

How to Love Your Heart and Keep it Happy

Diablo Clinical Research

February 2010



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Dear Friends of Diablo Clinical Research,

Many of you may have heard of or may be users of the interactive website, www.facebook.com. In keeping with our interest in Internet information exchange programs that we wrote about in the winter issue, Diablo Clinical Research has recently created a Facebook page.

Facebook was originally created to be a social networking site directed at undergraduates and has since expanded into a website for all ages that is utilized by many businesses as part of their professional network. By creating and debuting our Facebook page, Diablo Clinical Research hopes to reach a wider population with pertinent research information and opportunities.

Our Facebook page allows you to become a member or fan of Diablo Clinical Research and the studies we are currently working on, as well as providing general information about what clinical research is, how to volunteer to be a study participant, and the logistics of study visits. Also available on our page are opportunities for free and low cost testing/screenings available to the community, a brief history of Diablo Clinical Research and Frequently Asked Questions about clinical research.

Why did we choose to be listed as a group on Facebook? We are now able to interact with and provide information directly to our group members. Even if you aren't currently involved in a study, becoming a member (fan) is an easy way to support the research being conducted at Diablo Clinical Research while staying informed about new studies and services provided to the community.

Our goal is to become a group with 10,000 fans, so join today and invite your friends to do the same! You have nothing to lose and everything to gain.

To your health,

Richard L. Weinstein, MD



Leonard Chuck, PhD, MD



Mark Christiansen, MD



Advice for a Healthy Heart

By Dr. Lambert Chee

Heart disease is still the single greatest killer of Americans under the age of 85. Each year, at least 500,000 Americans die from heart disease or its complications. Yet heart disease is a PREVENTABLE disease. Because of the advances made both in terms of diagnosis, treatment, and preventive measures, we can safely say that with the appropriate treatment, diet, exercise, and mental discipline, heart disease can be arrested or even reversed.

The most common form of heart disease today occurs in the form of coronary artery disease, a condition characterized by the blockage of the arteries that feed the heart muscle (the heart is actually made up of two pumps in series, and each pump is powered by the muscles making up the walls of the heart chambers). Coronary artery disease (CAD) occurs as a result of multiple risk factors, including high blood pressure, diabetes mellitus, obesity, cigarette smoking, abnormal lipid levels, a lack of physical exercise, and genetic disposition. While genetic therapy is not available at the present time, each of the other risk factors can be addressed. Studies have shown that addressing any of the risk factors can bring down the risk of developing heart disease, and if a multifaceted approach is taken, heart disease can even be prevented.

Listed below are the most important steps necessary to control and prevent heart disease.

- 1. Regular Physical Exercise.** Hundreds of studies have shown that regular physical exercise reduces heart attacks, strokes, accidents, suicides, and deaths from all causes.
- 2. Do Not Smoke!** No study has shown that smoking is good for anyone; the studies linking cigarette smoking to cancer, heart and vascular disease, and lung disease are overwhelming.
- 3. Maintain a Normal Blood Pressure of 120/80 or Lower.** Medical studies as well as insurance statistics have shown that a lower blood pressure correlates with a better survival curve. High blood pressure causes heart attacks, strokes, heart failure, kidney failure, and a rupture of aneurysms.
- 4. Maintain an Ideal Body Weight.** Each 2.2-pound increase in body weight increases the risk of diabetes by 9%. A 25-pound weight gain doubles your risk of diabetes. Having diabetes means your risk of having another heart attack is just as great as someone who has already had a heart attack.
- 5. Eat Appropriately.** Eat to satisfy your body's metabolic needs, not your psychological cravings.
- 6. Address Lipid Abnormalities.** Most cardiologists would look at any LDL cholesterol level above 100 with caution. In someone with documented heart disease, the ideal goal at the current time is an LDL level of 70 or below. Any HDL cholesterol level below 45 is a cause for concern.
- 7. Keep Your Blood Sugar in the Normal Range.** For diabetics, tight control is now the accepted form of therapy. Keeping the blood sugar in the normal range has been shown to prevent microvascular complications of diabetes.

8. Let Go of Stress. Stress can cause high blood pressure, heart disease, depression, and suicides. Use meditation, exercise, biofeedback, or just sit perfectly still, concentrating on your conscious breathing.

Meet our New Registered Dietitian!

Diablo Clinical Research is proud to announce Allie Hardy as our new Registered Dietitian. Allie comes to Diablo Clinical Research with a degree from Purdue University where she double majored in Dietetics and Nutrition/Fitness/Health. After finishing a year-long internship and taking graduate courses, she moved to California and began applying her nutrition know-how as a freelance writer for the website Super Kids nutrition and the blog Skinny and the City.

Her special interests include diabetes, obesity, sports nutrition, and health and wellness. She has had experience creating and delivering original lessons and workshops on these topics to a wide variety of audiences. She enjoys sharing her knowledge and expertise with people via the internet, newsletters and presentations/lectures.

As a Registered Dietitian, she is prepared through her advanced education and training to collaborate with our physicians and patients to provide personalized high quality care with a focus on intervention and disease prevention.

A tip from the American Heart Association Diet and Lifestyle Guidelines:

Variety: Eat a rainbow of fruits and veggies! Every day try and incorporate different colored fruits and vegetables until you have “eaten the rainbow”. Here are some ideas to get you started:

Red: Red Apples, Strawberries, Red Bell Peppers, Red Cabbage, Cherries, Cranberries, Pomegranates, Red Potatoes, Radishes, Raspberries, Rhubarb, Tomatoes, Kidney/Pinto/Chili Beans

Orange: Oranges, Cantaloupes, Papayas, Carrots, Squashes, Sweet Potatoes, Orange Bell Peppers, Apricots, Mangoes, Nectarines, Peaches, Persimmons, Pumpkins, Tangerines

Yellow: Corn, Lemons, Pineapple, Yellow Tomatoes, Yellow Watermelon, Bananas, Yellow Bell Peppers, Golden Raisins

Green: Pears, Limes, Green Apples, Artichokes, Asparagus, Avocados, Green Beans, Broccoli, Brussels Sprouts, Green Cabbage, Cucumbers, Green Grapes, Honeydew Melon, Kiwi, Lettuce, Green Onions, Peas, Green Peppers, Spinach, Zucchini, Edamame (Soy Beans), Tomatillos, Celery, Leeks, Bok Choy, Kale

Blue: Blueberries, Juneberries

Purple: Purple Grapes, Beets, Rutabagas, Purple Raisins, Turnips, Blackberries, Eggplant, Plums, Prunes, Purple Cabbage

Pink: Pink Grapefruit, Watermelon

White/Brown: Onions, Parsnips, Cauliflower, Idaho Potatoes, Figs, Garlic, Ginger, Jicama, Mushrooms, Garbanzo Beans (Chickpeas), Water Chestnuts

Heavenly Chocolate Soufflé

Treat that special someone to a decadent dessert that's as nutritionally dense as it tastes! Flavonoid rich cocoa and monounsaturated canola oil both get kudos in this chocolaty recipe for helping to support heart health and decrease your risk of developing cardiovascular disease. Eat up and enjoy, but as always, a dessert is sweeter when shared!

Ingredient List:

1/2 C unsweetened cocoa powder
6 tablespoons hot water
1 tablespoon unsalted butter
1 tablespoon canola oil
3 tablespoons all-purpose flour
1 tablespoon ground hazelnuts (filberts) or almonds
1/4 teaspoon ground cinnamon
3 tablespoons firmly packed dark brown sugar (*or Splenda brown sugar blend*)
2 tablespoons honey (*or agave nectar*)
1/8 teaspoon salt
3/4 C 1 percent low-fat milk
4 egg whites
3 tablespoons granulated sugar (*or Splenda*)



**Diabetic friendly exchanges are made in italics next to the original recipe ingredients.*

Preparation Directions:

1. Preheat the oven to 375 F. Lightly coat six 1-cup individual soufflé dishes/ramekins or a 6-cup soufflé dish with cooking spray.
2. In a small bowl, combine cocoa and hot water; stir until smooth; set aside.
3. In a small, heavy saucepan over medium heat, melt butter. Add the canola oil; stir to combine. Add the flour, ground hazelnuts and cinnamon and cook for 1 minute, stirring constantly with a whisk. Stir in the brown sugar, honey and salt. Gradually add the milk and cook,

stirring constantly, until thickened, about 3 minutes. Remove from heat and stir into; cocoa mixture. Let cool slightly.

4. In a large, thoroughly cleaned bowl, using an electric mixer set on high and beat the egg whites until foamy. Add the granulated sugar 1 tablespoon at a time and beat until stiff peaks form. Using a rubber spatula, gently fold 1/3 of the egg whites into the cocoa mixture to lighten it. Then fold the remaining egg whites into the cocoa mixture, mixing gently only until no white streaks remain.
5. Gently scoop the cocoa/egg white mixture into the prepared dish/dishes. Bake until the soufflé rises above the rim and is set in the center. (15 to 20 minutes for individual soufflés; 40 to 45 minutes for the large soufflé). Cool on a wire rack for 10 to 15 minutes before serving. If desired, can add fresh berries and powdered sugar to the top.

Nutritional Analysis
(per 1 serving of original recipe)

Calories	184	Cholesterol	7 mg
Protein	6 g	Sodium	106 mg
Carbs	30 g	Fiber	4 g
Total fat	7 g	Calcium	58 mg
Saturated fat	2 g	Monounsaturated fat	3 g

Recipe courtesy of *The New Mayo Clinic Cookbook*



DCR CARDIOVASCULAR STUDIES

Merck 133

What is it? A randomized, double blind, active controlled study of subjects with *cardiovascular disease* and *diabetes* who are not adequately controlled with Simvastatin (Zocor) 20 mg or Atorvastatin (Lipitor) 10 mg. It is a comparison of switching to a combination tablet Vytorin (10/20 mg) versus switching to Rosuvastatin (Crestor) 10 mg or doubling the cholesterol medicine dose.

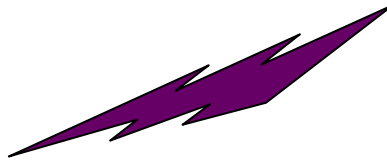
Who Qualifies: Anyone who is on the required stable dose of any cholesterol medication, has been diagnosed with diabetes, and has a history of cardiovascular disease.

The INSIGHT Study

Inegy vs. Switching to Rosuvastatin or the Doubling of Baseline Statin in Patients with Diabetes and Cardiovascular Disease

Is your cholesterol out of balance in your life?

HDL



LDL

Have you been diagnosed with high cholesterol? Then you might know about good cholesterol (HDL) and bad (LDL) cholesterol and that getting the balance right between these two is important to achieve overall control.

If HDL and LDL goals are not being met, a clinical research study* is currently underway to evaluate patients with diabetes mellitus and CVD who are failing on usual starting doses of the most frequently prescribed statin treatments (Simvastatin 20 mg and Atorvastatin 10 mg). The study is comparing the efficacy of switching to a combination tablet Ezetimibe/Simvastatin (10 mg/20 mg) versus switching to Rosuvastatin 10 mg or doubling the entry statin dose.

You may be able to participate if:

- You are between 18-79 years of age
- Have diabetes mellitus and CVD and are failing on the usual starting doses of the most frequent prescribed statin treatments
- *Other eligibility criteria will also need to be met*

If eligible, participants will receive at no charge:

- Study medication
- Study related physical exams
- Study related office visits

If you or someone you know is interested, please contact:

**Diablo Clinical Research
2255 Ygnacio Valley Road, Suite M
Walnut Creek, CA 94598
Phone: (925) 930-7267**

*Participation is voluntary. Participants are free to withdraw from this clinical research study at any time for any reason without penalty or loss of benefits to which they are otherwise entitled and without effect on future medical care. There are also certain risks with this study that the study doctor will explain to you should you choose to participate. Contacting us does not mean that you have to participate or that you will be eligible to participate.