

BERITA YAYASAN CALL STATE OF THE STATE OF T



Tun Ahmad Sarji bin Abdul Hamid
President

COVID-19 and CVDs

The current COVID-19 pandemic affects everyone around the world. In such times as these, The Heart Foundation of Malaysia is behoved to advise everyone to take extra precautions, even when the pandemic has subsided.

Please be vigilant as there may still be pockets of the virus still out in the wild. This is especially important for those who have cardiovascular diseases (CVDs). The statistics indicate that there is a higher mortality rate among those with CVDs such as coronary heart disease or hypertension. There is also a higher risk of developing more severe symptoms or complications among them, including the elderly.

Other people who are at high risk of potentially life threatening complications include those who:

- have had any type of transplant surgery (e.g. heart transplant or any other major organ transplant),
- are recovering from any major surgery (e.g. open heart surgery, heart bypass, etc),
- are smokers/vapers, who are at risk of infection because the hands will touch the mouth.

Basically, anyone whose immune system is impaired or compromised in any way or form is at greater risk; so if you are in this category, please do take extra precautions.

Moving forward, YJM hopes that you will continue to keep heart health in your mind. Don't skip heart-healthy habits including exercising and eating healthily. At the same time, take cognisance of the lessons learned during the COVID-19 pandemic for our future safety and health. These lessons are simple enough – they include essential elements such as good hygiene in our everyday lives. The first is to wash our hands in the correct way and to make a habit of doing it frequently. It's important to use soap and water, and to wash every single millimetre of our hands for at least 20 seconds.

May it also be advised that we adopt a few other healthy habits:

- If you need to cough or sneeze, cover your nose and mouth with a tissue and discard it immediately. If no tissues are available, cough/sneeze into the crook of your elbow (never use your hands, or you risk spreading your germs elsewhere).
- If you are ill (e.g. common cold), wear a face mask should you need to go out. However, it is advisable to stay at home and self-isolate as much as possible to prevent spreading what you have to others. Remember to disinfect/sanitise everything in your room/home often this minimises the risk of re-infecting yourself or infecting others.
- When in public, avoid touching surfaces as they may be contaminated. If it is unavoidable to touch, sanitise or wash your hands as soon as you get the chance. Equally important is not to touch your face, eyes,
 - or mouth with unwashed hands. Cleanliness or purification is half of the faith.



atror

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Heart Health Remains as Important as Ever

With the COVID-19 pandemic affecting Malaysia and the rest of the world, we should not forget about heart health. Now, more than ever, is the time that we should start to focus our attention to our heart health. Let's take the pandemic and the movement control order as a wake-up call and start caring for our heart health, and of course, our overall health as well.

The future of your health truly lies in your hand! The heart especially, should be given more attention as it is the hardest-working organ in your body. Remember, heart disease is preventable. Almost all of its majority risk factors are avoidable as they are primarily linked to your lifestyle, such as high cholesterol, high blood pressure, diabetes, overweight and obesity, smoking, sedentary lifestyles and high fat, sugar and salt intake.

While heart disease is a cause for concern, we should remember the importance of hygiene in our day-to-day lives. In this issue, we feature an article on COVID-19 and cardiovascular disease. Other articles include a look at recent activities such as the Walk-A-Mile walkathon and a one-day Be A Heart Hero programme. We also take a look at the difference between cardiovascular disease and heart disease (yes, there is a difference).

I truly hope that we shall start placing heart health as a highpriority item in our list of importance. Let us not turn a blind eye to the dangers caused by ignoring heart health and start taking proactive measures to prevent heart disease.

Remember that while dangerous diseases such as COVID-19 and its dangers should not be belittled, our heart health should also not be given a lower priority. Don't be complacent and wait until things have progressed to a very serious level before you start taking action.

Mulian

Datin Dr Liew Yin Mei

List of Activities / Programmes:

Community Programmes









Kampung Baru Sungai Buloh • 20 October 2019







Kominiti Taman Segar Perdana • 3 November 2019

School/College Programmes







Kolej Komuniti Ampang • 2 October 2019

Go Red For Women Programmes









Go Red For Women Langkawi • 3 August 2019

Go Red For Women Wisma YPR • 29 September 2019



By Datin Dr Liew Yin Mei

COVID-19 (SARS-CoV-2) and Cardiovascular Disease

Throughout history, infectious diseases have plagued mankind. Every now and then, comes a deadly pandemic caused by microbes – the Bacteria causing Bubonic plague (the Black Death) in 1720 and the Viruses, the scourge of the last century.

Spanish Flu	1918 – 1919
Asian Flu	1957 – 1958
Hong Kong Flu	1968
Swine/ Bird Flu	2009 – 2010
SARS	2002 – 2003
MERS	2012 to date
EBOLA	2014 – 2016
COVID-19	End 2019 to date

Currently the novel Coronavirus COVID-19 (SARS-CoV-2) is ravaging across the world, killing thousands. Though the case fatality rate (2–3%) for COVID-19 is not as high as SARS (10%), it is highly contagious, about 1000 times more contagious and more deadly as it rapidly becomes a pandemic, whereas SARS was endemic and limited after 6–7 months.

How does COVID-19 spread?

COVID-19, an RNA virus is a zoonotic pathogen, originating in animals, thought to be bats and passed to humans from civets, badgers and racoons. An infected person spreads the infection to others who in turn infect others, leading to an exponential increase rapidly. Spread is via droplets from coughing and sneezing which settle on the hand and surfaces.

These contaminated areas are further avenues for spread. The virus particles attach to the ACE 2 receptors on the surfaces of the lungs, blood vessels, heart and kidneys. In the lungs, it takes over cell replication and multiplies, regenerates and sheds.

In the person, it damages the lung tissues leading to fibrosis and respiratory difficulties (the acute

respiratory distress syndrome, ARDS) with poor oxygenation to tissues and multiorgan failure. The immune system is also compromised. Incubation period is about 3-14 days.

What are the symptoms?

- Some cases are asymptomatic.
- Common symptoms when present are fever, cough, muscle aches, fatigue, difficulty in breathing and headaches.
- Running nose, diarrhoea and blood stained phlegm are less common.

Often a travel history or contact with a COVID-19 case is present.

The disease can be mild, mooderate or severe.

Severe and critically-ill patients require ICU care and ventilator support.

High fatality is seen in high risk groups namely the elderly and individuals with concomitant diseases like coronary artery disease, diabetes, hypertension, renal disease, asthma, chronic lung disease and cancers.

Chest x-ray shows the typical ground glass appearance and areas of consolidation.

What are the cardiovascular complications?

Besides lung complications with ARDS and secondary infections, acute cardiac complications can occur in individuals with or without preexisting cardiac illnesses.

As in any acute illness, stress and higher cardiometabolic demand can precipitate cardiac complications.

In a recent report of 138 hospitalised COVID-19 patients,

16.7% – developed arrhythmia (rhythm disturbances).

7.2% – acute cardiac injury with myocarditis, myocardial infarction, acute onset heart failure and cardiac arrest.

Similar cardiac complications have been seen with SARS, MERS and influenza.

Individuals with pre-existing cardiac conditions are at a higher risk of contracting COVID-19 and have a worse prognosis.

The American College of Cardiology (ACC)

has the following recommendations for COVID-19 patients with underlying cardiovascular conditions.

- 1 Quickly identify and isolate cardiovascular patients with COVID-19 symptoms from other patients.
- As patients with underlying CV problems are at higher risk and have a worse prognosis, it is reasonable to advise these patients of this increased risk and encourage precautions.
- 3 Important to remain current with vaccinations including the pneumococcal and influenza vaccinations.
- In geographies with active COVID-19 outbreaks, it may be reasonable to substitute telephonic or telehealth visits for in person routine visits for stable CVD patients to avoid possible nosocomial COVID-19 infections. Planning for emergency telehealth protocols should begin now.
- 5 It is reasonable to triage COVID-19 patients according to underlying cardiovascular, diabetic, respiratory, renal, oncological or other comorbid conditions for prioritised treatment.
- 6 Classic symptoms and presentation of acute myocardial infarction may be overshadowed with COVID-19, resulting in underdiagnosis.
- 7 For patients with heart failure, copious fluid administration for viral infection should be carefully monitored.
- **8** General immunological health is important, including eating well, sleeping and managing stress.
- In the management of acute myocardial infarction particular emphasis should be placed on acute angioplasty (PCI) and bypass surgery (CABG), including protocols to limit catheterisation lab and personnel to a required minimum, with care for enhanced personal protection, and post procedural sterilisation sufficiency

Control and prevention of spread

Prevention of the disease is of prime importance until a vaccine is available.

Containment is challenging due to its highly contagious nature. To prevent infection, following measures are vital.



Prompt testing to confirm diagnosis of cases, and contact tracing.



Quarantine of cases.



Self-isolation of contacts for 2 weeks.



Social distancing to keep distance of 1-2 meters apart to avoid close contact and transmission.



Personal hygiene with frequent hand washing with soap and water. Avoid touching of eyes, nose and mouth. Coughing and sneezing etiquette, to sneeze into a tissue or bent elbow.



Important to sanitise everything you touch.



Wear face masks when feeling unwell or in crowded places.



STAY HOME during the specified CMO periods.

Everyone has to play his/her part in this very challenging universal battle with this minute yet deadly foe.

Walk Your Way to





All smiles – (L-R): Dato' Dr Aljafri, Dato' Beh Lye Huat, Dato' Professor Sulaiman Osman, Puan Hajjah Ainon & Datin Paduka Nor Piah

Now in its 18th consecutive year, the Walk-A-Mile event was once again jointly organised by Nestle Omega Plus and Yayasan Jantung Malaysia (YJM).

With heart disease still remaining as the #1 'killer' of Malaysians, the annual walkathon aims to encourage a more heart-healthy lifestyle. Statistics have shown that almost 1 in 2 Malaysians are in the high cholesterol group with cholesterol levels in excess of the norm, and almost 3 out of 5 are below 40 years old. This means an increased risk of heart disease developing in the younger age group.

Bright and early

Walk-A-Mile was held on 1 September 2019 at Perdana Botanical Gardens, which resounded to the sound of 4,000 pairs of feet stomping merrily along. Participants began congregating in the wee hours of morning, and ranged from families, friends, groups and even the occasional loner could be seen heading over to the venue as the day dawned.

The walkathon feature various activities that were intended to engage and excite participants. The aim was to ultimately empower them by teaching them the basics of heart health and its importance.

Healthy activities the fun way

The day's activities featured Zumba sessions, while the mile-long walk also held various quizzes and obstacles on cholesterol facts and myths about cholesterol. There were also booths on hand for participants to interact with, both before and after the walkathon.



Participants getting a good warm up



A quick Zumba session to get everyone into the right mood

Better Heart Health







... and we're off!

These booths included free health check stations, and also many game stations to inject an element of fun as well. Many participants were seen queuing up to take advantage of the free health checks that included tests for cholesterol, blood sugar, and body-mass index (BMI).



Families joined in the walk together

A participant listening attentively at the free

For the health of the nation

To show their commitment, Nestle presented a RM35,000 cheque to YJM. Nestle (Malaysia) was represented by Dairy Milo and Milks Business Unit Executive Director Kumaran Nowuram at the walkathon.

"We hope to galvanise Malaysians to say #NotMe to high cholesterol and heart disease. Our aim is to get the public to lead longer, healthier lives through lifestyle changes, proper diets and regular physical activity. Our partnership with YJM reflects our steadfast stance toward fulfilling our goal of improving the quality of life for the rakyat, thus contributing to a healthier future for the nation," he emphasised.



YJM's Board of Directors posing for a photo with Nestle's representative

WALK-A-MILE 2019 WALK-A-MILE 2019

Don't waste any more time

If you have not yet started to lead a healthy lifestyle, it's not too late to start today. Take ownership of your own health and be serious in making positive changes. Hesitate no more and take the necessary steps to improve your health now and minimise your risk of heart disease now!

Mr Kumaran Nowuram (Nestle Malaysia) presenting a mock cheque to Datuk Dr JS Sambhi and Dato' Sulaiman Osman (YJM)



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 - *Calcium aids in the development of strong bones¹ Magnesium promotes calcium retention & absorption1 Vitamin D3 helps the body absorb calcium[†]

Vitamin K2 helps deposit calcium to the bones?

- References: 1. FSQD, MOH, Guide to Nutrition Labelling & Claims (as at Dec 2010).
- Katarzyna M., 2015. Proper Calcium Use: Vitamin K2 as a Pror 14(1): 34-39. ater of Bone and Cardiovascular Health.



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Be a Heart Hero!

The Heart Foundation of Malaysia (Yayasan Jantung Malaysia, YJM), hosted a one-day programme in conjunction with World Heart Day 2019. With a simple yet catchy title of "Be a Heart Hero" Conference, the programme was organised as a means of educating the public about the unhealthy lifestyle habits that lead to coronary heart disease.



Olive House CEO, Ustaz Aidil Azwal signing in



A candid moment with Datuk Dr J.S. Sambhi (left, YJM Chairman) and Dato' Gurbakhash Singh (right,

The idea behind it was to create a "Heart Hero", i.e. someone who is aware of the importance of heart health and who is actively taking steps to prevent coronary heart disease with proper nutrition and healthy lifestyle.

It was a joint venture between YJM with the Ministry of Health Malaysia (MOH) and the Olive House, and took place at the YJM's Main Hall. The event was graced by then Deputy Minister of Health, YB Dr Lee Boon Chye and Director General of Health, YBhg Datuk Dr Noor Hisham Abdullah.

The "Be a Heart Hero" Conference was chosen to match the international theme presented by the World Heart Federation for World Heart Day 2019, namely "Be a Heart Hero: My Heart, Your Heart".

The conference marked a culmination of the numerous other activities that have been held by YJM throughout Malaysia in conjunction with the World Heart Day 2019 celebration, such as "World Heart Day - Walk-A-Mile", "Go Red For Women", and "Health Check-Up Campaign".

Olive House was our corporate partner for this event and they helped organised the "Health Inspection

and Charity Sales", raising RM30,000 for YJM. Kudos to Olive House for taking their corporate social responsibility seriously!

Senior Consultant Cardiologist YBhg Dato' Sri Dr Hj Azhari Rosman from the National Heart Institute (IJN) gave a presentation entitled "How To Be A Heart Hero?", which was followed by Dietetic Officer Pn Noor Fadilah Kassim from Kuala Lumpur Hospital (HKL) who

YJM Vice Chairman) talked about "Nutrition for Heart Health".

Conference attendees were also given a "Cardiopulmonary Resuscitation (CPR)/First Aid" demonstration by YJM's CPR Training Manager Mr Subramaniam Varatharaju. And finally, before the day ended, all conference participants were given free health screening checks.



Dato' Sri Dr Hj Azhari Rosman giving his presentation



Pn Noor Fadilah Kassim giving her talk



Mr Subrananiam Varatharaju conducting CPR Training



Perbezaan antara Penyakit Kardiovaskular dan Penyakit Jantung

Hajjah Ainon Hj Kuntom

Penyakit kardiovaskular merupakan semua penyakit yang berkaitan dengan jantung atau saluran darah (blood vessel)

Kardio merujuk kepada struktur dan fungsi jantung sementara vaskular merujuk kepada semua saluran darah di dalam dan juga di luar jantung yang terdapat dalam seluruh badan.

Contoh penyakit kardiovaskular termasuk penyakit jantung koronari (saluran darah tersumbat yang boleh mengakibatkan serangan jantung atau angin ahmar/strok), kecacatan jantung kongenital dan penyakit arteri periferal. Penyakit arteri peripheral terjadi apabila saluran darah, sama

kardiovaskular merupakan penyakit jantung. Penyakit jantung yang biasa adalah penyakit jantung koronari. Penyakit ini sering disebutkan sebagai penyakit jantung. Penyakit jantung berkait rapat dengan struktur jantung seperti lemah jantung, kegagalan jantung, angina, aritmia (arrhythmia), penyakit jantung valvular dan penyakit arterikoronari.

Ini termasuk juga penyakit strok, tekanan darah tinggi dan kencing manis yang tidak dikawal. Penyakit ini juga disebut sebagai penyakit jantung koronari atau aterosklerosiskoronari.

Kesemua penyakit ini terbit daripada saluran darah yang tersumbat.

Lemah jantung terjadi apabila jantung tidak dapat mengepam darah yang diperlukan untuk pengaliran darah dalam anggota manusia mengalir dengan lancar dan sistematik, serta mendapatkan oksigen secukupnya. Lebih-lebih lagi ekoran tekanan darah tinggi yang tidak dirawat dengan baik, yang boleh mengakibatkan kegagalan jantung dan juga penyakit lain, seperti penyakit arterikoronari dan penyakit jantung valvular.

Walau apa pun jenis penyakit jantung, ia adalah berkait rapat dengan tekanan darah tinggi, kolestrol yang berlebihan, kegemukan (obesiti), menghisap rokok, tidak bersenam



ada di kaki atau tangan tersumbat atau mengecil disebabkan oleh plak yang terdiri daripada kolesterol, kalsium, lemak dan sel-sel mati yang menempel pada arteri. Ia mengakibatkan tangan atau kaki bengkak dan sakit. Ia juga menyebabkan pengurangan pengaliran darah beroksigen ke kaki atau tangan.

Perlu diingatkan di sini semua penyakit jantung adalah penyakit kardiovaskular tetapi tidak semua penyakit Aterosklerosis koronari merupakan keadaan yang teruk dan genting kerana boleh mengakibatkan serangan jantung yang dinamakan sebagai acute myocardial infarction atau strok. Sekira tidak dirawat, ianya akan membawa serangan angina, sakit dada yang amat sangat. Ini merupakan amaran yang menunjukkan seorang pesakit mempunyai penyakit jantung.

atau berjalan kaki, diet yang tidak dikawal, mengambil makanan yang berminyak dan berlemak yang tinggi, kencing manis dan keturunan keluarga yang menghidap penyakit jantung.

Diharapkan dengan keterangan di atas dapat memberi sedikit sebanyak gambaran mengenai penyakit jantung.



FOR INFORMATION

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The Heart Foundation of Malaysia

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- FSQD, MOH. Guide to Nutrition Labelling & Claims (as at Dec 2010).
 EFSA Journal 2010;8(12):1885 & 2011; 9(6): 2207.
- Brummer et.al. Cereal Chem 2012, 89(5):225 26.
- 4. Wolever et. al. Am J Clin Nutr., 2010.
- * Diets that are of low glycemic index and high in dietary fiber are protective WHO Europe Diabetes.
 ** Bloactive oat beta-glucans are high in molecular weight and have been scientifically shown to produce good viscosity effect in the gut for optimal cholesterol-lowering effect EFSA Journal.



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