

The Russert Effect: Docs Report Surge

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The Russert Effect: Docs Report Surge

Russert's death sends patients to their doctors with questions.

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ABC News Medical Unit
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Tim Russert's death Friday from sudden cardiac arrest may have hit a nerve deeper than sadness.

Though not in top condition, the dynamic host of NBC's "Meet the Press" was managing his health well. Russert, 58, had recently had a satisfactory stress test, and his doctor reported that he was not diabetic and that his cholesterol levels were appropriate.

Now, Russert's death may lead some to fear for their own seemingly healthy bodies, or the health of a loved one — and doctors are seeing the effects.

"I am starting to get calls from patients and families," said Dr. Christopher Cannon, an associate professor of medicine at Harvard Medical School and a cardiologist at Brigham and Women's Hospital, Boston. "They want to avoid a similar outcome."

There is cause to worry. Heart disease affects 16 million people in the United States, according to 2004 data from the Centers for Disease Control and Prevention.

The problem is compounded by the increased rates of obesity and diabetes, both of which can increase the risk of heart disease.

According to Russert's personal physician, Dr. Michael Newman, Russert did not have diabetes and his LDL was 68 (the recommended level is 70 or less). However, Russert carried a lot of belly fat, a known risk factor for heart disease. In general, a healthy person will have a waist measurement that is less than half of their height.

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"The message was clear, Tim Russert was too fat for too long and this promoted his premature heart disease," said Dr. Peter McCullough, consultant cardiologist and chief of the division of nutrition and preventive medicine at William Beaumont Hospital in Michigan. "Patients are getting the message that weight loss is fundamental to reducing [overall] risk. Medications further the efforts by tackling individual risk factors."

The Heart of the Matter

Some doctors report that many patients are actively seeking out information on coronary artery disease, enlarged hearts, stress tests and diabetes in order to determine their own risk of heart disease or sudden cardiac death.

Dr. Carl Lavie, director of cardiac rehabilitation and prevention at Ochsner Medical Center in New Orleans, La., said that even relatively young men, aged 30 to 50, were coming to him with these questions.

"I am confident that this theme was repeated throughout the country today and will be for the next few weeks," Lavie said. "And this was likely the case not only in preventive cardiology offices but for many primary care family docs and general internists."

Some doctors, however, have not seen an uptick in patients asking about their own heart health.

"I really haven't seen anyone who seems very affected by it," said Dr. Carolyn Eaton, a physician practicing in San Antonio who noted that the majority of her patient population is low income and Hispanic.

But heart disease is the leading cause of death for Americans. According to the CDC, the average number of deaths from heart disease was about 30 percent in white, black, Hispanic or Latino, and Asian/Pacific Islander ethnic groups.

"It sometimes takes a few weeks to be felt, and is usually felt most by people of similar race, age and gender," said Dr. Michael Fine, physician operating officer at Hillside Avenue Family and Community Medicine in Pawtucket, R.I.

Indeed, doctors hope these tragedies can become teaching tools and an opportunity to illustrate the dangers of poor health management.

"I do hope it gets more men to get their blood pressure and cholesterol checked, so at least some good can come from a sad event," Eaton said.

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