications, the way we care for heart patients has also substantially improved survival rates.

“Probably the best example of that is how we approach patients who have had heart attacks,” says Dr. Creager. “That has changed dramatically in the past 50 years. We used to treat heart attacks as an untreatable condition which a patient would be put on bed rest for up to six weeks and allowed to recover.” Now we identify heart attacks promptly and get patients to facilities where the heart attack can be not only diagnosed, but treated immediately, particularly with catheters to open up the blockers and insert stents. That has made a huge difference in reducing fatalities from heart disease.”

Let's take a look at how far we have come in the fight against the nation's No. 1 killer since American Heart Month began — and what we need to do to continue making strides in decades to come.

Chapter Newsletter

February Birthdays

Happy Birthday!!

Ernie Ong will be celebrating his 80th Birthday on February 13. Happy Birthday Ernie!!



Chapter Board Zoom Meetings

Chapter Board Meetings are open to the Chapter Members. We are currently using Zoom software via computer. If you want to attend the meetings, please email Michael Blonden at mblonden@msn.com and he will email you the link for the Zoom Meeting.

Member Report

**Welcome our new member!
John Waggoner III.**

For Donations to our local Mended Hearts Chapter, Mail donations to:

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Chapter Newsletter

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