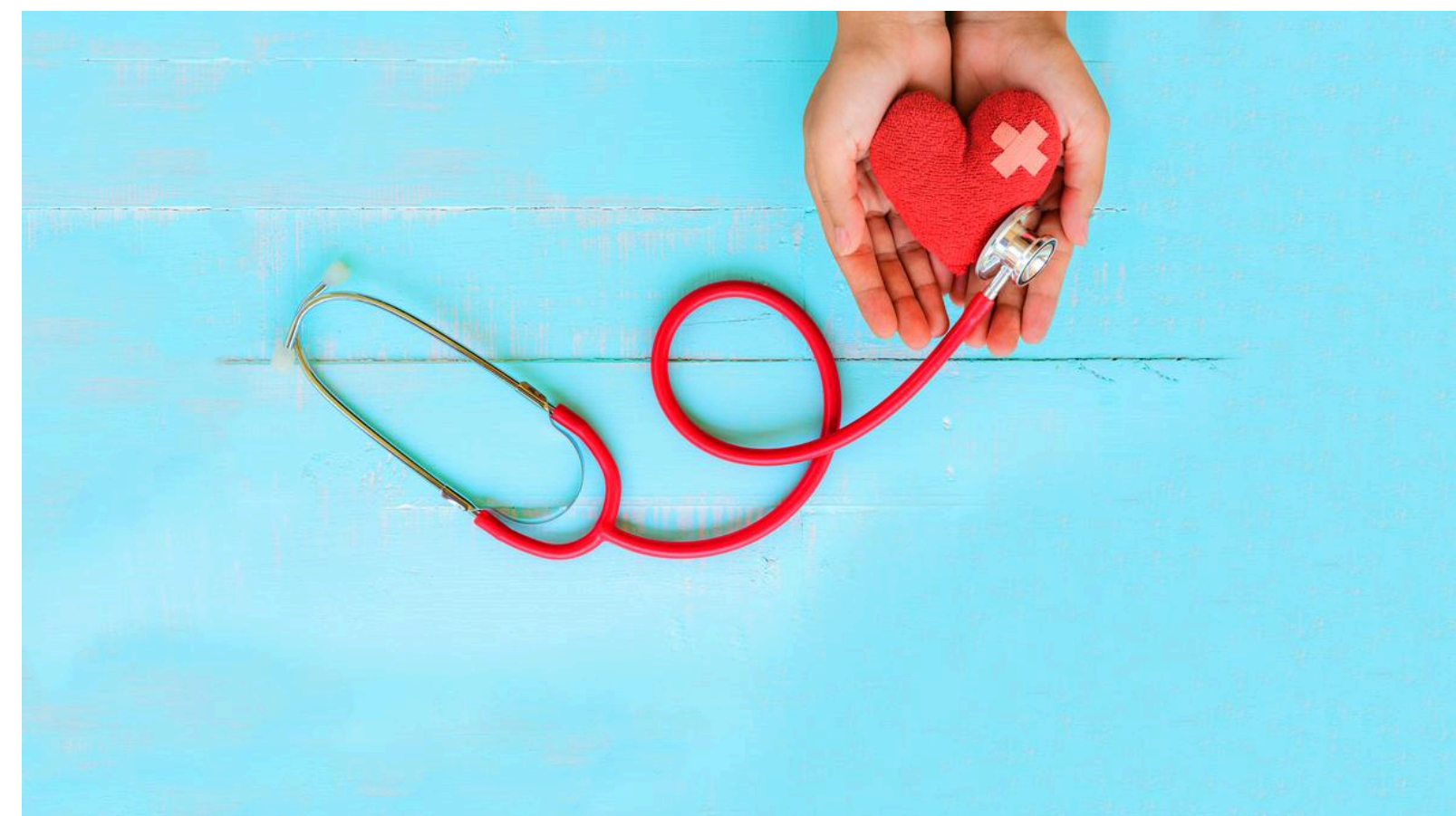


Why we are losing young lives to heart disease and how we can tackle this

Individual, public health and policy-level measures are needed to combat the growing health crisis of heart disease; awareness about the building blocks of a healthy lifestyle and screenings from an early age can go a long way towards managing the burden

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When the foundation is solid, the building is strong. Similarly, when the building blocks of health are in place, lifestyle diseases such as heart attacks, stroke, diabetes, hypertension, obesity and even some cancers, stay away. Image used for representational purposes only | Photo Credit: Getty Images

The theme of this year's World Heart Day, "Don't miss a beat" is an urgent call to action to raise awareness about the devastating nature of heart diseases and to take immediate steps to prevent, detect and manage them effectively and efficiently. The timing for this call couldn't be better, as it

comes at a juncture when we are losing **more and more young lives** without warning. Or we are, perhaps, missing subtle, hidden warnings.

A recent tragic incident was the sudden collapse of an apparently healthy 39-year-old heart surgeon while he was engaged in ward rounds in a hospital in Tamil Nadu. Despite the fact that he received prompt medical assistance and was successfully resuscitated and treated with advanced therapies including angioplasty and ECMO, he succumbed to his massive heart attack due to irreversible damage to the heart muscle caused by a major block in his left main coronary artery.

Our minds are naturally flooded with questions when we come across shocking news reports such as these. We all have young professionals amongst our kith and kin and anxieties and fears are mounting about this looming **public health threat**. This young doctor had experienced a sudden cardiac arrest, or a sudden derangement in the heart's electrical activity leading to a failure of the heart to beat. The commonest cause of a sudden cardiac arrest is a heart attack but there are other causes such as heart muscle disorders, structural abnormalities in the heart that are present since birth, genetic heart diseases and infections. Timely cardiopulmonary resuscitation or CPR by a trained individual is the only way to reverse a sudden cardiac arrest. A thorough investigation has to be undertaken to understand the exact cause of a sudden cardiac arrest and death.

This should be a wake-up call. The issue of young, sudden cardiac deaths should be addressed methodically through the following steps.

At the individual level

Know your risk factors

Make lifestyle changes

Have regular health checks and take medications as needed

Prioritise work-life balance

At the public health level

Screen employees at workplaces, especially those in high-stress professions

Optimise physical and mental health support

Propagate CPR training

At the policy level

Reduce the work burden on professionals in critical and high-stress jobs

Equip them with disease prevention tools

Implement thorough medical evaluations of sudden cardiac arrest survivors or deceased individuals

Multifactorial disease

A heart attack is a truly multifactorial disease with behavioural, environmental, metabolic, and genetic factors at play. The three silent killers – **hypertension, diabetes, abnormal cholesterol levels**; the three behavioural factors – **unhealthy diets, inadequate exercise**, poor emotional wellbeing including **lack of sleep**; the four addictions – **tobacco, alcohol**, recreational drugs, **gadgets**; **obesity**, environmental pollution, inflammation and genetic aberrations – a combination of one or more of these risk factors is responsible for the causation of coronary artery disease, heart attacks and sudden cardiac deaths.

We may have heard of some or all of these risk factors but we are not aware that we can prevent and control every one of them by smart action. When the foundation is solid, the building is strong. Similarly, when the building blocks of health are in place, lifestyle diseases such as heart attacks, stroke, diabetes, hypertension, obesity and even some cancers, stay away.

Take control of health

Remember every day to:

Consume: A healthy balanced diet with at least five portions of vegetables and fruits and adequate whole grains, proteins, healthy fats and hydration.

Not miss: Your daily dose of brisk aerobic exercise and weekly dose of muscle strengthening exercise.

Practice: Stress management skills regularly, as stressors are all around us and we need to learn to manage them appropriately.

Ensure: You have a good bedtime routine aiming for 7-8 hours of sleep daily.

Say no to: Tobacco and recreational drugs, limit alcohol intake and keep the use of gadgets to a minimum.

Track regularly: Blood pressure, blood sugar, lipid levels, body weight, waist circumference, body mass index.

Undertake: Regular health checks, every five years from the age of 20 to 40 and every year after that, irrespective of the presence or absence of symptoms. Undertake more frequent health checks if any abnormality has been detected and treatment is being provided.

Monitor: Emotional wellbeing by taking stock of feelings of anxiety, depression, overwork, burn-out, lack of interest in self-care and self-isolation

Prioritise: Work-life balance by ensuring a clear demarcation between work hours and leisure time, engaging in active hobbies in free time and focusing on building strong family ties and supportive social circles

Staying healthy

Individuals from all walks of life and across age and gender spectra may apply this framework to themselves to stay healthy and disease-free. In fact, 30-40% of heart attack victims collapse suddenly outside a hospital setting, and the only way to address this is to promote a healthy lifestyle and improve community-wide CPR capability. In the unfortunate case of sudden death of a young individual, a thorough medical evaluation including a postmortem and genetic evaluation of the deceased has to be conducted to understand the exact cause in order to prevent further deaths in the surviving family members.

Screening and treatment

The global guideline is to start **screening for cardiovascular risk factors** at the age of 20 years. While healthcare professionals can be screened at the time of enrolment in university or their jobs, other professionals should also undergo screening at the job intake level. Public health screening protocols should be in place for all segments of the population. Once detected, borderline abnormalities such as prediabetes, prehypertension and mild lipid derangements should be addressed aggressively with lifestyle changes. Medications should be resorted to only if behavior modification is insufficient or ineffective on its own. Once initiated on medicines, the adherence and response to drugs should be closely monitored.

A team of experts including physicians, physiotherapists, dieticians, psychologists and nurses, should be roped in to care for the at-risk individual. The myth that a single doctor or professional can manage the various dimensions of risk should be busted and coordinated care should become mainstream. A multidisciplinary team approach is the way forward in managing heart diseases, reversing risk factors and preventing sudden deaths.

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