



UpBeat

Mended Hearts Newsletter

Chapter #130 – March 2026

Olympia, WA

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

Meeting Notice

Program: Heart Health
Date/Time: Thursday, March 12, 2pm
Location: MyMedSupplies
6149 Martin Way East
Lacey, WA

Upcoming Dates

Mar 5-Board MTG
Mar 12-Chapter MTG
Mar 17-St Patrick Day

President's Message

Michael Blonden

Our upcoming member meeting on March 12th will feature two Cardiology Clinic Nurse Practitioners, Kaitlyn Weinberg, NP and Autumn Spright, DNP, FNP-C. They will lead an interactive discussion focused on heart health. The meeting will include a member discussion that continues our efforts to identify key lifestyle topics for future sessions. For a summary of member feedback on lifestyle priorities, please go to our website on the home page for a link.

Recent updates include responses from Michele Scott, Gregg Savajian, and me. A quick analysis of the data indicated that some of our members would like to volunteer or pay it forward. We welcome additional volunteers for our visiting program at St Peter Hospital.

Our group has reached out to the nursing staff. Nurses will include a one-page summary of our chapter in the Heart Patient Discharge packet. We have continued to expand our outreach through the visiting program, Cardiac Rehab, Health Fairs, and the discharge packets. Thank you for sharing information about our group with your neighbors and friends. Ann Monaghan and Diane Caputo recently gave a Mended Hearts Presentation to the Cardiac Rehab.

We were sad to hear of the passing of one of our original members, Ernie Ong. Ernie loved to dance and was very often the life of the party. I urge you to see the YouTube video on Ernie's dance in the 2012 Senior Olympics, which can be found on the website. We will miss him.

President's Message (Continued)

Michael Blonden

You may also be interested in the upcoming Mended Hearts webinar. You may register to attend at ["Hypertension Basics and Management"](#) scheduled for March 10, 2026. Thank you again for attending and your discussion at our last meeting. We had a first, with someone joining in a discussion with the speaker on Zoom during a hybrid meeting.

Speaker's Information



Kaitlyn Weinberg is a board-certified Nurse Practitioner who received her nursing education at the University of North Carolina at Chapel Hill and subsequently at Vanderbilt University.

Her interest in cardiovascular medicine began during her work as a Registered Nurse, where she gained extensive experience caring for patients following cardiothoracic and vascular surgery.

Her clinical experience is complemented by a foundation in biomedical research at Duke University and peer-reviewed publications in pulmonary epithelial injury science. She is passionate about patient education, evidence-based practice, and improving access to high-quality cardiovascular care in the community.



Autumn Spight, DNP, FNP-C, is a Cardiology Nurse Practitioner serving patients in the Olympia, Washington region. Prior to becoming a Nurse Practitioner, she worked as a cardiovascular nurse in Memphis, Tennessee, where she developed a strong foundation in cardiac care and patient advocacy.

She is passionate about heart disease education, prevention, and empowering patients to better understand and manage their cardiovascular conditions. Autumn is committed to compassionate care for her patients and their families.

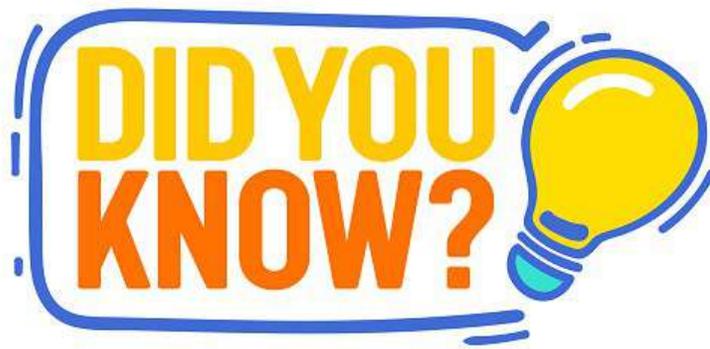
Did You Know (DYK)

March 2026

Welcome to March....the month with an identity crisis. One day it's raining/snowing like it's auditioning for a sequel to *Winter: The Reckoning*, and the next day it's sunny enough to make you consider wearing shorts. Somewhere in this meteorological mood swing, we are asked to participate in one of society's strangest rituals: Daylight Saving Time. Thanks to the Daylight Saving Time, we "spring ahead," which is a cheerful way of saying we collectively agree to lose an hour of sleep and pretend it's a gift. The idea sounds harmless. It's just one hour. Sixty minutes. How dramatic could that be?

According to our internal body clocks—also known as circadian rhythms—it's apparently very dramatic. The circadian rhythm is the finely tuned biological system that tells us when to sleep, wake, eat, and function like reasonably pleasant human beings. When we abruptly shift the clock forward, our bodies do not politely comply. They grumble. Research suggests that even a one-hour disruption can lead to grogginess, decreased concentration, and a noticeable increase in workplace yawning. Some studies have even linked the time change to short-term spikes in accidents and irritability. In other words, March briefly transforms society into a large group of people wandering around asking, "Why am I this tired?" while clutching oversized coffee cups.

Ironically, March is also the month that marks the beginning of spring—a season associated with renewal, energy, and fresh starts. Yet we begin it slightly sleep-deprived and confused about what time it actually is. Perhaps this is March's true personality: equal parts optimism and chaos. Still, there's something hopeful about longer evenings and lingering sunlight. We may lose an hour, but we gain brighter days. And if nothing else, March teaches us resilience—especially the remarkable human ability to complain about losing sleep while voluntarily staying up late watching Netflix the night before.



Heart Disease and Stroke Statistics Show Improvement

Ann Monaghan

The overall deaths from heart disease and stroke continue to decline with fewer total deaths and modest improvements in the age-adjusted death rate. The fact remains that heart disease and stroke continue to take the lives of too many of our loved ones each and every day. Together, heart disease and stroke still kill more people than the #2 and #3 causes of death which include all types of cancer and accidents combined.”

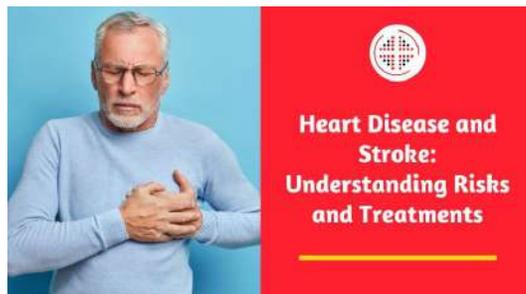
“It’s encouraging to see that total deaths from heart disease and stroke declined in 2025. The good news is that, overall, fewer people are dying from any cause, and death rates are improving as life expectancy continues to rebound after the COVID-19 pandemic,” said Latha P. Palaniappan, M.D., M.S., FAHA, a professor of cardiovascular medicine at Stanford University in Palo Alto, California. “However, about half of all U.S. adults continue to have some form of cardiovascular disease. Those rates are still higher than they were before the pandemic and persistent increases in common conditions like high blood pressure, diabetes and obesity continue to drive the risk.”

These health factors not only contribute to heart disease and stroke. They also lead to other complications. Because of the interconnectivity of these conditions, cardiovascular-kidney-metabolic (CKM) syndrome has been identified. This is a health disorder made up of connections between heart disease, kidney disease, diabetes and obesity, leading to poor health outcomes. CKM syndrome is identified by the presence of risk factors including high blood pressure, high triglycerides, abnormal cholesterol, high blood glucose (sugar), impaired kidney function and elevated weight or obesity. Data from this year’s report shows:

- Nearly 90% of U.S. adults have some level of CKM syndrome
- Over 80% of U.S. young and middle-aged adults already show early CKM risk.

Even though these rising numbers can feel discouraging, the advances in our diagnostic and therapeutic arsenal provide hope. We can detect warning signs before events occur and we now have many tools to prevent events. Prevention is our most powerful way to have the greatest impact and the more we use it, and the sooner we use it, the more lives we can save.

A number of studies have shown inroads in preventing heart disease. These four health behaviors are to eat better, be more active, quit tobacco and get healthy sleep. Also, four health factors include weight management, cholesterol control, blood sugar and blood pressure management as key measures for improving and maintaining cardiovascular health.



Better care for seniors after surgery

Understanding Medicare's new TEAM experiment:

As a senior on Medicare, you might worry about what happens after a major surgery—like a hip replacement or heart bypass. That's where Medicare's new Transforming Episode Accountability Model, or TEAM, comes in. Starting this year, TEAM is an experiment designed to make your care smoother and safer by holding hospitals responsible for your entire recovery journey.

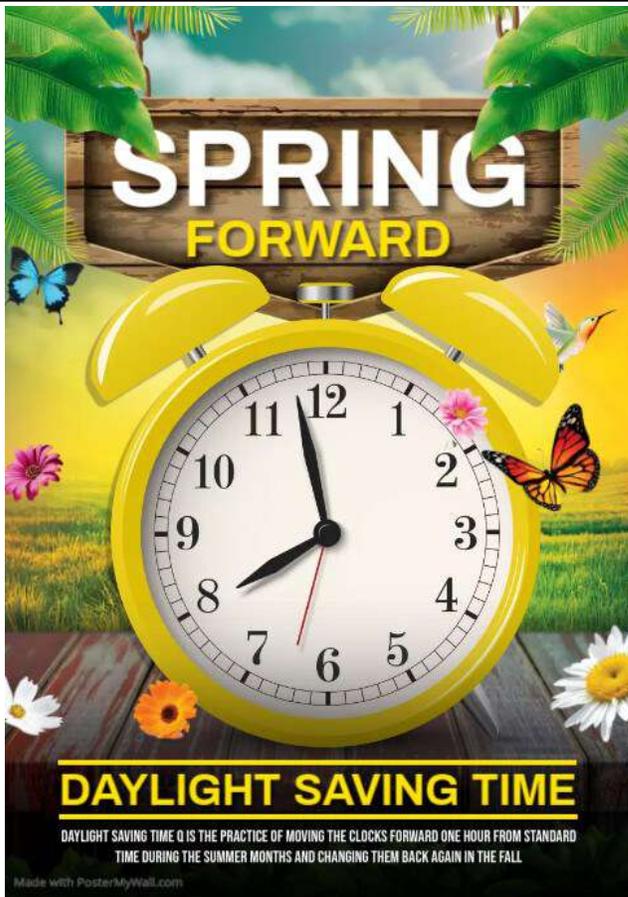
Medicare's main goals with TEAM are to end fragmented care, where different doctors and services don't communicate well, and to reduce unnecessary emergency room (ER) visits and avoidable hospital readmissions. Fragmented care can leave you feeling lost, with mismatched medications or delayed follow-ups. By focusing on teamwork, TEAM encourages hospitals to coordinate everything from your surgery to 30 days after you go home. This includes follow-up visits, rehab, home health aide, and even skilled nursing if needed. The result? Fewer surprises, like rushing back to the ER for pain or infection that could have been caught early, and lower costs for Medicare overall.

Imagine you're an 75-year-old widow recovering from a knee replacement. Without TEAM, you might leave the hospital with confusing instructions, struggle to get physical therapy scheduled, and end up in the ER with swelling because your primary doctor wasn't looped in. With TEAM, the hospital assigns a care coordinator who checks in regularly, arranges home visits, and ensures all your providers share notes. This means quicker healing at home, less stress, and avoiding that scary readmission—just what you need to get back to enjoying time with grandkids.

About 741 hospitals across 188 areas nationwide are required to join this mandatory program. It runs for five years, from January 1, 2026, to December 31, 2030, giving Medicare time to test if this approach really works.



Time to Change your Clocks



Don't forget to change your clock forward on March 8

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To Make suggestions, go to Suggestion link below:
[Suggestion Box](#)

Facebook Webpage Address:
<https://www.facebook.com/Mendedheartsthurstoncounty>

Chapter Board Meetings

Chapter Board Meetings are open to all Chapter Members. We are currently meeting via ZOOM. If you are interested in attending, contact Michael Blonden at Mblonden@msn.com for a ZOOM link.

If you are feeling great and would like to help others, why Not make a donation to our Chapter (Mended Hearts of Thurston County). Mail donation to:

**Mended Hearts Chapter 130
PO Box 5551
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Every Dollar Helps. Thanks!!