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# A SIMPLE GUIDE



Eastern Community Health Outreach

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# **DOCTOR'S SHARING** A STROKE OF INSIGHT

Learn about stroke prevention, its risk factors & management

# Love your 🎔 Lower your CHOLESTEROL

Know about Familial Hypercholesterolemia

# Director's Message

### Dear Readers,

With the constant influx of news surrounding COVID19, it is easy to feel overwhelmed and isolated. Here in ECHO, we want to continue journeying with you to a better health.

In this issue we have Dr Marlie Jane writing about a devastating condition that impacts a person's activities of daily living – Stroke. She will share about the different types of stroke and how we can prevent this.

Accompanying this, we have Dr Loh Wann Jia to talk about Familial Hypercholestrolemia – a high cholesterol condition that can be inherited. We hope you will find these useful and are glad that you are taking time to learn about improving your health. Take care and stay safe!

By Dr Linsey Utami Gani ECHO Programme Director



### A STROKE OF INSIGHT

Contributed By: **Dr Marlie Jane,** Senior Staff Registrar, General Medicine, Neurology Division Changi General Hospital



troke has been an elusive topic. This is not a heart attack, but yet more debilitating. It affects activity of daily living, including mobility. It affects family dynamics and finances especially if the patient is the sole breadwinner.

Globally, stroke is the second leading cause of death and the main cause of long term neurological disability in adults. According to the World Stroke Organization (WSO) in 2018, there are 13 million new stroke cases annually.

In Singapore, the National Registry of Disease Office has reported that stroke is the 4th most common cause of death. Ischemic stroke comprises 74% of patients while haemorrhagic stroke is 24%. In the 2019 data, stroke constitutes 6% of all deaths and 63% has disability at 3 months.

#### How do we prevent stroke?

- Exercise regularly
- Eat all food in moderation & opt for healthier products
- Maintain a healthy weight
- Avoid smoking
- Control blood pressure, cholesterol & glucose level
- Go for regular health screening & follow-ups

#### The risk factors of stroke are:

1) **Hypertension** (high systolic blood pressure) is the largest single risk for stroke comprising 57.3%. Uncontrolled hypertension increases risk of stroke by four times. Ideally, blood pressure should be 130/80mmHg.

2) **Hyperlipidemia** (high cholesterol) have twice the risk of heart disease which is also a contributor to stroke risk. Ideally, low density lipoprotein cholesterol (LDL-C) should be targeted to 1.8mmol/L.

3) **Diabetes Mellitus** has 1.5 times the risk of stroke. Blood tests taken are Fasting glucose, HBa1c, and oral glucose tolerance test (OGTT). Fasting glucose should be <7, HBa1c should be <6.5 and the OGTT on the 2nd hour should be <11.1.

4) **Smoking** increases the risk of stroke up to 2.5 times. Passive smoking is considered a risk factor. This is an independent, potent risk factor. The ideal management is to stop smoking.

5) **Artrial Fibriliation (AF)** increases the risk of stroke up to 2.5 times. Passive smoking is considered a risk factor. This is an independent, potent risk factor. The ideal management is to stop smoking.

Other risk factors of stroke are excessive alcohol intake, sedentary lifestyle and obesity.

For individuals with symptoms of stroke, seeking medical help promptly plays a crucial role in improving prognosis and recovery. For individuals who survived a stroke, adherence to medication and healthy lifestyle can reduce the risk of subsequent cardiovascular event and death.

### LOVE YOUR HEART, LOWER YOUR CHOLESTEROL

Contributed By: **Dr Loh Wann Jia,** Consultant, Department of Endocrinology Changi General Hospital



o put it simply, there are good and bad cholesterols. Low-density lipoprotein cholesterol (LDL) is the well-known 'bad' cholesterol and high-density lipoprotein cholesterol (HDL) is the 'good' one. With a high LDL, the excess cholesterol becomes trapped in the walls of your blood vessels, narrowing the passageway and blocking the blood flow to your heart, brain and legs.

### Do you know about Familial Hypercholesterolemia (a common underdiagnosed disease)?

Familial hypercholesterolemia (FH) is a serious and important inheritable disease that causes very high LDL levels, which is unfortunately under-diagnosed in the population. It is more common than people think, affecting actually **1 in 250 people.** At the moment, about **90% of people** are not even aware they have this inherited disease. If you have FH, then your first-degree relatives (children, parents and siblings) each have a **50% likelihood** of having FH too. That's like tossing a coin!

### Why is it important to check cholesterol level early?

People with FH are at 20 times greater risk of experiencing a life-threatening cardiovascular event at an early age. Early diagnosis is crucial to get a head start on the treatment, thus preventing heart attack and other problems. Treatment may start as early as childhood depending on severity. The main target is to lower LDL level to a healthy level and for FH, this will require medications on top of a healthy lifestyle. Smoking is strongly discouraged. Even if you do not have FH, but have high cholesterol, treatment to lower cholesterol is important to prevent heart attack and stroke.

## If I don't have FH, but my cholesterol level is high, what does it mean?

See your doctor to discuss about your cholesterol level. A total cholesterol >7.5mmol/L and/or LDL level >5mmol/L is suggestive that you have FH, especially if your family member has high cholesterol or young onset of heart attack. Your doctor can refer you to a lipid specialist. A genetic test can help to check if you have FH.

If you do not have any risk factors and/or no family history of high cholesterol, heart attack, stroke or early death, get your cholesterol level checked at 40years old. If you have risk factors, then please get your cholesterol level checked early regardless of age.



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