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In this issue:

2 New Anticoagulant Drugs

3 New Weapon Against Cholesterol

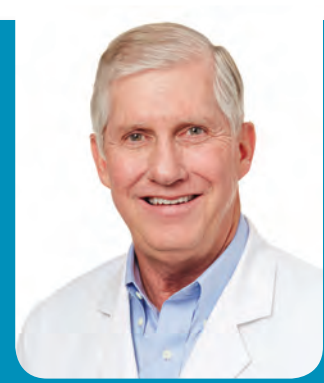
4 Too Much Sugar

4 Cherries with Ricotta &
Toasted Almonds

5 Staff Spotlight: Lisa McGuyer,
MS, RD, LD, CNSC

5 Lunch & Learn

New Anticoagulant Drugs



Paul D. Wade, MD

I am amazed at how much money is spent advertising prescription drugs on television. I personally do not think that is a good thing, but that's another story. I am sure that you have probably all seen advertisements for some of the new anticoagulant drugs. Arnold Palmer and his friends discuss this, as well as a generic patient wondering "can I do better?" or "can I up my game?" They are referring to 3 new drugs – Pradaxa[®], Eliquis[®] and Xarelto[®] – which are now available as an alternative to the classic anticoagulant warfarin (brand name Coumadin[®]).

All of these medications are taken orally, once or twice daily. They are generally given to patients with atrial fibrillation (a heart rhythm disturbance which increases the risk for stroke), patients who have blood clots in their legs (DVT) or in their lungs (pulmonary embolus) or who are at high-risk to develop these. In head-to-head studies, the 3 new anticoagulants mentioned above, have all been shown to be statistically superior to warfarin in treating these problems, as well as having less adverse reactions – the major one being bleeding, including stroke. Furthermore, these new drugs do not require routine blood monitoring or any dietary restrictions, both of which are necessary for patients who take warfarin.

So what's not to like about these new drugs? For one thing, they are much more expensive than generic warfarin, as all of these drugs



are brand name only and will remain so for several years. Also, except for Pradaxa[®], the other 2 new drugs do not have a way to rapidly reverse the anticoagulant effects. The anticoagulation effects of warfarin can be readily reversed with vitamin K. The ability to reverse the anticoagulation effects of these medications is important in several situations. For example, if urgent surgery is necessary, it cannot be safely done if the patient is anticoagulated, due to bleeding risk. Likewise, if the patient is involved in some type of trauma, such as a car accident, rapid anticoagulation reversal is necessary to

prevent significant blood loss.

So what's a patient to do? It is always a good idea to discuss this with your physician. Personally, if a patient of mine has been stable on warfarin and has not required multiple dosage adjustments, then I would recommend that they not change. That said, if the patient is significantly bothered by the blood monitoring tests as well as the dietary restrictions necessary with warfarin, then changing to a newer drug could be considered if it is not cost prohibitive. Clearly arguments could be made for either side. As is so often said, "it's never easy".

Health & Wellness

Sugar in the Morning, Sugar in the Evening, Sugar at Supper time...



Boy, oh boy it is ‘Sugar Time’ these days with a lot of media attention and published reports about the unhealthy effects of too much sugar in our diet.

We are eating and drinking too much added sugar in case you did not know. In fact, Americans are consuming about 22 teaspoons (tsp) of added sugar each day. This is equivalent to 355 extra calories each day and about 150 pounds per year. This is 2-3 times more than what is recommended, which is a limit of 6 tsp per women and 9 tsp per men.¹ The new 2015–2020 Dietary Guidelines recommends that less than 10% of your calories come from added sugars.² The top 5 sources of added sugars in our diet are **sweetened beverages, baked goods, dairy desserts, candy, and cereals.**

Undoubtedly you have heard that added sugars are linked to a higher risk of obesity, type 2 diabetes, and tooth decay. But recently studies have shown a high sugar intake also puts you at risk for heart disease and stroke. In one particular study participants were given Kool-Aid like beverages with varying amounts of sugar. Results showed the higher the sugar content the higher their LDL (bad cholesterol) and triglyceride (another fat in our blood) were. It was determined that the fructose in the beverages is almost exclusively metabolized by the liver. Once the liver gets overloaded it turns the fructose into fat which ends up in the blood causing the triglycerides and bad cholesterol to increase.

One way to decrease your intake of sugar is to read and compare food labels. Keep the total grams (gm) of sugar to less than 10gm per serving. Also, look for five of the most commonly used sweeteners (corn syrup, sorghum, cane sugar, high-fructose corn syrup, fruit juice concentrate) in the ingredient list and skip items that have them as the first or second ingredient.¹

In place of your dessert consider a bowl of fresh berries topped with lite cool whip, an ounce of dark chocolate, or a yogurt parfait consisting of plain yogurt, fresh fruit and slivered almonds. See below for a sweet treat with no added sugars.

1. Liebman B. True or false? Fact vs. fiction about the foods you eat. *Nutr. Action Newsletter*. 2015

2. U.S. Department of Health and Human Services and U.S. Department of Agriculture. 2015 – 2020 Dietary Guidelines for Americans. 8th Edition. December 2015. Available at <http://health.gov/dietaryguidelines/2015/guidelines/>. Jul/Aug:3-6.

Cherries with Ricotta & Toasted Almonds

(Recipe from *Eating Well*. N.p. 2016. Web. 11 Jan. 2016. Available at http://www.eatingwell.com/recipes/cherries_with_ricotta_toasted_almonds.html)

Ingredients

- 3/4 cup frozen pitted cherries
- 2 tablespoons part-skim ricotta
- 1 tablespoon toasted slivered almonds

Preparation

Heat cherries in the microwave on High until warm, 1 to 2 minutes. Top the cherries with ricotta and almonds.

Tips & Notes

- **Healthy Heart Variation:** To reduce saturated fat even further, use nonfat ricotta in place of the reduced-fat ricotta.
- 133 calories, 0 g saturated fat.

Nutrition

Per serving: 150 calories; 6 g fat (2 g sat, 3 g mono); 10 mg cholesterol; 20 g carbohydrates; 6 g protein; 3 g fiber; 39 mg sodium; 329 mg potassium.

Carbohydrate Servings: 1

Exchanges: 1 fruit, 1 fat



Staff Spotlight:

Lisa McGuyer, MS, RD, LD, CNSC



Lisa's professional interests include weight management, nutrition counseling for the treatment of diseases and conditions related to an individual's diet and eating behaviors.

Dietary management for the following:

- High Cholesterol
- Heart Disease
- High Blood Pressure
- Bowel Disorders
- Gluten and Other Food Allergies
- Vitamin Deficiencies
- Post-Bariatric Surgery Behaviors
- Disordered Eating

Lisa's methods are geared towards lifestyle and behavioral changes based on evidence-based research for overall nutrition status and well-being.

As a member of Baylor Preferred Health, you may schedule an appointment with Lisa for no additional charge.

Please consult with your physician if you would like to discuss how nutrition counseling can be part of your personal wellness plan.

Lunch & Learn

Please join us for an upcoming Lunch & Learn discussion featuring Lisa McGuyer, MS, RD, LD, CNSC, Dietitian - Nutrition Consultant

Lisa will be discussing The Power of 3:

3 foods to include, 3 foods to avoid, and 3 lifestyle changes you can make today!

Friday, May 27th at 12pm

Whole Foods

8190 Park Lane, Suite 351

Conference Room (Located Inside Whole Foods)

Dallas, TX 75231

Space will be limited. Please RSVP at 214.820.9101.

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Reminder

If you need to reach your physician after hours, please be sure and use the 24-hour number provided on your membership card. If you need a replacement card, please let us know and we will be happy to send you a new one.

