



Tun Ahmad Sarji bin Abdul Hamid
President

The Heart of a Nation

The rebirth of Malaysia at the last general election resonated globally and we made it into the history books when former Prime Minister Tun Dr Mahathir Mohamad was sworn in once again, to become the world's oldest leader. This is certainly no mean feat for someone at the golden age of 93 years! It is remarkable how much he has achieved in spite of two heart bypass surgeries, the first in 1989 followed by the second in 2007.

Some say that age is just a numerical value while others say that genes play a larger role. Of course, there are many factors but the most obvious one is that we mould our outcomes. True, a healthy lifestyle is no guarantee of longevity, but it does dramatically increase the odds of gracefully ageing whilst retaining a good quality of life.

Toward this end, the health of your heart should be taken seriously. It's not too late to get started, and every little thing you start doing today can and will add up to affect your health many years from now. Leading a healthy lifestyle is a choice and you can start with little things such as getting enough sleep at night, eating healthily, and getting enough exercise. All these little things in life will influence the state of your health at a later stage.

As it can be difficult to make too many changes at once, start with just one at a time. For instance, if you do not regularly eat fruits and vegetables, make it a point to have at least one serving with each meal. It is far easier to make small adjustments to your current habits rather than a major change all at once.

We certainly hope that you can be inspired by our 'new' Prime Minister, who is still full of vim and vigour, to take ownership of your own health. So don't hesitate to take the necessary steps and start on the road to better heart health!





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Taking Care of Your Heart

Our ongoing efforts to garner greater public awareness reflect how seriously we take our role of preventing heart disease. At YJM, we take every possible opportunity to do this with frequent community-level programmes that aim to educate Malaysians about the importance of heart health.

There is more to being heart-healthy than just sticking to a healthy diet. In order to reap the full benefits, a holistic approach is best, which is why we advocate a healthy lifestyle that encompasses eating healthily, getting enough sleep, managing your stress levels, and being physically active.

A common problem is that too many Malaysians have unhealthy diets and lead a sedentary lifestyle, both of which are major risk factors for cardiovascular disease. Regular exercise and eating healthily will go a long way toward reducing your risk of heart disease.

In this issue, the highlight is on understanding heart failure better as it is rapidly becoming more common with our ageing population and increasing numbers of survivors from heart disease. We also have feature articles on CPR as first aid for cardiac arrest, and how fasting actually helps with heart health.

Lastly, it is my sincere hope that all Malaysians will start taking action immediately and that they will be inspired to make positive changes in their lifestyles. Reduce your own risk of heart disease and help fight the heart disease 'epidemic' that afflicts our nation.

Datin Dr Liew Yin Mei

Mulias

List of Activities / Programmes:

Heart Week Programmes



Poster presentation during Alor Setar Heart Week in Kedah • 25-29 April 2018

Anti Smoking Campaign





The public taking a carbon monoxide breath test • 21 October 2017

Community Programmes



Checking blood pressure @ SK Taman Segar Cheras, Kuala Lumpur • 12 January 2018



Walk-in registration for free health check

© Surau Al Islah Cheras, KL • 28 January 2018



Free consultation with the public @ Taman Bukit Serdang, Selangor • 4 February 2018



Checking height and weight for BMI @ Kg. Dioh, Kuala Pilah, Negeri Sembilan • 8 April 2018



Free blood glucose test provided to the public @ Felda Palong 14, Negeri Sembilan • 22 April 2018



Long queue for free health check @ Pangsapuri Anggerik, Kuala Lumpur • 13 May 2018

School Programmes



Taking a blood glucose test @ Sunway College, Johor Bahru, Johor • 11 March 2018



Overwhelming response @ UCB Setiu, Kuala Terengganu • 1 April 2018



Part of the crowd flocking to register @ MSU College, Kuala Terengganu • 2 April 2018



Free health check @ Consist College, Hulu Kelang, Selangor • 4 April 2018



A group of friends checking their blood glucose @ SMK Seremban 2, Negeri Sembilan • 10-11 April 2018



A young lady having her blood pressure checked @ SM Stella Maris KL • 2 July 2018

Workplace Programmes



Health-conscious executives waiting for their turn @ Takaful Ikhlas Sdn Bhd, KL • 20-21 March 2018



Learning about the 'healthy plate' @ UPECA Aerotech, Selangor • 3 May 2018

Go Red For Women Programmes



Health talk with Go Red For Women by Pegawai Tadbir Diplomat Tasek Perdana, KL • 17 March 2018

JOINING THE FIGHT AGAINST METABOLIC SYNDROME

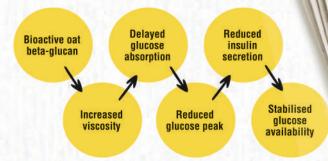
Fighting MS, Naturally

Metabolic Syndrome or MS is the result of unhealthy eating habits and lack of physical activity. Growing evidence shows that high intakes of cereal grains like oat bran powder are beneficial. The use of health claims

with beta-glucan-rich foods such as oat bran powder for cholesterol reduction and glucose regulation have been allowed in Malaysia. Thus far, no human adverse effects have been reported following the long term consumption of a diet rich in oat beta-glucans (OBG)2.

Through many clinical trials, the ability of OBG to form highly viscous solutions in the human gut has been found to be the basis of its health benefits, which include lowering blood cholesterol levels, lowering postprandial glucose and insulin responses, and potentiating the feelings of satiety (feeling of fullness) for better weight control3.

How Does It Work?



Abdominal or central obesity (high visceral fat)

> Hypertension (high blood pressure)

> > Hyperglycemia (high blood sugar level)

Dyslipidemia (high blood fatty acid concentrations)

Low blood levels of HDL (good) cholesterol

Metabolic syndrome (MS) is defined by a combination of three or more of the above medical conditions

> CHOLESTEROL-LOWERING & BLOOD GLUCOSE-REGULATING EFFECTS WITH OVER 20 CLINICAL STUDIES

National Health & Morbidity Survey (NHMS) 2015 MAVE DIABETES MILLION Malaysians HAVE HIGH BLOOD CHOLESTEROL

ge by Yayasan Jantung Malaysia (The Heart Foundation of Malaysia):



, as part of your low fat and cholesterol diet to help

1. Made from all natural, Swedish oat bran. Free from artificial

REASONS Why You Should Choose

- ingredients, thickeners & fillers.
- 2. Provide 3g bioactive oat beta-glucan² per daily serving.

Biogrow® Oat BG22®

- 3. Very rich in Fiber & High in Protein.
- 4. Lab-tested **low in Glycemic Index (GI < 55)3 and suitable for diabetics.
- 5. Good solubility. The powder dissolves readily in cold or lukewarm water without the use of a shaker.

References:

- L. Azadbakht et al. Diabetes Care, vol. 28, no. 12, pp. 2823–2831, 2005.
 J. Hallfrisch & K. M. Behall. Cereal Chemistry, vol. 80, no. 1, pp. 76–79, 2003.
 Journal of Nutrition and Metabolism Vol 2012, Article ID 851362, 28 pages doi:10.1155/2012/851362
- EFSA Journal 2010; 8(12):1885 & 2011; 9(6):2207
- Bioactive oat beta-glucans are high in molecular weight and have been scientifically shown to produce good viscosity effect in the gut for optimal cholesterol-lowering effect - EFSA Journal
- Diets that are of low glycemic index and high in dietary fiber are protective WHO Europe Diabetes.



Share this information with your loved ones and enjoy a healthier life today!

MNRB Fun Run 2018

MNRB Holdings Berhad (MNRB) held the MNRB Fun Run 2018, which took place at Ulu Pudu Recreation Park, Kuala Lumpur, on 18 March 2018. Some 300 employees and family members of the MNRB Group participated in the event. The run was flagged off by Encik Mohd Din Merican, President & Group Chief Executive Officer of MNRB at 7.00 am.

During the event, MNRB also presented a mock cheque for RM25,000 to the Heart Foundation of Malaysia (YJM) in support of the foundation's noble cause to educate and enhance overall awareness of heart health amongst Malaysians.

MNRB Fun Run 2018 was divided into three categories; Mixed Single Category, Family Category and Fun Run Category.



Datuk Dr J.S. Sambhi presenting his book "Doctor on the Move" to En Mohd Din Merican (President & Group CEO)



Part of the crowd before the run



Getting ready for the run



All smiles during the run



Families enjoying the run together

Giving for A Good Cause

Fitness Concept Group Founder & Managing Director, Bernard Au Yong (3rd from left) presenting a mock cheque to YJM Chairman Datuk Dr J.S. Sambhi on 8 February 2018





Donation to YJM from UKM Fit & Fun Carnival Collection (28 February 2018)



Donation to YJM from President of Young Malaysia Movement (Segamat Branch, Johor) on 4 December 2017 event "Run for your Heart"



Heart Failure

By Datin Dr Liew Yin Mei

As the aging population in Malaysia increases with better health care and socioeconomic conditions, the prevalence of heart failure increases largely from survivors of heart disease and increasing age with its associated illnesses like hypertension, kidney disease, obesity etc.

Heart failure heralds the end stage of heart diseases. It results from heart disease which impairs the ability of the heart to function as a pump to support the circulation in the body.

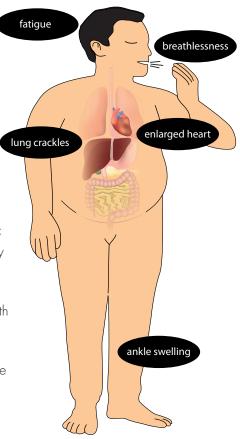
Typical symptoms of breathlessness, fatigue, ankle swelling and signs of ankle or leg oedema, lung crackles and an enlarged heart are present.

The incidence increases with age from 2–4% in the 3rd and 4th decades of life to about 10% in the elderly more than 65 years of age. With our rapidly aging population, it is a common problem and is an important cause of hospital admissions and re-admissions.

Though the prognosis for heart failure has improved over the last decade with better treatment modalities, the mortality rate remains high, even worse than some cancers.

The one year mortality for heart failure varies from 5–50%, depending on the severity and presence of other diseases like diabetes.

The New York Heart Association (NYHA) Classification of Heart Failure describes the severity of different stages of Heart Failure and its prognosis.



NYHA Functional Classification of Heart Failure

		3			
Class 1	Class 2	Class 3	Class 4		
No limitationNo symptoms with ordinary physical activity	 Slight limitation Ordinary physical activity causes fatigue, breathlessness or chest pains 	 Marked limitation Less than ordinary activity causes symptoms. 	Symptoms at rest, worse with activity		
1 year mortality					
5 – 10%	10 –15%	15 – 20%	20 – 50%		
			Image from www medcomic com		

It is important to identify the underlying cause and precipitating factors for heart failure and manage these accordingly.

Common causes are:

Coronary Heart Disease

This is the commonest cause of heart disease. With better and more treatments available for CHD, survival is prolonged, leading to a large population of elderly patients who eventually succumb to heart failure.

Hypertension

Hypertension is a common condition worldwide and in Malaysia, affecting more than 40% adults > 30 years. Long term poorly controlled hypertension is also an important and common cause of heart failure.

3 Valvular diseases which may be congenital or rheumatic in origin though less common nowadays, also result in heart failure eventually if not corrected or treated early.

Other congenital heart diseases like 'hole in the heart' (atrial or ventricular septal defects) similarly can lead to heart failure.

Heart muscle diseases like cardiomyopathy, viral myocarditis, toxic substances like alcohol, drugs and metabolic disorders like thyroid diseases are also well known causes.

Investigations

Tests like ECG, Chest x-ray, Echocardiogram, Blood tests, MRI, Nuclear scanning, Coronary Angiogram may be necessary to help in the diagnosis and establishment of the underlying causes.

Treatment is aimed at relieving symptoms, preventing and controlling the underlying disease, retarding progression of heart failure, prolonging life and more importantly, improving the quality of life.

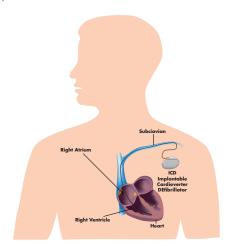
Non-drug therapy comprises of

- Education of patient to understand his illness and the importance of compliance to therapy and avoidance of self medications
- 2. Diet and nutrition
 - Avoid obesity
 - Salt restriction especially is severe heart failure.
 Avoid or limit foods like soya sauce, salt, extracts
 like marmite, enhancers like monosodium
 glutamate, processed foods like canned foods,
 cured meats, salted chips, salt fish, belacan etc:
- 3. Stop smoking and alcohol
- 4. Regular exercise encouraged
- Vaccinations against influenza and pneumonia are recommended to prevent these infections which not only aggravate heart failure but are often lethal in these patients.

Drug therapy is the cornerstone of treatment in Heart Failure. Numerous drugs and newer medications have helped to improve symptoms, reduce the need for hospitalisations and also prolong life in heart failure.

In addition, new advances like **device therapies** are helpful in some patients. Studies have shown that 40 - 50% deaths in heart failure are sudden, especially in severe cases. This is often due to rhythm disturbances. The **implantable cardiac defibrillator (ICD)** is useful in suitable patients.

In some cases with very weak hearts, despite optimal medications, **cardiac resynchronisation therapy (CRT)** with a biventricular pacemaker may improve symptoms, reduce hospitalisations and mortality.



Various surgical procedures may be necessary or helpful in instances where the pathology causing the heart failure is amenable to surgery for example:

- i. Revascularisation with bypass surgery or angioplasty if benefit is likely in these cases
- ii. Heart valve surgery if the defective valve is causing the heart failure,
- iii. Removal of a left ventricular aneurysm which aggravates the heart failure, causes thromboembolism and rhythm disturbances.

Heart transplantation is a complex treatment for severe end stage heart failure as a last resort, and is limited by lack of donor organs.

Therefore it is only carried out in selected patients who meet the eligibility criteria namely patients with:

- Very severe heart failure, refractory to the above therapies.
- No systemic diseases like malignancies, complicated diabetes, kidney disease, liver or lung disease etc. which would impact survival.

In conclusion, heart failure is a serious debilitating illness which runs a progressively downhill course. Though there is light at the end of the tunnel with various medications and devices, such expensive complex treatments are not without side effects and complications.

Therefore **PREVENTION** is the key to avoid these problems and prevention starts with avoidance and management of risk factors for coronary artery disease and hypertension as there are the most common causes of Heart Failure.

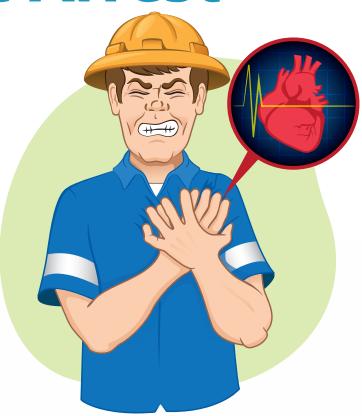
CPR as First Aid for Cardiac Arrest

You most probably have heard of CPR and saw people performing CPR in movies or TV shows. However, do you know what it stands for? CPR stands for cardiopulmonary resuscitation and is part of first aid during emergencies when one's breathing or heartbeat has stopped, like in case of cardiac arrest, drowning, electrical shock, or stroke.

Immediate CPR can improve the chance of survival after the heart stops beating. It keeps oxygenated blood flowing to the brain and other vital organs, even if partially, until comprehensive medical treatment can be given to restore the normal heart rhythm.

Cardiac arrest or heart attack?

Cardiac arrest and heart attack are often used interchangeably, but they are actually two different problems related to heart. Cardiac arrest is the sudden, unexpected loss of heart function, breathing, and consciousness due to an electrical disturbance in the heart. This disturbance causes an abnormal and irregular heartbeat (arrhythmia), which disrupts the pumping mechanism and blood flow to the brain and the rest of the body. In case of cardiac arrest, a person suddenly collapses and loses consciousness, without signs of pulse and breathing. It often occurs without warning, but other signs may precede cardiac arrest, such as fatigue, fainting, blackouts, dizziness, chest pain, or shortness of breath. If not treated immediately, it can lead to death. If someone suffered cardiac arrest, immediately call the emergency number and perform CPR; use an automated emergency defibrillator (AED) if available.



Meanwhile, a heart attack is a circulation problem that happens when blood flow to the heart is blocked. When oxygenated blood is prevented from reaching a section of the heart due to a blocked artery, the part of the heart will begin to die, leading to heart attack. Symptoms of heart attack include intense discomfort in the chest or other areas of the upper body, shortness of breath, cold sweats, and nausea. Heart attack is one common cause of cardiac arrest when left untreated. In case of a heart attack, immediately call the emergency number.

Types of CPR

Conventional CPR	Hands-only CPR
If trained and confident with CPR skill	If untrained or unconfident
Chest compression and rescue breath	Only chest compression
100-120 compressions per minute	100-120 compressions per minute
5-6 cm compression depth	5-6 cm compression depth
Repeat 30 chest compression followed by 2 rescue breaths until the victim recovers or help arrives	Steady chest compressions without rescue breaths
Rescue breaths: to move oxygen into the lung and assist respiration	Chest compressions: to keep the blood flowing, especially to vital organs, i.e. the brain

Performing CPR

CPR should only be used if someone is unconscious and is breathing irregularly or not breathing at all. Follow these simple steps to perform CPR on adults or teens:



Even if you are not fully trained to perform CPR, you can save a life. Hands-only CPR is better than no CPR at all. The longer a victim goes without any treatment or aid, the greater the damage will be. The difference between doing something and doing nothing can mean someone's life.



Puasa Boleh Menyihatkan Jantung

Hajjah Ainon Hj Kuntom

Puasa adalah menahan diri daripada makan dan minum dalam masa yang ditetapkan oleh kebanyakan agama. Penduduk Malaysia menganut agama Islam dengan demikian bulan Ramadan merupakan bulan yang wajib untuk berpuasa. Berpuasa menitik beratkan mendidik manusia dengan sifat-sifat murni. Dalam konteks Islam sifat ini adalah merupakan menanam sifat ketakwaan kepada Allah:yang merupakan sifat-sifat mensyukuri/menerima kasih di atas nikmat hidup yang diberikan oleh Allah kepada kita. Sebagai manusia kita tidak akan merasai nikmat dan kesyukuran yang diberikan kepada kita melainkan kita mengalami atau mempraktikkan perbuatan itu sendiri.

Misalnya kita tidak tahu bagaimana rasa laparnya orang miskin, sekiranya kita tidak menjalani ibadah berpuasa sendiri. Ini merupakan jalan yang praktikal untuk mempelajari apa itu lapar, dan sabar apabila kita menahan diri daripada makan dan minum. Pelajaran yang didapati setelah berpuasa boleh membimbing kita untuk mewujudkan sifat sentiasa bersyukur dan mengasihi di antara satu sama lain.

Bagi kita bulan puasa merupakan bulan untuk merehatkan sistem penghadaman (digestive system). Waktu inilah segala sifat dalam sistem penghadaman dapat rehat dan membersihkan kumbahan-kotoran seperti lemak dan cecair yang boleh membawa penyakit kepada usus dan perut kita. Di sini puasa boleh mengaktifkan sel sel baru dan membuang sel-sel lama yang telah digunakan. Semua mendapan sisa cecair yang berlebihan selama sebelas bulan kita makan dan minum boleh dicuci diperut dan usus semasa berpuasa. Cucian ini boleh menolong membersih atau membuang mendapan racun yang terdapat dalam badan terutama usus dan perut yang boleh mengakibatkan kotoran kepada pengaliran darah yang akan memudaratkan jantung.

Seyogia diingatkan apabila berbuka puasa mulakan dengan minuman air panas seelok-eloknya minuman air suam biasa sahaja bagi mencuci kekeringan dalam usus. Selepas itu makan kurma/tamar yang manis dan barulah makan makanan yang lain. Cara berbuka puasa begini tidak akan melemahkan badan untuk melakukan ibadat lain selepas berbuka puasa.

Begitu juga dengan bangun sahur, makanlah makanan seperti kita ambil pada waktu sarapan pagi, dan jangan lupa mengambil ubat yang perlu untuk menjaga kesihatan jantung.

Puasa boleh menjaga kesihatan hati dan jantung serta anggota badan lain. Dengan demikian Puasa boleh mengembalikan kesihatan badan yang telah hampir lemah selama sebelas bulan kita makan dan minum mengikut nafsu selera kita. Puasa boleh menyihatkan jantung dan badan kita kepada keadaan sediakala ataupun normal. Selepas sebulan berpuasa keadaan badan akan mula bertenaga membolehkan manusia memulakan kehidupan dengan lebih cergas menjalankan kehidupan harian.



PLANNER FOR 2018

MONTH	DATE	PROGRAMME	VENUE
JULY	2	School / College	S.M Stella Maris, Kuala Lumpur
	4-8	Heartweek	Kuantan Parade
	14	School / College	UPM IOI Mall
	21	Community	Kg Sireh, Kota Bharu
	22	School / College	KUPTM Kota Bharu
	24-26	Workplace	MQA Cyberjaya
AUGUST	5	Community	KUTAR Kampar
	6	Community	M.P. Teluk Intan
	7	School / College	Kpg Komuniti Teluk Intan
	11	Go Red for Women	Pos Brooke GM
	17-19	Heartweek	GM Klang
SEPTEMBER	3 6 7 13 23 26-30	Go Red for Women School / College Community School / College Heartweek Heartweek	TBD Kolej Kom. Jerai Baling, Kedah ASWARA Kuala Lumpur World Heart Day 2018 (TBD) AEON Seremban 2
OCTOBER	6 13 14 17 20 21	Go Red for Women Community Community School / College Community Community	Taman Melewar Sungei Jerik Mentakab KU Agrosains Melaka Parit Buntar, Perak Tanjung Piandang, Perak
NOVEMBER	8	Workplace	UPECA Aerotech
	14-18	Heartweek	AEON Permasjaya
	26	School / College	Geomatika University College
DECEMBER	5-9	Heartweek	Melaka Mall
	18	Workplace	Alloy MTD Berhad, Kuala Lumpur
	19	Workplace	OSK Holdings Berhad, Kuala Lumpur

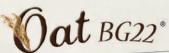
FOR INFORMATION

YAYASAN JANTUNG MALAYSIA

The Heart Foundation of Malaysia

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☐ I am enclosing my comments.			
\square Please include my name in the mailing list of Yayasan Jantung Malaysia for future publications.			
☐ I am enclosing herewith cheque/draft/money order for RM	_ being my donation.		
(Tax-exempt receipt will be issued)			





CHOLESTEROL-LOWERING & BLOOD GLUCOSE-REGULATING EFFECTS WITH OVER 20 CLINICAL STUDIES:

National Health & Morbidity Survey (NHMS) 2015

9.6 MILLION Malaysians
HAVE HIGH BLOOD CHOLESTEROL

3.5 MILLION Malaysians HAVE DIABETES

Maintaining healthy cholesterol & blood glucose levels, The Most Natural Way

