



PLEASE EXERCISE!!

Exercise For Your Health.



DATUK DR J.S. SAMBHI P.J.N., M.B.B.S., F. R.C.O.G, (London), F.A.M.M Chairman

Exercise Reduces or Prevents

OBESITY

HEART PROBLEMS

DIABETES

STROKE

HIGH BLOOD PRESSURE

STRESS

CANCER

CHRONIC KIDNEY DISEASE PREMATURE DEATH

Malaysians **DO NOT** exercise: 60% LEAD A SEDENTARY LIFE.

Exercise is free & can be tailored to individuals.

YOU ONLY REQUIRE"WILL POWER".

Gym & Exercise equipment – not necessary!

BRISK WALKING 30 MINUTES A DAY 3 or 4 times a week, is all you need. It can be done at any time of your choice, either alone or with others.

It can be undertaken:-

- a. At HOME or at WORK place
- b. In a "friendly environment" outside
- c. Shopping complexes (fast walking!!)

PLEASE WALK 10,000 steps a day.

Normal people walk 6 or 7,000 steps, so just add the EXTRA for your good health.

EXERCISE
AND PROPER
DIET INCREASES
LIFE SPAN.

Remember...

"SMILE AND ENJOY
EXERCISING!!"



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Secretariat

6, Lorong Lai Tet Loke 2, Off Jalan Gurney, 54100 Kuala Lumpur. Tel: 03-2693 4709 Fax: 03-2693 3267 Email: jantung1@streamyx.com Website: www.yjm.org.my

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Editor's Note

Our health is a something that should be close to heart. Our daily decisions determine the state of our health - how long we decide to sleep at night, what we eat and drink, and how much exercise we take. When it comes to health, be it digestive health, heart health or mental health, there is no such thing as a fixed day or time to

In the same way, our heart health, which is integral to our overall health, depends on the daily choices we make; we should not have to wait until "World Heart Day" which falls on September every year to give full attention to our heart health.

Heart problems and heart diseases are exceedingly prevalent worldwide, and it's true in Malaysia. In fact, heart disease has been the number one killer in Malaysia for the past three decades. It is now very common to hear that many around us suffer from heart problems, have experienced a heart attack or stroke, undergone bypass surgery or done a balloon angioplasty (non-surgical procedure to treat coronary artery blockages).

Of concern is the serious public misconception that heart disease is a "men's disease" simply because it develops in men 10 years before it does in women. Each year, over 8.6 million women die from heart disease and stroke globally, and this is more than the total number of women who die from all cancers, tuberculosis, HIV/AIDS and malaria combined! It is the number one killer of women in Malaysia for decades.

Women also face a higher risk of cardiovascular diseases (CVDs) as they age due to the physiological changes associated with menopause. A woman's natural protection against heart disease – oestrogen (hormone) - can reduce with menopause, thus leaving her susceptible to CVDs.

Due to this escalating trend, heart health among women should be given higher visibility. In the US, research findings have shown that Hispanic and Asian women are more likely to suffer from heart disease due to a lack of awareness on heart health or their risk factors. This is one of the key reasons why creating awareness of heart disease among women in Malaysia is of utmost important.

Preventing heart disease is possible as most of its contributing factors are avoidable. The key risk factors include obesity, high cholesterol, high blood pressure, diabetes, high fat intake, sedentary lifestyle and smoking. Patients with high cholesterol and a family history of high cholesterol should start discussing medications with their doctors early.

It is also important for women to recognize the early warning signals of a heart attack such as angina (commonly known as chest pain), sleep disturbances, breathlessness and fatigue. Other possible symptoms are swelling in the legs and feet, and leg pain when walking. Women play multiple roles in society and because these factors are often present in women's daily lives, many women waive aside these symptoms as 'normal tiredness' or a part of the aging process. More worrying is that when they seek treatment, it is possible that they are not appropriately diagnosed, thus delaying the treatment or getting the wrong treatment.

It is my fervent hope to see more women empowering themselves with the knowledge that breast cancer and cervical cancer are not the only killers of women, but heart disease as well. There should be wider awareness and more efforts by the public and private sectors to educate women on heart disease to dispel the myth that heart disease only affects men. Don't leave your heart health to chance!

Go Red For Women!

DATO' DR KHOO KAH LIN



Heart Healthy Week

Never too late!

Your health is not something you can leave aside & pick up anytime you want. In order to have a healthy heart, you need to start caring for your health from a young age. Many of us perceive heart diseases as old folk diseases, which is WRONG! Heart diseases can strike even the young, and this situation has become more & more prevalent.

Kudos if you are working towards a healthy heart! But if you have yet to start, today is never too late to begin!



• January 17, 2012

• February 14 – 15, 2012

SMT Kajang, Selangor • Mar 8 – 9, 2012



Johor Bahru (Tebrau City Jusco) • February 21 – 26, 2012

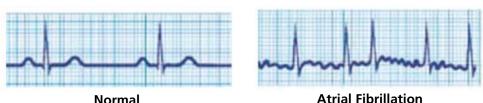
MNRB, KL • March 19 - 21, 2012

Medical Updates



The New Oral Anticoagulants in the Treatment of Atrial Fibrillation

Atrial fibrillation is characterized by a chaotic electrical activity in the atria that induces an irregular and usually rapid contraction of the ventricle.



There is an increased risk of stroke up to 5 fold depending on the presence of risk factors using the CHAD-2 tool. The use of an anticoagulation such as warfarin has been shown to reduce the rate of stroke by 65-68% compared to placebo. Guidelines strongly recommended warfarin for patients with moderate to high risk of stroke. In patients with low risk of stroke by CHADS-2 tool (no previous stroke and only one risk factor), either aspirin or warfarin is reasonable – CHAD-2 Score 1. CHAD-2 Score 0 does not require any medication.

There are problems associated with anticoagulation with warfarin:-

- Unpredictable pharmacodynamics
- 10-20 fold interindividual difference in dose requirement
- A plethora of interaction with other drugs, certain foods, herbal remedies
- Frequent laboratory monitoring
- Need for initial overlap with parenteral anticoagulant
- Need for bridging anticoagulant in case of surgery (at least if high thromboembolic risk)
- Patient unwilling to take "rat poison"
- Increase bleeding 2.5-5 major bleedings per 100 patient years compared with 1-2 major bleedings in aspirin treated patients

Newer oral anticoagulant drugs (OAC) have fewer side effects and easier to use:-

- It does not require blood tests for monitoring
- No drug intervention
- No food interaction
- Efficacy not inferior to warfarin
- Less Intracranial Haemorrhage, but similar rates of major haemorrhage

Currently there are two groups of oral anticoagulant drugs in the market:-

- a) Direct thrombin inhibitor such as Dabigatran (Pradaxa)
- b) Direct factor Xa inhibitor such as Rivaroxaban (Xarelto)

The two trials ROCKET AF (Rivaroxaban) and RE-LY (Dabigatran) showed the efficacy and safety compared with

The table shows a comparison between Rivaroxaban (ROCKET AF) and Dabigatran (RE-LY).

	Rivaroxaban 20/15 mg vs warfarin in ROCKET AF	Dabigatran 150 mg bd vs warfarin in RE-LY
Design	Double-blind	Open-label
Efficacy	Non-inferior to warfarin Superior to warfarin on treatment	Non-inferior to warfarin Superior to warfarin
Safety	Similar rates of major haemorrhage Less Intracranial Haemorrhage	Similar rates of major haemorrhage Less Intracranial Haemorrhage
Others	Once daily Trend towards lower incidence of MI Adverse events similar to warfarin Equal discontinuation rates	Twice daily Increased incidence of MI Increased dyspepsia Higher discontinuation rates

The new oral anticoagulants are easier to use, with equal efficacy and less adverse effects. Between the oral thrombin inhibitor (Dabigatran) and oral Xa inhibitor (Rivaroxaban), Rivaroxaban appears to be slightly better.

Obituary

"Your life is in the hands of God. Your life is not yours and you may go anytime. If it comes, it comes. If your time is not up, then you won't go" (end of Quote)

Quoted from an interview with the late Tan Sri Dato' Dr Abdul Aziz Zain, Vice President of the Heart Foundation of Malaysia (YJM) for Berita Yayasan Jantung Malaysia (May 2008).

Tan Sri Dato' Dr Abdul Aziz Zain was born on November 10, 1922 and passed away peacefully in his sleep, on January 19, 2012. He was 90 years old.

Tan Sri Dato' Dr Abdul Aziz Zain, joined the Heart Foundation in 1990, and his many contributions, from the early days of the Foundation, gave it the push it needed to grow, and helped bring it to where it is today. In 1998, Tan Sri Dato' Dr Abdul Aziz Zain, pioneered the start of a "Halfway House" on a piece of land granted to the Foundation, by the Government for the family members of patients, who were unable to afford hotel or hospital accommodation. His inspiration, for the Halfway House, came from a late night visit to the Institute Jantung Negara (IJN); where he observed people, including children, sleeping on the floor around the hallways. These people had come from distant kampungs, from different states of Malaysia. This prompted Tan Sri Aziz to establish a Halfway House.

A Lawyer, by Profession, Tan Sri Aziz Zain was seconded to Brunei as an Attorney General in 1962. Coincidently, at the same time, Datuk Dr Sambhi (Chairman of YJM) was also seconded to Brunei from The Ministry of Health. It was during this period that a deep friendship developed and remained until today.



On returning to West

Malaysia, Tan Sri Aziz was appointed to the Bench, later promoted to a Federal Court Judge. In 1970, Tan Sri Aziz was appointed Chairman of National Electricity Board Malaysia (now known as Tenaga Nasional Berhad (T.N.B.) He completed his duty to N.E.B in 1972.

Around this time, the late Tunku Abdul Rahman Putra Alhaj, the first Prime Minister of Malaysia, was appointed Secretary General to The Islamic World Organization, based in Saudia Arabia. Tan Sri Aziz was appointed as Personal Assistant to the late Tunku Abdul Rahman Putra Alhaj. In 1974, Tan Sri Aziz Zain established his own legal firm, Messrs Abdul Aziz, Ong & Co, in Bukit Bintang, Kuala Lumpur, still in operation today. In 1980, Tan Sri Aziz was the Chairman of the Royal Commission investigating a fire, at a school hostel in Kedah. The late Tan Sri Aziz Zain served in many select committees of the Government and was also Secretary to Perkim under the patronage of Tunku Abdul Rahman Putra Alhaj.

Tan Sri Dato' Dr Abdul Aziz Zain was a man of vision and compassion. His demise is a great loss to Malaysia, but his contributions and services, which have benefitted many, will always be deeply appreciated by all walks of life.

Compiled by: Datuk Dr J S Sambhi

Feature Event

Unveiling the Rotary Plaque

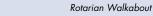
The Rotary Club of Kuala Lumpur DiRaja's initiative in the formation and establishment of the Heart Foundation of Malaysia (YJM) is officially recognised.

The ceremony to unveil the Rotary Plaque was held at YJM's Hall on March 7, 2012.

On arrival, members of the Rotary Club were treated to a "Rotarian Walkabout" of YJM premises. After the walk, they congregated in the hall where they

were formally welcomed by Datuk Dr Sambhi, Chairman of YJM on the formation of The Heart Foundation of Malaysia.

This was immediately followed by the unveiling of the plaque by YJM BOD members, Datuk Dr Sambhi, Dato' Gurbakhash and Dato' Kamarulzaman and Rotarian In-coming President and team,



Dato' Beh, Dato' Mus, Chan Kam Fatt.

Datuk Dr Sambhi, Chairman of YJM, then presented souvenirs to Chan Kam Fatt, President Elect of Rotary Club DiRaja. In return, Chan Kam Fatt presented the Rotary Club's banner to Datuk Dr Sambhi.

To conclude this memorable event, all Members of the Rotary Club of Kuala Lumpur DiRaja were treated to lunch at YJM's premises.



Chan Kam Fatt presenting Rotary Club's Banner to Datuk Dr Sambhi

Rotary members enjoy a scrumptious lunch hosted by YJM





Welcome speech by Datuk Dr Sambhi, Chairman of YJM



Datuk Dr Sambhi presenting Chan Kam Fatt with a token of appreciation



Presentation of Proton Exora to YJM

In line with Proton's Corporate Social Responsibility programme and their initiative to bring their brand closer to the community, Proton donated a Proton Exora to Yayasan Jantung Malaysia (YJM) on 23 Dec 2011.

During the presentation ceremony, YBhg Dato' Sri Mohd Nadzmi Mohd Salleh, Chairman of Proton Holdings Sdn. Bhd. handed over the keys of the Proton Exora to Datuk Dr J. S. Sambhi, Chairman of Yayasan Jantung Malaysia, accompanied by Dato' Gurbakhash, Vice Chairman of YJM and Sir Steven Soh, Hon Secretary of YJM.



YBhg Dato' Sri Mohd Nadzmi Mohd Salleh handing over the keys of Proton's multi-purpose vehicle (MPV) to Datuk Dr J. S. Sambhi

Port Dickson Motivational Course



Sitting (left to right): Sir Steven Soh Teck Toh (Secretary), Col (Rtd) Mohan Singh (Motivational Course Conductor), Dato' Gurbakhash Singh (Vice Chairman), Datuk Dr J S Sambhi (Chairman), Datin Margaret Sambhi (Board of Director/Executive Manager) and Datin Davinder Kaur.

"We thank the Board of Directors (BOD) for organising such a beneficial and motivational course."

"We were taught how to communicate with our leaders & our colleagues."

"We've learnt how to implement SMART Goals into our daily work."

"We were given the opportunity to discuss the problems we faced in the office."

The BOD of YJM aims to organize at least one motivational course each year, which is targeted at building rapport amongst YJM colleagues & keeping them motivated to continue to strive for the benefit of Malaysia's community.

This year's motivational course was conducted by Lt Col (Rtd) Mohan Singh Rendhawa in Casa Rachado Resort Port Dickson. Activities included: Introduction of SMART Goals & groups work on SMART Goals with objectives, Jungle Trekking to Light House, Talent Show case, Raft Building & Sailing and etc.



Jungle Trekking to Light House



Raft Building & Sailing

Getting to Know Dato' Dr Khoo

Dato' Dr Khoo Kah LinConsultant Cardiologist & Director of Heart Foundation Malaysia (YJM)

He constantly strives to make the world a better place, and because of this attitude, Dato' Dr Khoo Kah Lin never hesitates to put himself on the line if he believes that he is helping others. His many significant contributions mark him as someone who has the best interests of others at heart.

Dato' Dr Khoo Kah Lin was recently conferred with not one, but two, Gold Medal awards. The first award from the Rotary Club of Malaysia was the Rotary Research Gold Medal Award. More recently, he received an award from the Malaysian Medical Association, which is the Gold Medal of the Malaysian Medical Association for Outstanding Person, during their AGM in Sungai Petani, Kedah

Dato', what motivated you to become a doctor?

I was quite a sickly child when I was young. Back then, public transportation was nearly non-existent, and since my father was out working, my mother had to care for my siblings and me. Unfortunately, the nearest clinic was quite far away and my mother had no way of getting me to the far-away clinic whenever I was ill.

However, I was lucky as there was a doctor who frequently made house-calls to the families in the neighbourhood. What truly touched me was the fact that the doctor frequently did not accept payment for treating me and this subsequently left a deep impression on me.

This early encounter touched me deeply and was the main driving force behind not just my desire to practise medicine, but also to contribute back to society in the form of establishing and setting up the Sau Seng Lum Cholesterol Dialysis Centre in PJ Old Town.

Can you elaborate more on the Sau Seng Lum Cholesterol Dialysis Centre and your role there?

The Sau Seng Lum (PJ Old Town) Cholesterol Dialysis Centre provides LDL-apheresis – a much needed treatment for patients who suffer from Familial Hypercholesterolemia (FH) at no cost.

My team and I often review each patient before ascertaining if they are eligible for the free treatment at the dialysis centre.



Since the patients need to have LDL apheresis done on a fortnightly basis, the cost is quite substantial. Because of that, I also need to take the initiative to identify and secure donations from corporate sponsors. All this is done in order to keep the cost of treatment for deserving patients free.

Dato', how do you maintain your energy level?

I am a firm advocate of keeping myself physically fit. I love taking walks. If I'm taking my lunch at a restaurant which is just a 5 minute drive away, I would rather walk there. In fact, my normal morning routine is to get up at five and take a brisk walk before heading over to the hospital. Other than my morning walks, I also meet up with a few friends at the Chin Woo Stadium twice a week, where we practice Tai Chi for at least half an hour.

I do my best to live a healthy lifestyle; after all, I can't very well be telling my patients to exercise if I don't do it myself. Of course, I'm no monk; I do have my vices, and the one I most dearly love to indulge in is a cup of affogato.* That's something I can never say no to!

What is your philosophy in life?

Mahatma Gandhi once said, "The best way to find yourself is in the service of others. You must be the change you wish to see in the world."

I believe that wealth is not something we should cling to, and that we should give freely back to the community not just in monetary terms, but also with our time, energy, and effort. I feel that my life has been blessed; throughout my life, I have often met people who have gone out of their way to help me, and whenever I can, I try to do the same. It is always better to give than to receive, so if you can, please make it a point to do some good every chance you get!

* An affogato is a coffee-based beverage that takes the form of a scoop of vanilla gelato or ice cream topped with a shot of hot espresso.



Official Partner:





Admission Mid Valley **Exhibition Centre September 8 & 9, 2012** 10.00 am - 9.00 pm

What are your heart's risk factors? Find out now!

Heart diseases – the number 1 killer of Malaysians for over 3 decades!

Malavsians die of heart attacks 10 years younger, compared to other Asian countries

Highlights:

Exhibition

Free heart-health screening

Cholesterol, glucose, body fat % & nutrition counseling

3-D walkthrough giant heart' structure Know how your heart works? Take a walk inside the 'giant heart' to learn more

Free health-talks*

delivered by renowned cardiologists, doctors, dietitians/nutritionists on ways to maintain a healthy-heart!

- Am i a walking time bomb?
- I have high cholesterol. What can i do?
- How do i lower my heart attack risks?
- Eat your heart out : guilt-free gourmet series

Goodies, gifts and premiums from sponsors*

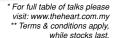
Heart-Space Adventure 10 feet long artery – adventure Heart-Rider fitness challenge

IJN Quit Smoking

Clinic

Visit the 'quit smoking' section to find out how at IJN's booth

latinum Sponsors







































Feature Article

Rawatan WANITA JANTUNG-KU Sayang

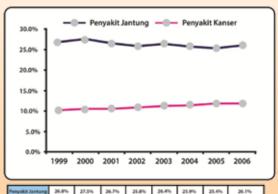
Dr. Abd. Syukur Bin Abdullah Consultant Physician & Clinical Cardiologist, Hospital Sultanah Bahiyah, Kedah (Disunting oleh: Puan Hajjah Ainon Hj. Kuntom)

Wanita memainkan peranan yang penting dalam masyarakat Malaysia kini. Berperanan sebagai isteri, ibu, kakak, pengurus rumahtangga, pekerja di pejabat, kilang dan sebagainya, wanita bukan sahaja tunjang keluarga tetapi juga kepada sosio-ekonomi amnya. Dalam kesibukan dan kesuntukan masa, mereka alpa untuk menjaga kesihatan diri sendiri, sehingga lupa untuk menerapkan cara dan gaya hidup sihat serta meluangkan masa untuk memilih pemakanan yang berzat dan seimbang.

Justeru itu, akibat peningkatan umur pelbagai masalah kesihatan mula dihadapi oleh golongan ini. Penyakit jantung koronari adalah penyakit yang kerap dihadapi dan melibatkan kos yang tinggi untuk rawatan di wad dan juga rawatan susulan. Faktor-faktor risiko yang dikenalpasti adalah seperti penyakit darah tinggi (hipertensi), kadar gula yang tinggi (diabetes) dan masalah kegemukan melampau (obesity) dimana mereka mempunyai berat badan yang tidak seimbang dengan Body Mass Index (BMI).

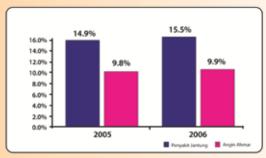
Kematian wanita disebabkan serangan penyakit jantung adalah lebih tinggi daripada kematian disebabkan penyakit kanser. Sila lihat rajah 1.

Kadar kematian wanita akibat dari CVD apabila dibandingkan dengan kematian dari penyakit kanser adalah lebih tinggi



Penyakit Jantung	26.8%	27.5%	26.7%	25.8%	26.4%	25.9%	25.4%	26.1%
Penyakit Kanser	10.1%	10.5%	10.6%	10.9%	11.4%	11.3%	11.8%	11.9%

Kadar kematian wanita akibat dari penyakit jantung dan angin ahmar



Senario, kes di mana seorang wanita pertengahan umur mengadu sakit dada (angina), pendek nafas dan semput terutamanya di waktu malam (paroxysmal nocturnal dyspnea), berpeluh semasa sakit dada adalah merupakan petanda gejala serangan jantung (myocardial infarction) dan memerlukan rawatan segera di hospital. Adalah diingatkan kunjungan dengan seberapa segera dapat mengelakan komplikasi lain serangan jantung seperti lemah jantung (heart failure). Walaubagaimanapun, simptom yang kronik tidak boleh diberi perhatian yang ringan. Kurang pengetahuan dan malas untuk berjumpa doktor bagi tujuan saringan menyebabkan wanita sering ketinggalan dalam mendapat diagnosa ujian awal penyakit. Terdapat beberapa ujian saringan seperti ujian threadmill (exercise stress test) MSCT (Multi-slice CT Coronary), dan dalam kes-kes tertentu berisiko tinggi, angiogram akan dilakukan.

Go Red for women

Wanita dan Penyakit Jantung

Kempen GO RED FOR WOMEN yang dilancarkan kini secara meluas ke seluruh negera perlu disambut baik agar dapat meningkatkan kesedaran dikalangan wanita.

Darah Tinggi

Di Malaysia, mengikut kajian National Health Morbidity 3 (NHMS3 2006), 43% wanita melebihi umur 30 tahun mengidap darah tinggi. Angka ini amat membimbangkan dan peratusan akan semakin tinggi apabila usia wanita semakin meningkat. Di usia melebihi 60 tahun, bacaan sistolik selalunya lebih tinggi dan dalam usia emas ini juga, 80% wanita mengidap darah tinggi dan ini secara tidak langsung meninggikan risiko penyakit jantung koronari.

Obesiti

Seorang wanita yang putus haid (menopause) akan mengalami ketidak-seimbangan hormon dalam badan yang menjadi penyebab penyakit jantung koronari. Berbanding keadaan sebelum dan sesudah putus haid, wanita mengalami fasa perubahan pada tubuh

badan mereka. Perut menjadi mengelebih disebabkan kadar pengagihan lemak dibadan mulai menjadi tidak normal. Keadaan menjadi bertambah teruk jika mereka kurang bersenam atau beriadah. Mereka senang mendapat darah

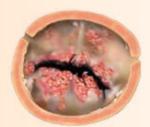
Mereka senang mendapat dara tinggi, ketinggian tahap kolestrol dan kencing

lestrol dan kencing manis; disebabkan hormone insulin mula mengalami pengurangan. Wanita usia ini mempunyai 2 ke 3 kali ganda risiko penyakit jantung

dari wanita belum putus haid. Ini turut berlaku pada wanita yang membuat pembedahan terhadap sistem haid mereka.

Kombinasi Penyakit Darah Tinggi, Kencing Manis dan Obesiti

Kombinasi risiko ini menjadi lebih parah untuk seorang wanita mendapat penyakit jantung koronari. Malah gejala lemah jantung, sama ada sistolik atau diastolic dan angin ahmar (strok) yang lebih kerap pada mereka yang mempunyai kombinasi ini. Kurang pengambilan garam dan gula dapat mengurangkan risiko ini. Wanita juga mempunyai kadar yang lebih tinggi berbanding lelaki untuk mendapat Hipertensi Kot Putih (tekanan darah tinggi mendadak bila berjumpa doktor). Pengunaan pil kontraseptif (perancang) boleh menyebabkan darah tinggi dikalangan wanita muda.



Begini keadaan saluran/pembuluh jantung bagi pesakit yang mempunyai ketinggian tahap kolesterol, darah tinggi, kencing manis dan obesity.

Wanita dan Tabiat Merokok.

Statistik di Malaysia, menunjukan sebanyak 4.4% wanita dibawah umur 30 tahun merokok. Angka ini pastinya membimbangkan kerana wanita perokok mempunyai 5 kali ganda risiko lebih tinggi untuk mendapat penyakit jantung koronari berbanding wanita bukan perokok. Wanita yang merokok berisiko tinggi dari lelaki yang merokok. Merokok boleh meningkatkan kadar lipid (lemak) dalam badan, inflamasi serta "oxidative stress", menyebabkan serangan jantung diusia muda, kerana saluran darah tersumbat. Perokok juga lebih mudah mendapat pembentukan Thrombosis (darah beku) dikalangan orang muda yang boleh membawa maut.

Pencegahan Adalah Lebih Baik Dari Rawatan

Kita mungkin tidak bernasib baik jika mempunyai sejarah keluarga menghidap penyakit jantung terutamanya di usia muda (premature CVD). Kos rawatan seperti angiogram, angioplasty dan lain lain bukanlah murah dan terpaksa ditanggung oleh pesakit. Mulakan langkah pencegahan dengan melakukan senaman, berjalan kaki, beriadah dan bersukan, mengurangkan makanan tinggi lemak, gula dan karbohidrat. Malah, tabiat merokok patut diberhentikan dan pengawalan stress patut di jalankan. Selalulah berjumpa dengan doktor atau pakar jantung bagi mendapatkan makluman serta langkahlangkah pencegahan mengekang penyakit jantung koronari ini. Ujian saringan seperti Threadmill Test, dapat membantu saringan awal bagi kes kes berisiko.

Event Diary

AWARENESS PROGRAMME YEAR 2012

NO	DATE	VENUE				
HEALTH CH	HEALTH CHECK / HEART WEEK					
1 2 3 4 5	19 – 24 June 3 – 8 July 19 – 24 September 1 – 6 November 27 November – 2 December 28 December – 3 January	AEON Kinta City, Ipoh, Perak Alor Setar, Kedah AEON Kepong, Selangor AEON Equine Park, Seri Kembangan AEON Seremban 2, Negeri Sembilan Leisure Mall, Cheras, Selangor				
WORLD HE	ART DAY 2012					
7	30 September	Taman Tasik Titiwangsa				
GO RED FO	GO RED FOR WOMEN 2012					
8	9 June	Kluang, Johor				
COMMUNI	тү					
9 10 11 12	4 – 5 August 9 September 6 – 7 October 15 – 16 December	Rawang, Selangor Kampar, Perak Perlis / Kelantan Jerteh, Terengganu				
WORKPLAG	Œ					
14	1 June	JKR, (Architect), KL				

FOR INFORMATION

YAYASAN JANTUNG MALAYSIA

The Heart Foundation of Malaysia

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latmeal

Quaker Oatmeal mengandungi serat mudah larut (Beta glukan) yang membantu secara semula jadi untuk mengurangkan kolesterol. Pengambilan 2 mangkuk (70g) Quaker oat sehari terbukti membantu mengurangkan tahap kolesterol dalam 30 hari.

Pesanan daripada: Yayasan Jantung Malaysia



Jadikan bijirin oat sebahagian daripada diet rendah lemak dan kolesterol dan amalkan gaya hidup sihat untuk mengurangkan risiko penyakit jantung.