

Healthy Aging Series:

Keep your heart healthy

Heart disease is the leading cause of death for both men and women in the United States. In fact, more women die of heart disease annually than men. Some risk factors for heart disease are not within your control—age and heredity. After age 65 the risk of death from heart disease rises dramatically. Children with parents who have heart disease are more likely to develop it themselves.

The good news is that many of the risk factors for heart disease are within your control, and you can do something about them. Following are steps you can take for a healthier heart:

1. Don't smoke. If you do smoke, quit. It will greatly reduce your risk for a heart attack. Contact your health care provider for help to quit. Also avoid exposure to secondhand smoke.

2. Lower high blood pressure. High blood pressure—also called hypertension—makes the heart work harder and increases the risk of heart disease. It usually has no symptoms. Contact your health care provider for a blood pressure check and to find out if you need to take steps to reduce your blood pressure. To help prevent or control high blood pressure you need to maintain a healthy weight, be physically active, follow a heart-healthy diet, and limit your salt and alcohol intake. If you are prescribed blood pressure medication, take it as directed.

Normal blood pressure for adults is :

- Less than 120 mmHg for systolic pressure
- Less than 80 mmHg for diastolic pressure

3. Reduce high blood cholesterol. High cholesterol does not cause symptoms. Over time it builds up in the arteries and can eventually block blood flow to the heart and lead to a heart attack. It can be treated with lifestyle changes—a heart healthy eating plan, regular physical activity, and maintaining a healthy weight. If these changes do not lower it enough, there are several medications that can help. Blood cholesterol levels should be checked with a fasting “lipoprotein profile” every five years starting at age 20.

Desirable, healthy blood cholesterol levels are :

- Total blood cholesterol—Less than 200 mg/dL
- LDL (“bad”) cholesterol—Less than 100 mg/dL
- HDL (“good”) cholesterol—40 to 59 mg/dL (the higher the better)
- Triglyceride Level—Less than 150 mg/dL

4. Aim for a healthy weight. Eating a sensible, heart-healthy diet and getting regular physical activity are important for maintaining a healthy weight. Check with your health care provider on what is a healthy weight for you.

5. Be physically active each day. To protect your heart, you need at least 30 minutes of moderate physical activity most and, preferably, all days of the week. If 30 minutes is too much at one time, you can break it up into periods of at least 10 minutes each.

6. Maintain your fasting blood sugar level to below 100 mg/dL. Ask your health care provider when you should have your level checked. If you have diabetes, monitor and control your sugar levels. Diabetes damages blood vessels including the arteries of the heart and greatly increases the risk for heart disease.

7. Manage your stress. Individual response to stress may be a risk factor for heart disease. Some people under stress will overeat, start smoking, or smoke more.

8. If you drink alcohol, drink in moderation. Too much alcohol can raise blood pressure, cause heart failure, and contribute to obesity as well as alcoholism, suicide, and accidents.

By taking these steps, you can go a long way to keeping your heart healthy.

Sources: “Reducing Heart Attack Risk,” National Heart, Lung, and Blood Institute; “Cholesterol Levels: AHA Recommendation,” “Risk Factors and Coronary Heart Disease,” American Heart Association; “Women’s Steps to a Healthier US,” 2004 Daybook, The National Women’s Health Information Center.

This Healthy Aging Series segment was prepared by RJF Agencies, Inc.

Co-op Lender's Corner—HUD reviews MIP Rebates

At this year's conference a question arose about HUD's willingness to approve cooperative operating budgets that include as projected income HUD's MIP Distributive Share, often called the MIP Rebate.

The question was raised since, although the amount and timing of rebates has been fairly predictable (after the 4th year of operations), it is not guaranteed.

We have been assured by senior HUD management staff in Minneapolis that the decision whether or not to include the rebate as budgeted income is within the discretion of individual cooperative's board of directors.

HUD's position is tempered somewhat by the cautionary advice that neither the amount nor timing of the rebate payments is guaranteed and that if there is significant change, the cooperative may need to adjust monthly charges. In fact, the practice of distributing surplus (rebates) could be abandoned altogether if there is significant negative experience with cooperatives in the Section 213 insurance fund. We all consider that very unlikely, although it is possible.

For more information, please consult with your individual HUD project manager or Jill Weber of Cooperative Housing Resources, LLC at 651-310-0226.