

Food & Herbs for a Healthy Heart



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PLEASE READ: *The information handout has not been approved by the FDA and does not in any way intend to diagnose or prescribe. Always consult with your health practitioner before taking any remedy.*

Above this, I also recommend that you...

1. *Research an herb in at least three good sources before ingesting it (see website for sources),*
2. *Listen to your body/intuition to determine if an herb resonates or doesn't resonate with you.*
3. *Take proper steps to ensure that any wildcrafted or cultivated plant is what you think it is, AND*
4. *Check with your pharmacist for herb-drug interactions if you take prescriptions.*

Cholesterol

First things first: Cholesterol is a RISK FACTOR for heart disease. It is not necessarily a disease in and of itself. High cholesterol levels may increase the risk of heart attack, blood viscosity, blood pressure, and arteriosclerosis. However, 50% of first heart attacks occur in people with normal cholesterol, and folks with high cholesterol can live long, healthy lives.

In 2001, the National Heart, Lung, and Blood Institute issued new recommendations for ideal cholesterol levels with the goal of prevention. Catch cholesterol early, and maybe we can reduce heart disease risk overall. What once was an ok cholesterol level, say, 210, is now borderline high and subject to lifestyle changes and pharmaceuticals. Their recommendations are quite comprehensive, including smoking cessation, attention to underlying metabolic syndrome (aka syndrome X), weight management, exercise, decreased dietary saturated fat and cholesterol, plant sterols, niacin, and pharmaceuticals including statin drugs.

Unfortunately, all we tend to hear for creeping cholesterol levels is STATINS, to the point that some cardiologists half-jokingly say should be added to the water supply. Statins work by interfering with cholesterol synthesis in the liver, and they are very effective at lowering cholesterol numbers. The dietary supplement red yeast rice contains low-dose natural statins that work similarly. Problem is, artificially lowering cholesterol levels may not actually lower your risk of heart attack or premature death. In fact, statins (and, to a lesser extent, red yeast rice) can severely damage liver and muscle tissue, sometimes irreversibly. Perhaps these drugs do have a place. But, wouldn't you rather try a few other things first that are known to be safe and definitely improve your changes of a long, healthy life?

Cholesterol is poorly understood.

Cholesterol is essential for body function. It is a component of healthy cell walls, the base for most hormones, important in metabolism of fat-soluble vitamins like A, D, and E, and essential for the synthesis of vitamin D. For better or worse, cholesterol may also deposit on blood vessels. Scientists are beginning to think that cholesterol plaque is the body's band-aid for inflamed or damaged vessels. A good thing, in a way, but it signifies stress in the cardiovascular system. This stress, presumably inflammation, may actually play a bigger role than cholesterol levels on heart disease risk. (Testing for two measures of inflammation—homocystine and C-reactive protein—are becoming more common as ways to assess cardiovascular risk beyond the less reliable cholesterol numbers.)

High serum cholesterol can have many factors, most of which are not fully understood in modern medicine. A diet high in saturated fat and cholesterol-rich foods are thought to play a major role; however, this role is being challenged. Along with genetics and overall diet, blood sugar stability and "syndrome x" also set the stage for poor cholesterol levels. And, inflammation in the body may increase cholesterol synthesis. Most cholesterol recommendations include the reduction of dietary saturated fat and cholesterol. Yet, some scientists have discovered that low dietary cholesterol causes the body to make more cholesterol on its own, while increased dietary cholesterol decreases the body's cholesterol production. Quite a different story. (Perhaps this is why the

French consume all those “bad foods” and still have lower cholesterol? Of course the red wine, relaxed lifestyle, regular exercise, sensible food portions, and higher quality meat, dairy, and bread products probably help, too.) We do know that cholesterol levels typically rise as we age, leveling off around age 60, and they increase a little in the winter.

Cholesterol 101: In order to circulate in the bloodstream (water), cholesterol (fat) must be packaged into a lipoprotein in the liver. This fat-protein package can exist in different forms. Cholesterol’s close cousin, triglyceride, is packaged similarly. The density and size of the lipoprotein is determined by the fat/lipid ratio. Fat is less dense and more bulky than protein. So, high density lipoproteins (HDLs or “good cholesterol”) have more protein and less fat, while the low density lipoproteins (LDLs or “bad cholesterol”) are high fat. Very low density lipoproteins (VLDLs “very bad cholesterol”) are relatively high in fat and triglycerides. You don’t hear much about VLDLs, but they are an important puzzle piece.

EXCESS DIETARY CARBOHYDRATES ARE SYNTHESIZED INTO TRIGLYCERIDES, some of which are then packaged with cholesterol as VLDLs to transport them to muscle and fat cells. After the VLDLs drop off their triglyceride loads, so to speak, they are changed into LDLs. Various cells in the liver and other parts of the body absorb some of the cholesterol for cell needs, gradually transforming LDLs into HDLs in the liver and small intestine. The liver then uses HDLs to make bile and bile salts that emulsify and help with dietary fat digestion. In this way, cholesterol is constantly being broken down, reabsorbed, used to emulsify fats, transported around the body, reabsorbed, etc. However, with each cycle, some cholesterol is not reabsorbed. This cholesterol makes it to the large intestines and leaves the body in your feces.

Dietary cholesterol plays a minimal role in overall cholesterol levels. Fat and carbohydrate consumption may be bigger players. And, how your body makes, processes, and excretes cholesterol largely influences total cholesterol. To the best of our scientific knowledge, genetics, overall diet (not just fat consumption), and lifestyle choices control this process. Want some numbers? Approximately 1000 mg of cholesterol is synthesized daily in the liver, intestines, adrenal glands, and reproductive organs. Meanwhile 200-300 mg daily comes from diet. The cholesterol in your blood stream comes from these sources but also the constant re-absorption of cholesterol. This is why dietary and herbal methods of increasing elimination and decreasing re-absorption can have an important effect on total cholesterol levels. For example, fiber and digestive bitters like artichoke both play a role in this. The liver turns cholesterol into bile, and later reabsorbs most of this in the intestines. Bitters are believed to increase bile production. Fiber decreases its absorption in the intestines and instead flushes it out in the feces.

Top 10 Cholesterol Recommendations

1. Exercise.
2. Lose Weight.
3. Quit Smoking.
4. Eat more fiber. (Soluble Sources: oat bran/meal, apple, pear, pectin, beans, soy, flaxseed, psyllium, glucomannan...)
5. Eat more vegetables & fruit.
6. Cut out the bad fats. (Trans-fats, fried food, saturated fat?)
(If consuming fatty foods, opt for better quality.
For example, grass-fed, free-range dairy, eggs, and meat, wild game and fish. Smaller, local, and/or organic farms.)
7. Get more good fat. (Olive oil, fatty fish & fish oil, nuts)
8. Control carbs & underlying syndrome X or type 2 diabetes.
9. Eat more garlic, onions, bitters, and maybe a little red wine.
10. Consider Bitters and Antioxidant Anti-inflammatories, Reds,
THEN Consider Plant Sterols or Red Yeast Rice.

The research is constantly changing on the roles that diet, supplements, and pharmaceuticals play in our health. The chart below outlines factors—both well-supported and preliminary—that affect cholesterol and triglyceride levels.....

Quick Guide to Cholesterol Remedies & Triggers

Items in italics are generally thought to trigger unhealthy cholesterol levels.

Items in regular type are generally thought to improve cholesterol levels.

	HDL (Good)	LDL (Bad)	Triglycerides (Bad)	Overall Lipids
Raised By	Weight Loss	<i>Trans-fats</i>	<i>Syndrome X</i>	<i>Smoking</i>
	Exercise	<i>Oxidized & Rancid fats</i>	<i>Blood Sugar</i>	<i>Obesity</i>
	Fish Oil/Omega 3	<i>Homocystine?</i>	<i>Dietary Carbs</i>	<i>Genetics</i>
	Alcohol (1-2/d)			<i>Saturated Fat?</i>
	Chromium			<i>Dietary Cholesterol?</i>
	Niacin (B3)			<i>Trans Fats</i>
	Walnuts			<i>Rancid Fats</i>
	Green Tea (3c/d)			<i>Fried Food</i>
	Beta Glucans			<i>Egg Yolks?</i>
	L-Carnitine			<i>French Press or</i>
	Lecithin			<i>Boiled Coffee (Not Filtered)</i>
	Guggul? Fenugreek?			
	Fenugreek?			
	Calcium?			
Lowered By	(Bad)	(Good)	(Good)	(Good)
	<i>Sugar</i>	Weight Loss	Low GI/GL foods	Vegan Diet
	<i>Low-fat diet</i>	Soy Protein	Soy Protein	Vegetarian ”
	<i>Smoking</i>	Olive Oil	Artichoke?	Soluble Fiber
		Flax Oil?	Control	Walnuts
		Vitamin C	Blood Sugar	Fish Oil
Other Goodies:		Chromium	Exercise	Mediterranean Diet
	Reds/Purples:	Walnuts		Fermented Foods
	Hibiscus	Plant Sterols		Plant Sterols
	Pomegranate	Green Tea (3c/d)		Small/freq meals
	Rooibos Tea	Black Tea		Stinky Garlic?
	Cherries	Beta Glucans		Nuts
	Purple Grape Juice	Lecithin		Red Yeast Rice
	Anti-ox/flam Spices:	Guggul?		Chromium
	Turmeric	Artichoke?		Brewer’s Yeast
	Ginger	Cinnamon?		Vitamin Bs
	Cinnamon			Niacin
	Green Tea			Maitake?
	Circulation Enhancers:			Calcium?
	Gotu kola			Magnesium?
	Ginkgo			Vitamin E?
	Cayenne			B6/B12/Folic?

Lowering Cholesterol Numbers

It may be faulty to think that mechanically/artificially lowering cholesterol numbers = reduced cardiovascular-related mortality risk. Diet and lifestyle changes are your best bet for a longer, healthier life. However, some people still need (or want) to see their cholesterol numbers drop rapidly. Working in health food stores, the best feedback I have had for cholesterol numbers has been for red yeast rice and plant sterols (ie: Basikol). Both are relative newcomers to western natural medicine.

Red Yeast Rice may be somewhat new to western medicine, but it has been used as food and medicine in Asia for more than a millennium. **Controversy:** Quite a bit of hullabaloo surrounded it when one supplemental form, the well-researched Cholestin, hit the US market. Red yeast rice is a natural source of statins, the same group of compounds found in popular cholesterol drugs Lipitor, Lovestatin, and so on. Pharmaceutical companies cried patent infringement, and the FDA banned Cholestin. Other brands continue to slide under the radar and are easily found on health food store shelves. **How it Works:** Where pharmaceutical counterparts tend to contain high doses of one statin, red yeast rice provides a “mild statin fuzz” of a variety of low dose statins. Both the drug and supplement statins interfere with the liver’s production of cholesterol. Studies show that red yeast rice effectively reduces LDL cholesterol and may also reduce triglycerides over the course of two to four months. Unfortunately, most of the research on red yeast rice was done on the banned Cholestin; other brands may not have the same chemical makeup and action. Anecdotally, people do see results with the available brands. **Cautions:** Generally, red yeast rice demonstrates fewer side effects than the drugs, and it may be just as effective for some people. However, red yeast rice is not without risk. It still may increase liver enzymes and complicate both liver and muscle function, though this is typically less common and less severe than with the drugs. Red yeast rice should not be used if you take statin drugs, have a history of liver disease, are pregnant or nursing. Keep an eye out for raised liver enzymes, joint pain, and muscle weakness while taking the supplement. And, like all statins, red yeast rice lowers your body’s natural CoQ10 levels (see below), so you may want to take supplemental CoQ10 with the red yeast rice. **Final Word:** Red yeast rice may be safer than yet just as effective as statin drugs. But, it brings us back to my primary concern regarding cholesterol drugs: We don’t know that altering cholesterol numbers alone will truly reduce mortality risk.

Plant Sterols are a group of compounds that include beta-sitosterol and are marketed as Benecol, Basikol, and Basichol. They can be found in pill form, mixed in flax oil, and manufactured with “heart healthy” margarine and salad dressing (check labels to make sure all the ingredients are clean, non-hydrogenated, and free of artificial colors, preservatives, and dyes). They occur naturally in vegetable oils including soybean and sunflower, but not in high enough amounts to be therapeutic. **How it Works:** Plant sterols are structurally similar to cholesterol. Researchers postulate that sterols limit the absorption of dietary cholesterol in the intestines via competition. It is possible that sterols also compete with the re-absorption of body-synthesized cholesterol. At least one USDA study found that plant sterols in salad dressing, combined with a low-fat diet, doubled the cholesterol reduction compared to a diet-only group. Some participants did not respond to a low-fat diet, but did respond to the plant sterols. Other studies on functional food and pill forms of plant sterols have found similar results. Doses range from 500 to 10,000 mg per day. **Cautions:** Few side effects and no drug interactions are currently known for plant sterols. However, they are known to interfere with vitamin E and beta carotene absorption. It is likely that they interfere with the absorption of other types of fatty vitamins and nutrients. **Final Word:** Plant sterols are a promising addition to dietary and lifestyle changes for improving cholesterol numbers. Both the functional food and supplemental forms are convenient for most people. However, it is still moderately new to the market. We may discover longer-term side effects as time goes on, most likely involving their competition with fatty compounds we DO want to absorb in our intestines.

Hypertension

Unlike cholesterol, high blood pressure IS a disease, not just a disease risk. While it is common to have moderately high blood pressure, serious hypertension can damage kidneys, lead to arteriosclerosis, heart attack, and stroke. Hypertension can be caused or aggravated by genetics, stress, salt intake, kidney disease, high cholesterol, and obesity. You'll want a full work up from your doctor to rule out or deal with underlying conditions that may be causing the hypertension, such as Cushing's syndrome, pheochromocytoma, kidney disease, or pregnancy-induced hypertension. (These serious conditions should not be self-treated.)

As with cholesterol, blood pressure recommendations have changed in recent years. Again, the hope is to catch hypertension earlier to avoid complications in the long run. Though pharmaceutical drugs for hypertension can have unpleasant side effects (impaired sexual activity, dizziness, etc.), they are generally safer and more effective at avoiding a heart disease-related death than cholesterol drugs. Studies have found that the oldest, least expensive hypertension drugs—diuretics—are usually just as effective as fancier, newer drugs and have fewer side effects. However, many people with mild-to-moderate hypertension may want to look at natural remedies first. Lifestyle changes and holistic remedies for hypertension often have multiple benefits—not just lowering blood pressure—but they take extra commitment on your part.

First, it is helpful to better understand your personal triggers for hypertension. Purchase or borrow a blood pressure cuff to measure your blood pressure throughout the day for one to two weeks. Notice if your blood pressure is steadily high or if it comes in spikes. Test yourself to see if stress or salt cause hypertensive spikes. You may not be able to determine why you have high blood pressure. That's fine. Many remedies will work regardless. However, the more you understand about your body, the better you can fine-tune your lifestyle changes to work for you.

General recommendations.

1. Exercise (cardio) & Weight Loss. You've heard it before, you'll hear it again. Exercise and weight loss are HUGE in helping to maintain a healthy heart. Obesity puts pressure on your blood vessels, increasing pressure. Obesity also puts pressure on all vital organs, compromising overall health. Cardio exercise not only helps with weight loss, but it strengthens the muscles in your heart and cardiovascular system (hence the **CARDIO** exercise). If you're new to exercise, start small because it will stress your heart and moderately raise blood pressure at first. Go for a walk, then lengthen the walk, head for some hills, maybe bring it to a jog or run over time. Or pick up a fun activity: dancing, x-c skiing, swimming, canoeing/rowing/kayaking...

2. Address Stress. Episodic, or stress-related hypertension, calls for a shift in reality. But, seriously, who couldn't use some improved stress management? If you're begun exercising, then you're on your way. In spite of all the disagreement in the heart health industry, everyone agrees that moderate exercise can boost mood, improve the body's resistance to stress, and (as mentioned above) directly or indirectly lower blood pressure and cholesterol. Also consider the relaxing practices of yoga, tai chi, meditation, art, journaling, and a good night's sleep. If you need a hand, consider such remedies as magnesium (a mineral that benefits both the heart and the nervous system—see below for more), and the relaxing herbs passionflower, linden, skullcap, lemon balm, and/or motherwort. While slimly researched, all of these herbs have the reputation of mellowing you out. Passionflower, linden, and motherwort in particular have a history of use with heart and nervous system troubles. All can be taken as tea, tincture, or capsule, though motherwort is very bitter tasting. A vitamin B complex may also help with stress levels and heart health, in part because several B vitamins—and their friend vitamin C—play a role in energy (ATP) production, not to mention lowering homocystine levels and improving overall heart health.

3. Eat your veggies... and your fruits. Increasing your produce intake can be just as effective as cutting out salt in reducing blood pressure. Aim for 8-10 servings per day. If this sounds too daunting, bear in mind that serving sizes are relatively small: 1 medium-size fruit; 1/2 cup raw, cooked, frozen, or canned fruits/veggies; 3/4 cup 100% veggie or fruit juice; 1/2 cup beans, 1 cup raw, leafy veggies; 1/4 c dried fruit. A big salad at lunch can count as 2-3 servings, add a piece of fruit or a cup of high-vegetable soup and you've got about 4 servings with lunch alone. Start by focusing on foods you enjoy eating, whether it be strawberries, blueberries, asparagus,

artichoke, salad, oranges, etc. Then try to incorporate vegetables into the main dish: salads, stir fries, soups. Experiment with vegetable alternatives to carbohydrate ingredients: spaghetti squash, mashed cauliflower “potatoes,” raw zucchini/summer squash/carrot/bell pepper “noodles,” celery scoops in place of tortilla chips.


4. Watch the salt. Combine more fruits and vegetables with less salt to maximize your blood pressure lowering diet. Replace your salt shaker with spice blend shakers. Even if you keep some of the salt in the mix, the overall amount will be reduced. Try to learn to like food without salt. It may take a couple weeks to get used to it. This step is most important if you’ve noticed blood pressure spikes when you consume salty food. For others, salt plays a more minor role.

5. Think about diuretics. Before turning to conventional diuretic drugs, try food or herbal diuretics. Celery (ribs, root, seeds), parsley, and dandelion (leaf & root) are some of your best food diuretics. Consider juicing some green veggies each day, get more of them in your diet, or aim to eat 4 ribs of celery per day. Opt for organic celery because conventional celery is particularly high in pesticide and fertilizer toxins. Celery, in particular, is a good blood pressure food because a compound in it, 3-n-butyl phthalide may specifically reduce hypertension. Other diuretics include ground dandelion root, burdock root, and/or chicory root, brewed like coffee. Green, white, and/or oolong tea. Peppermint tea and nutritive herbal teas made from nettle, alfalfa, and horsetail (blended with mint for flavor). Don’t forget to drink water!

6. Skip the coffee & the smoking, or at least reduce them. Stimulants in coffee can aggravate blood pressure. Switch to naturally Swiss water processed decaf, or, even better, an herbal brew of roasted dandelion root, burdock root, and roasted chicory. And, add hypertension to the list of smoking complications. As you can probably guess, second-hand smoke can be as problematic.

7. Add some alliums. What’s an allium? Why, it’s the amazing plant genus that includes garlic, onions, leeks, scallions, shallots, chives. . . you get the idea. These vegetables can moderately lower both cholesterol and blood pressure, and are believed to improve overall heart health. Do not expect them to perform miracles, though. The number reductions are modest, a few points here or there. However, they still have a general tonic effect on the cardiovascular system. Food and stinky garlic supplements (not aged or odor-free varieties) seem to be the most effective. Chop raw garlic, let it sit for 10-15 minutes, then add to your recipe.

8. Look into heart tonics.

Hawthorn (*Crataegus* spp) : Research hawthorn a little, and you will be amazed. How can an herb—growing happily at the forest’s edge—have such affinity for the human heart? If nothing else, hawthorn is proof to me of a higher power. The berries, leaves, and/or flowers of this shrubby, thorny tree have been shown to strengthen the pumping ability of the heart muscle, enhance blood flow and supply to the heart, dilate and relax blood vessels, lower blood pressure, and protect the cardiovascular system from oxidative stress. (Deep breath.) Procyanidins (antioxidants) in hawthorn also appear to inhibit angiotensin-converting enzyme, an enzyme that catalyzes blood vessel constriction. Over time, hawthorn improves oxygen supply to the heart and strengthens the muscles of the cardiovascular system, and so on. The red rosehip-like berry tastes good, is rich in antioxidants, and has traditionally been used. However, modern herbalists and scientists have focused on the leaves and flowers, and many people combine all three parts into their preparations. It is a tonic, not a full-on-drug. Improvement in blood pressure numbers may only be moderate, yet overall benefit with long-term use is high. It is most often used for mild, chronic congestive heart failure, cardiac insufficiency, post-heart attack care, an aging heart, arrhythmia, angina, cardiomyopathy, and overall heart health. Cautions: It has no known toxicity, side effects, or contraindications. The only known drug interaction is with digitalis/digoxin —hawthorn increases the effects of this herb/drug. Practitioners in Europe purposely combine hawthorn with digoxin to lessen the drug dose and side effects while maintaining efficacy. (Please don’t try this at home.) Folks on blood pressure medication would want to monitor blood pressure if combining the drug with hawthorn as well.

Co-enzyme Q10: Approximately 100 mg of this vitamin-like compound has been shown in studies to reduce blood pressure over several months. The body also makes CoQ10 and uses it to turn food into energy (ATP). The heart is in particular need for ample CoQ10, and many medications (especially cholesterol meds) lower

natural CoQ10 levels. It is found naturally in fish and meat and can be synthesized by the body; however, supplements may have a more therapeutic effect. The remedy is well-supported by research for hypertension, heart attack, and angina. It is also used for cardiomyopathy, congestive heart failure, gingivitis, macular degeneration, Parkinson's, Alzheimer's, and to lessen fatigue. Low CoQ10 levels have been found in people with hypertension, as well as other forms of heart disease, diabetes, and morbid obesity. This fat-soluble substance is best absorbed in oil or softgel form, and with a meal. It appears to have few side effects and may actually be recommended with pharmaceutical drugs and supplements like red yeast rice and policosanol that lower CoQ10 levels. There is a theoretical drug interaction with warfarin. And, folks with congestive heart failure who take CoQ10 should not discontinue it suddenly.

More Circulation Support: Cayenne, gotu kola, ginkgo, rosemary...

9. Consider minerals: calcium, magnesium, and potassium. These electrolytes/minerals provide balance in your blood and intracellular fluid, affect nerve transmission, muscle contraction, and a myriad of other body processes. **Potassium** and sodium work like a yin/yang for your blood pressure. As sodium increases, blood pressure rises, as potassium increases, your blood pressure gets lower. The sodium/potassium balance also affects water balance, acid-base balance, muscle and nerve function, heart function, and kidney function. You need both minerals, but we typically get plenty of sodium and not enough potassium, which is widely available in fresh, real food. While it is important to limit sodium (salt) intake with hypertension, increasing potassium intake may also lower blood pressure. Supplements are available, but your **best sources of potassium** are avocados (680 mg), potatoes (782 mg), raw tomatoes (444 mg), lima beans (581 mg), chicken breast (350 mg), and bananas (440 mg). Calcium and magnesium are now making headlines for blood pressure as well. Adequate **magnesium** levels ensure optimal potassium levels (the two work off of each other), energy (ATP) production in the cells, nerve transmission, and muscle relaxation. Attention first drew to magnesium when researchers found that populations drinking magnesium-rich "hard water" had fewer cases of hypertension and heart disease. Later studies confirmed that magnesium intake improves blood pressure. Powdered magnesium supplements (ie: Natural Calm, AB Calm, Ionic Fizz) have become popular and are an easily absorbed way to get more of this mineral into your system. **Good dietary sources of magnesium** include oat bran (96 mg), spinach (78 mg), almonds (81 mg), brown rice (84 mg), swiss chard (75 mg), molasses (43 mg), beans and peas (40-60 mg), and nuts (40-50 mg). **Calcium** is a newcomer to the scene. Better known for its bone-building properties, calcium also plays a role in reducing blood pressure and obesity. Studies suggest that increased calcium intake may best regulate blood pressure in people who have salt-related hypertension, the elderly, and those of African American descent. Supplements are readily available, and good food sources include milk (300 mg), yogurt (300 mg) hard and semi-hard cheese (~300 mg), tofu (250 mg), bok choy (240 mg), almonds (50-70 mg), and kale (60 mg). **Nutritive Herbs:** Nettle, oat straw, alfalfa & dandelion leaf & root.

10. Know when you need "the big guns." High blood pressure is more than a risk factor, it's dangerous. Severe hypertension (150+/115+), steadily climbing hypertension, or blood pressure that does not respond to natural remedies over the course of two to three months calls for conventional medication. Talk to your doctor and keep an open dialog with your pharmacists regarding side effects and interactions as well. Your doctor may choose a pharmaceutical diuretic, calcium-channel blocker, ACE-inhibitor, or beta-blocker. They are generally safe, but it is your job to stay informed and listen to your body. Once your blood pressure has remained stable for several months or years, talk to your doctor about weaning off of the medication in favor of natural remedies and/or lifestyle techniques. Do not view your doctor as "the enemy" but a companion in health. If you are not satisfied with the care provided by your practitioner, find one you do like. Ultimately it is your health, and your responsibility. In spite of the woes of our medicine and insurance systems, we still have the luxury of choice.

Maria's Top 10 Tips for a Healthy Heart

Follow these tips to help lower your risk of high blood pressure and cholesterol. If you already have heart disease, these suggestions may help slow or reverse it. Always talk with your doctor and pharmacist before making any changes to find out what's right for you.

1. **Move your body!** Exercise and healthy weight are the #1 cardio-tonic.
2. **Quit smoking.**
3. **Address stress.** Meditate, do yoga, drink calming teas, whatever it takes...
4. **Eat more fiber,** especially soluble fiber. Oatmeal, oat bran, wheat bran, quinoa, beans, prunes, apples, pears, soybeans, nuts, flaxseeds, psyllium, hemp and chia seeds, whole grains...
5. **Eat more vegetables and fruit.** Aim for NINE servings a day.
6. Cut out the bad fats (hydrogenated oils, fried food), and get more good fat (olive oil, fatty fish, nuts).
7. **Keep carbohydrates under control** and opt for whole food forms.
8. **Watch the salt.** Use only a little, and opt for less refined salts like sea salt, blends with seaweed and/or herbs and spices, or skip the salty stuff all together.
9. **Eat and drink healthy diuretics**—celery, dandelion, parsley, burdock, green tea—to modestly lower hypertension. Nearly any form of these plants may help lower mild to moderate hypertension. Not sure where to start? Try four ribs of organic celery a day. (Use caution if you take blood pressure meds.)
10. **Consume heart tonics daily:**

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