



DIABETES & HEART

Atherosclerotic Cardiovascular Disease (ASCVD)
(e.g. heart attack, stroke)

ASCVD Risk Factors

Modifiable

VS

Non-modifiable

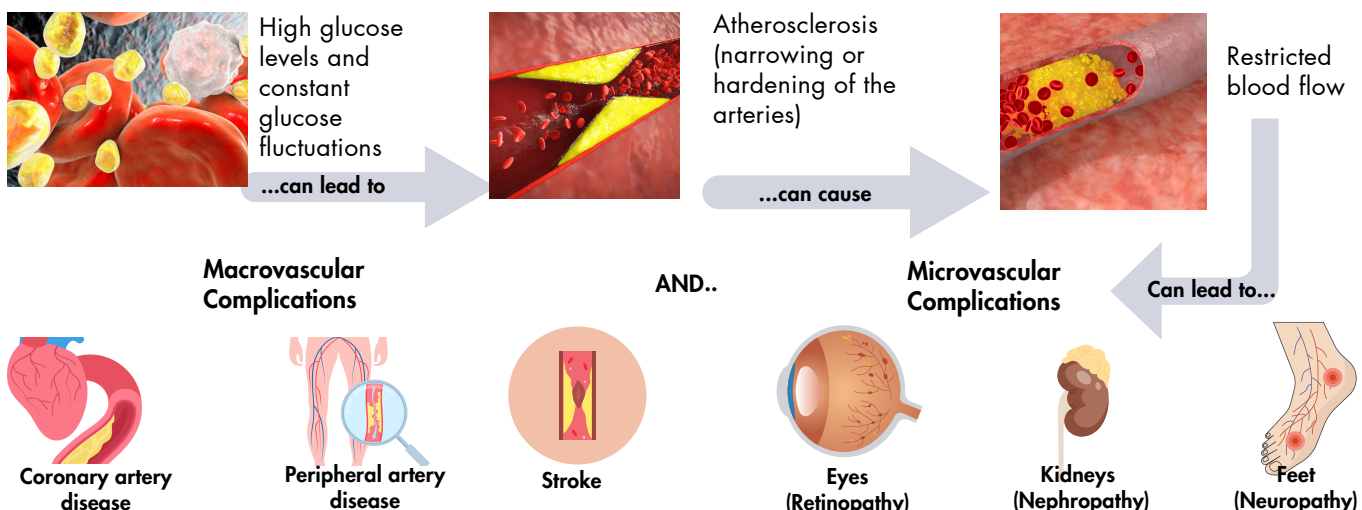
- Smoking
- High blood pressure
- High cholesterol
- **Diabetes Mellitus-2**
- Overweight or obesity

- Increasing age
- Male gender
- Hereditary

Other Risk Enhancing factors

- Family history of early atherosclerotic cardiovascular disease
- Primary hypercholesterolemia
- Metabolic syndrome
- Chronic kidney disease
- Chronic inflammatory conditions i.e. psoriasis, rheumatoid arthritis, lupus, HIV/AIDS
- History of pre-eclampsia or premature menopause
- High risk race/ethnicity (eg South Asian ancestry)
- High triglycerides (>175 mg/dL), Abnormal ankle-brachial index (ABI)

How high glucose affects Heart health





DIABETES & HEART

6 Tips to Protect Your Heart



Reduce Salt Intake

- A healthy alternative would be to replace or reduce salt by adding flavor enhancing herbs & spices like cilantro, parsley, basil, cumin etc.



Don't Smoke Cigarettes

- Smoking is a strong, independent risk factor for heart attacks, stroke and premature death
- Seek expertise to help with quitting smoking



Limit Alcohol Intake

- Alcohol contributes to high blood pressure, liver disease, heart disease, stroke, digestive problems, and many more.



Cultivate Healthy Food Habits

- **Minimize** intake of trans fats, red meat and processed red meats, refined carbohydrates (e.g. white rice, pasta, pizza), and sweetened beverages.
- **Increase** daily portion of vegetable and fruit intake
- ADA recommends an **individualized nutrition plan** focusing on total calorie and metabolic goals, using a medical nutrition program as needed to achieve goals.



Aim for Daily Exercise

- American Diabetes Association (ADA) recommends **≥150 minutes** of moderate-to-vigorous intensity aerobic activity **per week**, over at least 3 days, with no more than 2 consecutive days without activity for most adults with T2D.
- Recommendations also include 2 to 3 sessions per week of **resistance exercise** on nonconsecutive days, decreasing time spent sedentary with prolonged sitting being interrupted every 30 minutes, and **flexibility and balance training** 2 to 3 times per week.
- Shorter durations (≥75 minutes per week) of vigorous activity or interval training may also be considered.
- Increased **physical activity and exercise** have been shown to **improve glycemic control, lipids, BP, insulin sensitivity, and inflammatory biomarkers** in T2D. Physical activity has also been associated with lower risk of CVD and mortality in T2D.
- Structured exercise training recommendations by health care workers, consisting of aerobic exercise, resistance training, or both, are more effective than physical activity advice alone.



Maintain Health Weight

- Get right medical expertise for personalized lifestyle interventions, medical workup and/or use of FDA approved weight loss medications vs metabolic surgery to reduce cardiovascular risks.

APPROACH FOR PERSONALIZED WEIGHT LOSS & DIABETES CARE AT @unifiedendocrine

- ASSESS waist circumference, lipid panel, body composition focused on visceral fat, liver enzymes, metabolic panel, and optimize personalized lifestyle changes. Continuous glucose monitoring, Nutrition counseling, Dietitian visits, Self Care, Weekly logs, One-on-One care, UNLIMITED communication, Guidance for beneficial supplements & when clinically indicated discussion of FDA approved medications.

Edited & Medically reviewed by- Chhaya Makhija, M.D. DipABLM

