



# Heart Matters

Issue 3

June 2010

East Lothian Cardiac Rehab Group

## Coffee Anyone?



Remember our Coffee Morning on **Saturday, 10 July, Hope Rooms North Berwick.**

This is now being run in collaboration with the **British Heart Foundation**

Lorraine would be grateful for all assistance, including baking, and items for a tombola

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## Salt matters

Continuing our theme of food from previous issues, this time we look at an important ingredient of our diet: salt.

Most of us in Britain eat too much salt. But adding salt at the dinner table is only a small part of the problem: 75% of the salt we eat is already in food when we buy it.

### **Adverse effects of too much salt**

Too much salt can cause raised blood pressure, which one-third of people in the UK already have. It's called the silent killer as it often has no symptoms, but if you have high blood pressure you are three times more likely to develop heart disease or have a stroke, and twice as likely to die from these diseases. If it's left untreated, high blood pressure can also lead to kidney failure and eye damage.

### **Recommended amount of salt**

The recommended maximum amount of salt per adult, per day, is six grams: that's around one full teaspoon.

### **Ways of reducing salt**

Of course, one easy way to eat less salt is to stop adding extra salt to your food during cooking, and at the dinner table. If you regularly add salt to food, try cutting it out: you'll re-discover the real tastes of your favourite foods.

### **Look at labels**

Reducing added salt is only a small part of the solution. To really cut down, you need to become aware of the salt that is already in the food you buy. Fortunately, food labels now make this a lot easier. Nutritional information labels are usually on the back of the food packaging. Look at the figure for salt per 100g.

- High is more than 1.5g salt per 100g (or 0.6g sodium).
- Low is 0.3g salt or less per 100g (or 0.1g sodium).

If/

If the amount of salt per 100g is in between these figures, that is a medium level of salt.

As a rule, aim for foods that have a low or medium salt content. Leave high-salt foods for occasional use.

*There is too much salt lurking in processed food. You can't always taste it.*

Betty McBride, British Heart Foundation

### **Traffic light labeling system**

On the front of some food packets now you'll find the traffic light labeling system. This will tell you at glance if a food is high in fat, salt and sugar. Red means high so leave red salt foods for the occasional treat, and aim to eat mainly foods that are amber or green.

### **Salt and sodium**

Salt is also called sodium chloride, and it's actually the sodium in salt that's bad for your health.

Sometimes, food labels may list salt as sodium. But there is a simple way to work out how much salt you are eating from the sodium figure:  
Salt = sodium x 2.5.



For more information, look at [www.eatwell.gov.uk/healthydiet](http://www.eatwell.gov.uk/healthydiet)

*We are only talking about quite small reductions in salt intake to have a big effect on risk*

Professor  
Graham MacGregor,  
St George's Hospital,  
London

## **From the Research file ...**

All of us, naturally, are benefitting from the vast amount of research that has been done, and is continuing, into coronary heart disease. Some recent examples reported in the press are:

**Tomatoes:** Scientists at the Rowett Institute in Aberdeen have discovered an extract from tomato seeds that helps thin blood in a similar way to aspirin, but without the side effects.

**Stem cells:** it seems that researchers are investigating ways of extracting stem cells from leg veins removed for heart bypass surgery, and then reinserting them into a patient's heart to stimulate growth of new blood vessel tissue - only in mice so far, but work continuing.

**Sunshine:** what most of us might have suspected, but it seems that vitamin D, the main source of which is sunlight, might have far greater implications in the treatment of cardiovascular disease than previously thought. However, whilst a certain amount of exposure to sun light might be beneficial, patients are warned against the dangers of too much sun—always use appropriate sunscreen, and avoid exposure at the hottest parts of the day. Sunshine on prescription??

Work still ongoing on all of these, so it may be some time yet before we see any further developments.

*Give neither counsel nor salt til you are asked for it*

Old Proverb

## Local News

### New Appointment

Anna Faulkner, whom many of you will already know, has been appointed Development Officer for ELCRG. She gives an outline of her duties and plans below:

### Update on development of ELCRG (from Anna Faulkner)

Since taking up the role of Development Officer I have been familiarising myself with the whole process of cardiac/pulmonary rehab. I have attended some meetings and met with lead practice nurse Mary Ledingham and also Lynne Turnbull (previously involved in Phase III in her capacity as physiotherapist). Mary is a great line of contact for all the practice nurses in East Lothian and Lynne has intimated interest in continued involvement with the group, either in a direct or educational capacity.

Although the process has felt somewhat slow so far I shall continue to work away at getting ELCRG 'out there' and in the meantime please feel free to contact me - any and all ideas and feedback from members would be most welcome.

### Possible future ventures

Tai Chi, aqua classes, and dance movement psychotherapy have all been suggested as possible future avenues to explore—keep alert for more information!

### Link with Queen Margaret University

ELCRG has recently been approached by Queen Margaret University (QMU) about having an MSc student (qualified nurse) with a special interest in dance movement psychotherapy, placed with us for a short while. Look out for more information in the autumn.

### “Hearty Voices”

Lothian Health, in association with Chest, Heart & Stroke Scotland (CHSS) from time to time run sessions with this title. They aim to equip interested patients and carers with the skills and background to use their experience of heart health services in a constructive way, working together with health professionals to design and deliver services which really meet patients' needs. This is in line with Scottish government policy to devise services *with*, not just *for*, patients.

Janice White recently volunteered to attend the latest of these courses, run over three evenings at the Deaconess site in Edinburgh. Two other patients (both from Edinburgh) and one carer, (from West Lothian) also attended. Content included: the structure of the NHS in Scotland, ways of working with health professionals, communication skills, and then attendees were given the opportunity to actually work through a template devised by CHSS to guide us through the process of making a case for change.

Participants and organisers were pleased to see someone from East Lothian amongst their number. It is important that the “rural”, not just the “big city”, voice is heard when services are being planned, so if you see any of these sessions advertised in the future, and you are interested, it is worth while volunteering to give them a try! There seem to be several consultative groups around, both in the NHS and the voluntary sector, where we can have our say in the planning of services, and we should make the effort to make our opinions heard.

### Musselburgh Group

The Monday Musselburgh class has now moved to the **MECA Centre**. We hope that this will be more convenient for participants. Posters/leaflets have been put up in local pharmacies, sports centres, libraries, etc. in the hope of attracting more members.

### Electronic Communication

It is hoped to distribute this Newsletter by e-mail where possible. If you would like to be added to the e-mail list, please contact [janicewhite@btinternet.com](mailto:janicewhite@btinternet.com)

**East Lothian Cardiac Rehab Group**  
**Rest of Life Programme (ROLP)**

# Hearty Exercise



## Cardiac and Pulmonary Rehab

Classes open to all who would benefit from a supervised exercise session



**DUNBAR Leisure Centre**

**Monday 13.30–14.30**

**HADDINGTON Aubigny Centre**

**\*Monday 18.30–19.15**

**Tuesday 10.30–11.30 &**

**\*Tuesday 13.00–14.00**

**\*Friday 11.00–12.00 &**

**Friday 13.00–14.00**

**MUSSELBURGH MECA Centre**

**\*Monday 13.00–14.00**

**NORTH BERWICK Sports Centre**

**\*Thursday 11.00–12.00**

**PRESTONPANS Mercat Gait Centre**

**\*Wednesday 10.30–11.30**

\*Fully qualified cardiac rehab and/or fitness instructor, exercise programme devised to meet the requirements of each individual.

- Classes for members of the public who have had heart and lung problems in the past. (Please check with your doctor)
- 'Graduate' classes for those who have completed a Phase 3 cardiac rehab programme or Pulmonary Rehab programme
- Safe exercise for those who want to get back to some form of physical activity

*Content of this publication is guidance only—patients and any other readers should always check their particular circumstances with their own health professionals. Comments or content for future publications should be sent to ELCRG, c/o Newtonport Surgery, Haddington, EH41 3NF or [janicewhite@btinternet.com](mailto:janicewhite@btinternet.com)*

*East Lothian Cardiac Rehab Group (affiliated to CHSS) Scottish Charity No SCO 21161*