Heart Health Matters at Every Age

Protecting the Heart During Cancer Treatment

New Treatment for Valve Disease

What Hot Flashes Mean for Your Heart
Heart Health Matters at Every Age

Eating well and staying physically active are crucial to keeping a healthy heart. And it’s never too early to begin.

In the past 25 years, the percentage of overweight children ages 2 to 5 has more than doubled. It has more than tripled among kids ages 6 to 19. Being overweight boosts a child’s risk of developing hypertension and type 2 diabetes, conditions that contribute to heart disease. Nearly half of kids ages 12 to 21 also are inactive, further increasing their heart disease risk.

“Your children probably don’t think about heart health,” said Emmanuel Ashong, MD, pediatrician and medical director of the Osborn Family Health Center. “But as parents, there are things you can do, including providing a proper diet and encouraging exercise.”

To keep your kids’ hearts going strong, Dr. Ashong suggests:

**Healthy Eating Tips**

1. It’s never too early to start a Mediterranean diet—lots of fruits and vegetables, whole grains, legumes, lean proteins and low-fat dairy.
2. Let your kids select a new fruit or veggie for dinner. How about jicama, bok choy, star fruit or papaya?
3. For snack, offer a banana, a cup of grapes, unsweetened applesauce, sliced apples or berries on top of low-fat or fat-free yogurt.
4. Limit sweetened drinks, even natural fruit juices. Serve low-fat milk or water instead.
5. Watch portion sizes when eating out. If you can, avoid fast food.

**Heart-Racing Activities**

1. Encourage kids to go for a bike ride, toss a ball, play tag, jump rope or do some other form of aerobic activity.
2. Limit screen time. That includes TV, smartphones and tablets.
3. Sign your children up for community sports teams or lessons.
4. Buy older kids a pedometer. This tiny counting device measures the steps they walk and may motivate them to move more.
5. Let your children help with outside housework: raking, weeding, planting and shoveling snow. Older kids also can walk the dog and mow the lawn.

“Adults lead by example,” said Dr. Ashong. “If you lead a healthy lifestyle, chances are your child will as well.”

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Our Mission

We, Lourdes Health System and Trinity Health, serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities. In the tradition of the Franciscan Sisters of Allegany, New York, Lourdes Health System serves all who come to it with reverence and integrity in a simple, joyful and hospitable manner.

For more information on any material discussed in this magazine, please contact us:

**HeartTalk**
Lourdes Health System
1600 Haddon Ave.
Camden, NJ 08103
**Telephone:** 856-580-6454
**Fax:** 856-580-6450
**Email:** info@lourdesnet.org
Visit us on the web at: www.lourdesnet.org

**Reginald Blaber, MD, MBA**
President,
Lourdes Health System

**Mark Nessel**
Executive Vice President and COO,
Lourdes Health System

**Kimberly D. Barnes**
Vice President,
Planning and Development,
Lourdes Health System

**Carol Lynn Daly**
Assistant Vice President,
Communications,
Lourdes Health System

**Josh Bernstein**
Publications Manager,
Lourdes Health System

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Cancer is the second leading cause of death in the U.S., right behind heart disease. While new therapies are helping more people survive cancer, they also can cause heart problems.

A new medical specialty called cardio-oncology is working to solve this dilemma. Cardiologists and oncologists are combining their knowledge to help protect the hearts of people undergoing cancer treatment.

“Some chemotherapy drugs can cause cardiac toxicity,” said Lourdes cardiologist Geoffrey Zarrella, DO, FACC. “The chemicals used to kill cancer cells also can damage cells belonging to the cardiovascular system.”

These drugs can cause conditions that lead to heart rhythm problems (arrhythmias) and heart failure. These include enlarging of the heart and swelling of the heart or the sac around the heart. The blood vessels also can be damaged, reducing blood flow to the heart and raising the risk for a heart attack.

Chemotherapy drugs also can interfere with blood thinners people may take to prevent clots and lower their risk for heart attack and stroke.

**Drugs to Know**
The chemotherapy drugs that most often cause heart damage are anthracyclines, and they are used to treat a variety of cancers. Others include mitoxantrone, paclitaxel and cyclophosphamide.

Newer, targeted therapies like Herceptin are thought to cause only temporary damage.

**Protecting the Heart**
Lourdes cardiologists want to prevent heart disease in people before, during and after cancer therapy.

“Certain cancer treatments can have dangerous cardiac side effects,” said Lourdes cardiologist Jerome Horwitz, DO. “We want to identify the patient who is about to have chemotherapy or is undergoing treatment and evaluate them for a possible heart problem, such as congestive heart failure or left ventricular dysfunction.”

One screening test is called three-dimensional echocardiography with global longitudinal strain.

“Strain can be used to describe the elastic properties of the heart muscle. Reduced strain signals earlier cardiac dysfunction that can eventually lead to overt cardiac failure and chemotherapy-related cardiomyopathy. Strain is an important checkpoint for who is at risk going into therapy and who is experiencing subclinical myocardial damage during their chemotherapy,” said Dr. Zarrella. “By utilizing this technology, we can identify whether a patient will need pretreatment with medications to prevent further heart damage.”

Medication that may be prescribed to prevent further damage and protect the heart include:

- Beta-blockers
- ACE inhibitors
- Angiotensin receptor blockers

“Cancer treatment can be a double-edged sword, curing one disease while creating another,” said Dr. Horwitz. “By partnering with area oncologists and taking proactive steps, we aim to maximize patient safety and augment disease-free survivorship.”

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Breakthrough Treatment for Patients with a Leaky Heart Valve

Instead of opening the chest, a thin tube called a catheter is inserted through a small incision in the upper leg to reach the heart. The MitraClip is guided through the catheter to the mitral valve.
Alan Clark had trouble breathing, no matter how short the distance he walked. His doctor discovered a severely leaking heart valve, but previous heart issues, obesity and other health problems made traditional open-heart surgery risky.

Last summer, Clark was one of the first patients at Lourdes to have a MitraClip inserted in his heart. This new type of transcatheter mitral valve repair is approved to treat people with severe degenerative mitral regurgitation (MR).

“I feel a lot better,” said Clark, 65. “I’m breathing better and walking farther. In fact, after surgery, I walked down the hall without gasping. I went halfway down to the nurses’ station and then continued walking down the rest of the hallway.”

**Doorway that Won’t Close**

The heart has four chambers. The upper two are called atria. The lower two are ventricles. Four valves function as doorways between the chambers. Each valve is made of thin flaps, or doors, of tissue called leaflets. The valves open in one direction to let blood pass from one chamber to the next and then close quickly so blood does not flow backward.

The mitral valve is located between the left atrium and left ventricle. Mitral valve regurgitation occurs when the leaflets do not close completely, allowing some blood to flow back into the left atrium as the heart pumps.

“The heart has to work harder to keep blood flowing. This strain can enlarge and weaken the heart and lead to congestive heart failure, as well as an increased risk for stroke,” said Lourdes interventional cardiologist Ibrahim Moussa, DO, FACC, FSCAI, RPVI. “When MR becomes severe, it can greatly affect a person’s quality of life, with symptoms such as shortness of breath, fatigue, swelling of the feet or ankles, an irregular heartbeat and persistent cough.”

Surgery is the most effective treatment for mitral regurgitation. However, only a fraction of candidates are offered surgery, and others are turned down due to their age or the presence of other illnesses.

**How MitraClip Works**

The MitraClip looks like a miniature clothespin and is the size of a dime. To insert the device, the doctor makes a small incision in the patient’s leg. A catheter guides the device up the femoral vein to the heart. It is passed through the interatrial septum and then attached to the flaps of the mitral valve to help it close more completely and restore normal blood flow.

“The less invasive procedure is performed without the need to temporarily stop the heart. The cardiac team uses echocardiography, a type of ultrasound, to see the heart—reducing the patient’s exposure to radiation.

“With the MitraClip, we have the opportunity to help patients and dramatically decrease the volume of their leakage,” said Atiq Rehman, MD, FACS, Lourdes director of minimally invasive cardiac surgery and co-director for structural heart disease. “Because we don’t open the chest or need a heart-lung bypass, patients have a reduced risk for complications and a faster return to normal activities. Patients experience improved heart function and symptoms almost immediately.”

**Ready to Ride**

Clark spent the night in the hospital after the procedure. He is recovering and looking forward to getting back to riding his motorcycle.

“The MitraClip surgery was the best thing I could have done,” said Clark. “I was nervous because of my medical problems, but Lourdes doctors are the best. I couldn’t ask for better. I’d tell anyone who needs valve repair to get it done. I am feeling a lot better!”
Blood tests to check your cholesterol, triglyceride and glucose levels are common ways to determine your risk for heart disease. But there’s another useful screening you should consider, too. A C-reactive protein (CRP) test measures the level of inflammation in your body and can be done at the same time as other blood checks.

“There are several well-established risk factors for cardiovascular disease, including high blood pressure, high cholesterol, diabetes, smoking and family history,” said Lourdes cardiologist Scott Gabler, MD. “A high CRP level has been shown to play a role in the development of atherosclerosis, which heightens the risk for heart attack and stroke.”

**Growing Research Shows Role of CRP**

C-reactive protein is made in the liver. Studies have indicated that it may be as good at predicting heart disease risk as cholesterol levels.

The Physicians Health Study, which looked at 18,000 healthy doctors, found that elevated levels of CRP were associated with a threefold increase in heart attack risk.

The Harvard Women’s Health Study looked at 12 markers of inflammation in healthy, postmenopausal women. After three years, women with the highest CRP levels were four times more likely to have died from heart disease or had a nonfatal heart attack or stroke compared with those with the lowest levels. Women with high levels also were more likely to have needed an angioplasty or bypass surgery.

**Getting Tested**

A high-sensitivity (also called an ultrasensitive) C-reactive protein test can help determine your cardiac risk. Here’s how to interpret your results:

- Less than 1.0 milligrams per deciliter (mg/dl): low risk for heart disease
- 1.0 to 3.0 mg/dl: average risk
- More than 3.0 mg/dl: high risk

Results higher than 10 are usually attributed to another condition, such as an infection, illness or arthritis flare-up.

“Remember, CRP is just a marker of inflammation,” advised Dr. Gabler. “While there is a connection to heart disease, inflammation also can be caused by something else. Speak with your doctor about your results.”

**Be Heart-Healthy**

Depending on your results, your doctor may suggest a number of lifestyle changes. For those at a higher risk, your doctor also may suggest a statin.

Several studies have shown that a statin, or a statin combined with another drug, can help lower LDL cholesterol and CRP levels.

“If you have any questions about reducing your risk for heart disease, talk with your doctor,” Dr. Gabler said.

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**Shop for the Environment**

Skip the plastic bags and carry home your groceries in our new Lourdes Cardiovascular Institute reusable tote. Call 1-888-LOURDES (1-888-568-7337) to order yours today!
It’s commonly thought that strokes only affect older people. But one-third of strokes occur in people younger than 65, and a recent study from the U.S. Centers for Disease Control and Prevention found that between 2003 and 2012, hospitalizations for stroke rose by 20 to 36 percent for people ages 18 to 54.

“Young people are generally unaware of their stroke risk. They think they’re too young, even if they’re living with major risk factors,” said Erol Veznedaroglu, MD, FACS, FAANS, FAHA, director of Lourdes Health System partner Global Neurosciences Institute.

Earlier Development
A stroke occurs when the flow of oxygen-rich blood to the brain is interrupted. In most cases, it’s because a clot has blocked a blood vessel in the brain. This is called an ischemic stroke.

The reasons for the rising prevalence of stroke in young people are not entirely clear. But the increase in conditions that can lead to blocked arteries, such as obesity, high cholesterol, high blood pressure, diabetes and smoking, may be to blame.

Other possible causes of stroke include genetic heart defects, head or neck injury, infections, blood-clotting disorders, sickle cell disease and drug use.

“As younger people think they’re bulletproof, they may not be proactive about controlling their stroke risk factors. They may be less inclined to exercise, eat healthy and take preventive medications,” said Dr. Veznedaroglu. “Young adults also may be unaware they are having a stroke, reducing their chances of receiving vital, time-sensitive treatment,” he added.

Take Charge of Your Health
By eliminating risk factors for stroke, you can help reduce your likelihood for having one. Take charge with this five-step plan:

• Eat a diet high in fruits, vegetables, whole grains and fish and low in saturated fat.
• Control high blood pressure, cholesterol and diabetes.
• Exercise regularly.
• Maintain a healthy weight.
• Avoid alcohol, drugs and smoking.

“While younger people tend to recover better, a stroke can nonetheless lead to a long-term disability,” said Dr. Veznedaroglu. “Young adults should see a doctor regularly to monitor their overall health and their risk for heart disease and stroke.”

Get the Gear for Life on the Go
Going out for a bit but don’t want to take your purse or wallet? Our new Lourdes card holder sticks to the back of your cell phone and safely secures your ID, credit cards and cash. Call 1-888-LOURDES (1-888-568-7337) to order yours.
Many Women Unaware of Heart Disease Risk, Miss Out on Screening

Women are often the drivers of good health in their households. But when it comes to knowing about their own risk for heart disease, many remain in the dark.

Heart disease is the number one killer of women in the U.S., accounting for nearly 400,000 deaths annually—more than all cancers combined. But nearly half of women don’t know this, according to a recent study in Journal of the American College of Cardiology.

“Women clearly need to understand their risk for cardiovascular disease,” said Lourdes cardiologist Hafeza Shaikh, DO, FACC, RPVI. “They need to be aware that their risk factors and symptoms of events like a heart attack may be different from those of men.”

**Weight Worries**

In the survey, more than 60 percent of women admitted putting off doctor visits, with 45 percent saying they had canceled or postponed a visit because they wanted to shed pounds before an appointment.

“By not visiting the doctor regularly, you’re missing out on important opportunities to detect cardiovascular disease risk factors early and begin any necessary treatments,” said Dr. Shaikh.

While being overweight or obese is a risk factor for heart and other diseases, “There’s nothing to be embarrassed about,” added Dr. Shaikh. “Working with a doctor, we can put you on a plan to lose excess pounds and maintain a healthy weight.”

**Get Screened**

The first step toward a healthier heart is finding out how likely you are to develop cardiovascular disease. In addition to obesity, other risk factors for heart disease include high blood pressure, high cholesterol, diabetes, age (your risk climbs after menopause), family history, lack of exercise and smoking.

During the appointment, talk with your doctor about tests that can assess your heart disease risk. These include screenings to check your cholesterol, triglyceride and blood sugar levels, blood pressure, EKG and body mass index.

“Lifestyle is the foundation of risk reduction. Following the American Heart Association’s Life Simple 7—manage blood pressure, control cholesterol, reduce blood sugar, get active, eat better, lose weight and stop smoking—will pay dividends for a lifetime,” said Dr. Shaikh.
Whether you call them power surges, personal summers or something else, hot flashes are more than a nuisance for many women in the process of menopause.

Hot flashes—the sudden feeling of heat in your face, neck, arms or any part of your body—are a sign that if you haven’t thought too much about heart disease, you should now.

“As women age and their estrogen levels decline after menopause, their risk for heart disease increases significantly,” said Lourdes cardiologist Rozy Dunham, MD, FACC.

The Body’s Response

Estrogen has a positive effect on the inner lining of the blood vessels, keeping them flexible. They are able to relax and expand to accommodate blood flow. If the vessels stiffen, blood pressure will rise, possibly leading to hypertension.

A recent study in the journal *Menopause* found that among women ages 40 to 53, those who had more frequent hot flashes were more likely to have stiffer arteries compared with women who had fewer or no hot flashes. More research is needed, the study authors noted, but early-menopausal hot flashes could be a tip-off to rising heart disease risks in women.

A drop in estrogen also can cause:

• LDL “bad” cholesterol to increase and HDL “good” cholesterol to decrease
• An increase in triglycerides
• Resistance to insulin, leading women to develop prediabetes or diabetes
• Atrial fibrillation
• Weight gain

The Heat Is On

Hot Flashes and Heart Health

Rozy Dunham, MD, FACC
Cardiologist
To learn more, call 1-888-LOURDES (1-888-568-7337) or visit www.lourdesnet.org.

Strive for Heart Health

If you’ve been following a heart-healthy lifestyle, keep it up. If not, it’s not too late. Dr. Dunham recommends:

• **Eat like you’re on a Mediterranean vacation.** That means plenty of fruits and vegetables, whole grains, unsaturated fats, fish and nuts.
Double Benefit: Diabetes Drugs that Protect the Heart

Parveen Verma, DO, FACE
Endocrinologist
To learn more, call 1-888-LOURDES (1-888-568-7337) or visit www.lourdesnet.org.

Having type 2 diabetes puts you in the bull’s eye for developing cardiovascular disease and having a heart attack or stroke.

The American Heart Association estimates that people with diabetes are two to four times more likely to die of heart disease than healthy individuals. Seventy percent of seniors with diabetes end up dying of some form of heart disease.

So what if there were medicines that could treat diabetes and protect your heart, too?

“Many people with diabetes take medication to meet their blood sugar, cholesterol and blood pressure goals,” said Parveen Verma, DO, FACE, chief of endocrinology and metabolism at Our Lady of Lourdes Medical Center. “Some of the latest generation of drugs, such as Jardiance, Victoza and Invokana, display positive cardiovascular effects.”

The Diabetes-Heart Disease Link
When you have diabetes, your body can’t use insulin to convert blood sugar, or glucose, into energy. Over time, the high glucose levels in your bloodstream can damage the arteries, causing them to narrow and harden. This condition, called atherosclerosis, can block blood flow to the heart or brain, leading to a heart attack or stroke.

The longer you have diabetes, the greater chance you will develop heart disease.

Meds to Know
Empagliflozin (Jardiance) and canagliflozin (Invokana) are drugs called sodium-glucose transport (SGLT-2) inhibitors. These drugs make the kidneys get rid of excess glucose from the body through urine and stop them from reabsorbing glucose.

A study found that in patients with diabetes and heart disease, Jardiance reduced the risk for cardiovascular-related death by 38 percent and hospitalization for heart failure by 35 percent.

A second study found that people with diabetes who took Invokana were 14 percent less likely to develop cardiovascular disease and had a 33 percent lower risk of being hospitalized for heart failure.

“There’s still a lot of research going on with how these drugs work in the body,” said Dr. Verma. “But by reducing the absorption of excess glucose in the bloodstream, we can help prevent atherosclerosis.”

Another drug, liraglutide (Victoza), is a GLP-1 agonist. It works in the pancreas to boost insulin production and help control blood sugar. A new study found the drug reduced the risk for death from heart-related causes by 22 percent. Like Jardiance and Invokana, it also can help lower appetite and promote weight loss—a benefit for the heart.

The Takeaway
“Some of these drugs can be taken alone, or in combination with others,” said Dr. Verma. “If you have diabetes, talk with your doctor to see if they’re right for you.”

Tackle Diabetes
The Lourdes Diabetes Program offers convenient education classes and support groups to help people with diabetes manage their condition. Learn more about the program and receive a free diabetes-friendly recipe book by calling 1-888-LOURDES (1-888-568-7337).
Blood clots are great if you cut yourself. If the clot occurs in an artery and blocks blood flow, not so much.

Deep vein thrombosis (DVT) occurs when a blood clot develops in one or more deep veins in the body, usually the thighs or lower legs.

“If blood moves too slowly through the veins, a blood clot can form. That’s one reason why you shouldn’t sit for too long, like on a long trip,” said Lourdes vascular specialist Adam Levine, DO, FACC. “If the clot breaks free and moves through the bloodstream, it can get stuck in a blood vessel in the lungs. This is called a pulmonary embolism and can be fatal.”

No Symptoms for Many

DVT affects up to 2 million Americans. Being older than age 40, pregnancy, obesity, smoking, having a blood disorder or having cancer or heart disease can increase your risk.

Half of people with DVT do not show any symptoms. When they do occur, Dr. Levine said, signs may include:

- Swelling in the affected leg, including the ankle and foot
- Tightness, tenderness or pain in your leg
- Red or discolored skin
- Warmth over the affected area
- More visible surface veins

Contact your doctor if signs develop, advised Dr. Levine.

If you develop signs of a pulmonary embolism—sudden shortness of breath, chest pain that worsens when you take a deep breath, light-headedness and coughing up blood—call 911.

Diagnosis and Treatment

Your doctor will perform tests, which may include an ultrasound, MRI or CT angiogram—a special X-ray that provides detailed images of your blood vessels—and may suggest medicine. These may include blood thinners and drugs to dissolve clots. You also may need to wear elastic stockings to reduce swelling and promote circulation.

If you can’t take a blood thinner or one is not helping, your doctor may insert a filter in a large vein called the inferior vena cava. It is designed to capture a clot that has broken off before it reaches the lungs.

“There are three main goals of treatment: prevent the clot from growing; ensure that it does not break off and travel to the lungs; and help reduce the possibility of another blood clot forming,” said Dr. Levine. “If you think you’re at risk for DVT, talk with your doctor.”
Sometimes, even when your mind wants to eat healthy, your body’s cravings don’t cooperate. These food swaps can help you stick with your healthy eating plan. 

**CRAVING A SAVORY TREAT?**
Instead of potato chips, try unsalted nuts.

**CRAVING SUGAR?**
Instead of brownies, try a baked apple.

**CRAVING A CRUNCH?**
Instead of chips and dip, try veggies with a yogurt and herb dipping sauce.

**CRAVING MEAT?**
Instead of red meat, try poultry or fish.

**CRAVING CARBS?**
Instead of mashed potatoes, try mashed cauliflower.

**CRAVING A FIZZY DRINK?**
Instead of soda, try sparkling water.

**CRAVING A FROZEN TREAT?**
Instead of ice cream, try a homemade smoothie.

**CRAVING A BAKED SWEET?**
Instead of oil or butter, try using applesauce.

Snack without Guilt!
Our handy “One Hundred 100 or Less Calorie Snacks” guide lists smart choices for you and your family. Call 1-888-LOURDES (1-888-568-7337) to order your copy.
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FITNESS AND RELAXATION

Basic Yoga
Tuesdays, Jan. 30 to March 6 or March 13 to April 17
5:45 to 7 p.m. • LIFE
$60 for six-week series, drop-ins $12 per class

Chair Yoga
Mondays, Jan. 8 to Feb. 26 or March 12 to April 30
1:30 to 2:30 p.m. • MANOR
$72 for eight-week series, drop-ins $10 per class

Relax and Renew Yoga
Fridays, Feb. 16 to April 6
10 to 11:15 a.m. • COLLS
$60 for six-week series, drop-ins $12 per class

Ch’i Kung (Qi gong)
Thursdays, Feb. 1 to March 22
6:30 to 7:30 p.m. • LIFE
$80 for eight-week series

T’ai Chi Chih for Stress Management
Tuesdays, Feb. 13 to March 20 or March 27 to May 1
3 to 4 p.m. • MANOR
$48 for six-week series, drop-ins $9 per class

Low-Impact Cardio Sculpt and Tone
Wednesdays, Feb. 7 to March 28 or April 4 to May 23
2 to 2:45 p.m. • COLLS
$64 for eight-week series, drop-ins $9 per class

INTEGRATIVE MEDICINE

American Lung Association Freedom from Smoking Program
Mondays, Jan. 8 to Feb. 26 and Wednesday, Jan. 31 or Monday, Feb. 6 to March 20 and Thursday, March 1 • Our Lady of Lourdes Medical Center $25 materials fee

FREE Acupuncture for Stress Reduction
Thursday, Jan. 18
1 to 1:45 p.m. • LLP

FREE Acupuncture for Pain Management
Thursday, March 15
12:30 to 1:30 p.m. • LCCH

FREE Seasonal Eating Series: Smoothies for a Healthier New You!
Wednesday, Jan. 31
1 to 2 p.m. • LCCH

FREE Seasonal Eating Series: Cool Weather Crops—Early Spring Garden Edibles
Thursday, March 8
6:30 to 7:30 p.m. • Lourdes Medical Center of Burlington County

FREE DASH Your Way to a Healthy Heart!
Thursday, Feb. 22
1 to 2 p.m. • LCCH

FREE Manual Lymphatic Drainage for Cancer Patients
Tuesday, Jan. 30, 6:30 to 7:30 p.m.
Monday, March 26, 1 to 2 p.m. • Lourdes Medical Center of Burlington County

LIVE WELL CLUB

Join the Lourdes Live Well Club and participate in FREE health lectures and screenings all year long. To join, call 609-326-6041. To register for programs, call 1-888-LOURDES (1-888-568-7337).

Achilles Heel Screening with Tina Bortner, BA, ACE
Monday, Feb. 19, 11 a.m. to 2 p.m. • LCCH
*Please call to make an appointment.

Shop with a Doc with Vivek Sailam, MD
Tuesday, Feb. 27, 6 to 7 p.m. • ShopRite of West Deptford, 1077 Mantua Pike, Woodbury Heights

Hearing Screening with Associates in Hearing Healthcare
Monday, March 12, noon to 3 p.m. • LCCH
*Please call to make an appointment.

Colorectal Health with Richard Schaller Jr., MD
Wednesday, March 14, 6 to 7 p.m. • LCCH

Shop with a Doc with Ramneet Wadehra, DO
Tuesday, March 27, 6 to 7 p.m. • ShopRite of Glassboro, 201 Dalton Drive, Glassboro

LSVT BIG® for Parkinson’s Disease with Strive Physical Therapy
Wednesday, April 11, 1:30 to 2:30 p.m. • LCCH

Degenerative Joint Disease with Sean McMillan, DO
Thursday, April 12, 5:30 to 6:30 p.m. • LCCH

PROGRAMS ARE HELD AT

- LourdesCare at Cherry Hill (LCH), 1 Brace Road Cherry Hill
- LIFE at Lourdes (LIFE) 2475 McClellan Ave. Pennsauken
- Lourdes Little Portion (LLP) 1049 Haddon Ave. Collingswood
- Collingswood Community Center (COLLS) 30 West Collings Ave. Collingswood
- United Methodist Communities at Collingswood (MANOR) 460 Haddon Ave. Collingswood
Weight-loss apps work. Studies show that people who use them lose a few more pounds on average than those who don’t. They can increase your willpower and motivation to change and help you stay on track. As you achieve your goals, you form good eating and physical activity habits that become your lifestyle, said Lourdes dietitian Vitelese Hutton, RD, LDN.

Here are five apps to consider:

Noom Coach—The highly rated app features a comprehensive food database to record your meals; a color-coded system that helps you learn which foods are healthiest; a built-in pedometer; and a log for tracking your physical activity.

ControlMyWeight—The app calculates the target number of calories you need to consume to lose 1 to 2 pounds per week. As you input your intake and physical activity, the target number changes in real time so that you can see how many calories you have remaining to help you make choices that keep you within your weight-loss zone.

Lose It!—Like other apps, you can set your daily calorie budget and record your food and exercise. Scroll through a database of more than 7 million foods to help track what you eat, scan barcodes on food labels using your phone’s camera to pull up the nutritional information or snap a picture of your food and confirm additional information, such as the serving size. The app also syncs with your fitness tracker.

Fooducate—This app describes itself as “a nutritionist in your pocket, advising you how healthy foods are based on their nutrients and ingredients.”

MyFitnessPal—One of the most well-known calorie and fitness trackers, the app can help you meet your weight-loss goals.

Other helpful weight-loss tools, Hutton said, include pedometers, food scales, measuring cups and smaller serving plates.