



British Heart
Foundation

**HEALTHY
LIVING**

Information for
African Caribbean
Communities

**HEALTHY
HEART**



**Bettina Wallace,
Life-changer**

**FIGHT
FOR EVERY
HEARTBEAT**

bhf.org.uk

About this BOOKLET

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We've written this booklet to help people from African Caribbean communities look after their heart health and reduce their risk of cardiovascular disease.

By 'African Caribbean' we mean those who are of West Indian background and whose ancestors were of black African descent.

We'll look at:

- what cardiovascular disease is
- the risk factors that can increase your risk of developing cardiovascular disease, and which ones are particularly relevant to you as an African Caribbean, and
- the everyday lifestyle changes you can make to reduce your risk of cardiovascular disease.

This booklet does not replace the advice that your GP or nurse may give you, but we hope it will provide you with additional information and support.

My story THEN

There's a long history of heart disease in my family. My father, Marlon, has diabetes, which can affect your heart. He's had it all his life.

It's on my mum's side of the family, too. Her dad died of a heart attack when he was in his forties. Two of my uncles, my mum and my younger brother, Steven, all have high cholesterol.

So that motivated me. I'm a dad myself, a father of three, so I've got to look after my health. What bigger inspiration could there be?



I decided to take control of my own health.

I joined a local walking group. And I started exercising with a Reggaerobics class. It means I can exercise to music I love.

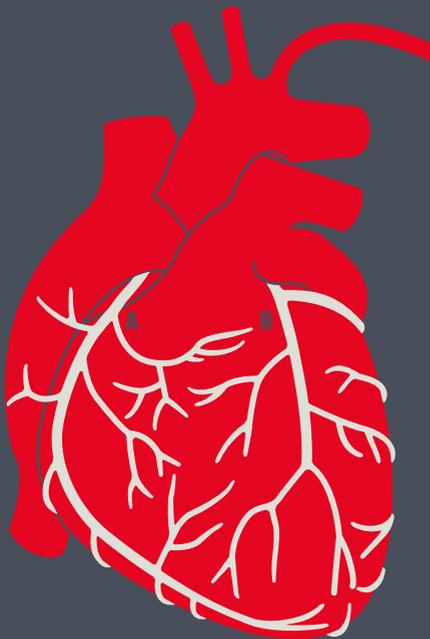
I'm a volunteer as well, taking the message about heart health to my own community. I interview people in our walking group about the positive lifestyle changes they have made.

There's been so much positive feedback; they really love it. They are getting out and about, losing weight and it's sociable too. We're all benefiting.

Carl Wright, 37

My story NOW

What is CARDIO- VASCULAR DISEASE?



Cardiovascular disease is also called 'heart and circulatory disease'. It means all diseases of the heart and circulation, including coronary heart disease (angina and/or heart attack) and stroke.

THE HEART

A Right coronary artery
B Left coronary artery

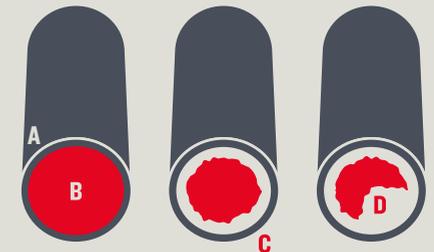
What is coronary heart disease?

The heart is a muscle that pumps blood – containing oxygen and other nutrients – to all parts of your body. Your heart muscle needs its own supply of oxygen and nutrients so that it can pump the blood around the body. The heart gets its blood supply from the **coronary arteries**. These are blood vessels that sit on the surface of your heart.

Coronary heart disease is when your coronary arteries become narrowed, or hardened, by a gradual build-up of fatty material within their walls. This condition is called **atherosclerosis** and the fatty material is called **atheroma**. Atheroma is sometimes called plaque.

Your heart muscle needs a constant supply of oxygen-rich blood to work effectively and keep healthy. If your arteries are clogged up with atheroma, they may become so narrow that they cannot deliver enough oxygen-rich blood to the heart muscle. As a result, you may feel pain or discomfort in your chest. This is known as **angina**.

HOW ATHEROMA BUILDS UP



When fatty material builds up in the arteries, the arteries become narrow and it is more difficult for the blood to flow through them.

A Artery wall
B Blood within the artery
C Atheroma (fatty deposits building up)
D Fatty deposits restricting blood flow through the artery

The symptoms of a **HEART ATTACK**

Chest pain or discomfort, which may spread to the arms, neck, jaw, stomach or back.

A dull pain, ache or 'heavy' feeling in your chest.

Chest pain or discomfort which feels like **indigestion** but makes you feel **generally unwell**.

Feeling **sick, sweaty, breathless, light-headed, dizzy or generally unwell**, as well as pain or discomfort in your chest.

What is a heart attack?

If the atheroma in your arteries becomes unstable, a piece of it may break off and lead to a blood clot forming. If the blood clot blocks your coronary artery and cuts off the supply of oxygen-rich blood to your heart muscle, your heart muscle may become permanently damaged. This is known as a **heart attack** (or **myocardial infarction**).

A heart attack is a medical emergency.

During a heart attack, you could develop a life-threatening heart rhythm, which may lead to a **cardiac arrest**. This is when you lose consciousness, stop breathing and your heart stops pumping blood around your body. This is why, if you think you or someone you are with may be having a heart attack, you must **call 999 immediately for an ambulance**.

If you think you are having a heart attack, don't delay. The quicker you call 999 for an ambulance, the better your chance of survival.

› For more information, see our booklet '**Heart attack**', and our leaflet '**Heart attack? Know these symptoms**'.

What is a stroke?

A **stroke** happens when the blood supply to part of your brain is cut off – for example, if a blood clot blocks an artery that carries blood to your brain. Without a blood supply, the brain cells can be damaged or destroyed, so a stroke may affect the way your body or mind functions.

If you suspect that you or someone else is having a stroke, you need to act **FAST**. To remember the signs of a stroke and what to do, think '**FAST**'.

If these symptoms have gone away after a few minutes or hours, and disappear completely within 24 hours, it may have been a transient ischaemic attack or TIA (sometimes called a mini stroke) – but they still must not be ignored. **If you or someone you are with experiences any one of these symptoms, call 999 immediately.**

FACIAL **W**EAKNES

Can the person smile?
Has their mouth or eye drooped?

ARM **W**EAKNES

Can the person raise both arms?

SPEECH **P**ROBLEMS

Can the person speak clearly and understand what you say?

TIME TO **C**ALL 999

› For more information, contact the **Stroke Association** on 0303 3033 100. Or visit stroke.org.uk

What increases the risk of **CARDIO- VASCULAR DISEASE?**

A 'risk factor' is something that increases your likelihood of getting a disease.



The risk factors for cardiovascular disease include:

- smoking
- having high blood pressure
- having high cholesterol
- being physically inactive
- being overweight or obese
- having diabetes.

These risk factors are all influenced by your lifestyle habits. So, by making changes to your lifestyle, you can reduce your risk and help to protect your heart. We explain more about all these risk factors on pages 16 – 57.

The more risk factors you have, the greater your chance of getting cardiovascular disease.

There are other factors that can contribute to developing cardiovascular disease, including the following.

- **Having a family history of cardiovascular disease.** This means if your father or a brother was diagnosed with cardiovascular disease before he was 55, or if your mother or a sister was diagnosed before she was 65.
- **Your sex.** Men are more likely to develop cardiovascular disease at an earlier age than women.
- **Age.** Your risk increases as you get older.
- **Poverty.** People on lower incomes are more likely to have the risk factors for cardiovascular disease, and socio-economic reasons may make it more difficult for them to make healthy choices.
- **How you deal with stress** (page 56).
- **Drinking too much alcohol** (page 54).

Whatever your situation, you can still reduce your risk of cardiovascular disease by adopting healthy lifestyle habits.

How can I find out about my risk of cardiovascular disease?

If you live in England, you can find out about your risk of cardiovascular disease by having a **health check**. If you're aged between 40 and 74, and have not already been diagnosed with heart disease, stroke, diabetes or certain types of dementia, you will be invited to have a free health check at your local GP surgery once every five years, to assess your risk of those conditions.

The health check will include:

- taking measurements, such as your height, weight and blood pressure
- blood tests for cholesterol and sometimes a glucose (sugar) test
- questions about your age, family history, your smoking habits and how much alcohol you drink.

A health check takes into account all the risk factors that may affect you, rather than focusing on just one thing, such as your cholesterol level. This is because the more risk factors you have, the greater your chance of developing cardiovascular disease.

The results of your assessment will give you and your GP or nurse a clearer picture of your health. They will offer you support and advice on how to reduce your risk of cardiovascular disease and keep your heart healthy. Your GP will also consider if you need any treatment – such as medicines to treat any symptoms you may have, or to reduce the impact of any risk factors.

Some pharmacies also offer health checks, although you may have to pay for them. The person doing the health check at your pharmacy will be able to give you lifestyle advice that may help reduce your risk. However, depending on the results of your health check, you may still need to go and see your GP, who can prescribe any treatment you might need, or arrange for more tests.

If you live in Scotland, Wales or Northern Ireland, you can ask your GP for a general health assessment to check your blood pressure, cholesterol level and glucose level.

› For more information, see our DVD 'Risking it', which shows how six ordinary people tackled their risk factors.

A few years ago I was getting headaches, dizziness and losing my balance.

I remember looking in the mirror one day and thinking: 'My bottom lip didn't used to lean to one side.'

I didn't like going to the doctor, but I got worse and someone in the family took me to the hospital. They said I'd had a series of mini strokes.

They said my blood pressure was too high and I needed treatment.

**My story
THEN**

I've made some positive changes in my life.

I'm more on the ball with signs and symptoms and knowing whether I need to see a doctor or not. And I'm more open to talk to my family and lean on family members for support.

Now they go with me to the doctor's. So I don't leave it so long as I used to. Before, I was trying to manage my dizziness with smelling salts. But I needed medical attention.

Now I take medication for my high blood pressure. I need someone with me to go out shopping, but if I'm not going out I do exercises in the house to keep myself moving.

I want to live a healthy life as long as possible.

Rita Grenell, 83



**My story
NOW**

How can I reduce my risk of **CARDIO- VASCULAR DISEASE?**

Research shows that making changes to your lifestyle can have a major effect on reducing your risk of cardiovascular disease. On the next pages we explain more about each of the risk factors and what you can do about them.

Even if your risk of cardiovascular disease is low, you will still benefit from looking at your lifestyle to make sure you are keeping yourself and your heart as healthy as you can.



Risk factor: SMOKING

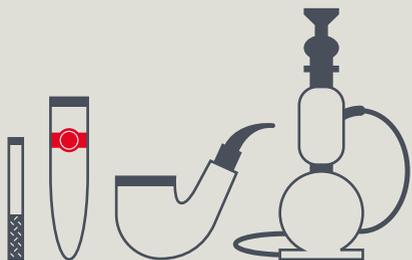
You probably know that smoking increases the risk of getting lung cancer.

Smoking also damages your heart and can cause the build-up of atheroma (fatty plaque) in your arteries.

Cigarettes, cigars, pipes, shisha and all other tobacco products contain harmful chemicals that can increase your risk of developing cardiovascular disease. Blood clots are more likely to occur if you smoke, which puts you at greater risk of having a heart attack or a stroke.

TOBACCO PRODUCTS

Cigarettes, cigars, pipes, shisha and all other tobacco products contain harmful chemicals.



Second-hand smoke (passive smoking) is where non-smokers inhale other people's smoke. Research shows that non-smokers who live with smokers have a greater risk of cardiovascular disease than those who don't live with smokers.

If you're a smoker, stopping smoking is the single most important thing you can do to improve your heart health. After a year of quitting smoking, you can reduce your risk of a heart attack to half that of a smoker.

What you can do

Once you have decided to stop smoking, getting support is the next essential stage. Your GP or practice nurse can offer you information, advice and support on things such as:

- ✓ practical tips on how to stop
- ✓ local stop-smoking services, and
- ✓ products to help you stop smoking, including nicotine replacement products such as nicotine chewing gum, microtabs, inhalators, lozenges and skin patches. Most of these products can be used by people with heart conditions. However, people who have angina, or who have had a heart attack or a stroke, should check with their doctor before starting to use them.

E-cigarettes (electronic cigarettes) are battery-powered devices that simulate smoking. Although they don't contain some of the harmful chemicals found in ordinary cigarettes, most do contain nicotine, which can be addictive. E-cigarettes are not licensed in the UK as an aid to stop smoking.

› For more information, see our booklet 'Stop smoking'. Or see page 59 for organisations that can help you quit smoking.

**TOTALLY
QUIT
SMOKING
TODAY**

If you're a smoker, stopping smoking is the single most important thing you can do to improve your heart health.

**HALVE
YOUR RISK
OF HEART
ATTACK**

After a year of quitting smoking, you can reduce your risk of a heart attack to half that of a smoker.

Risk factor: HIGH BLOOD PRESSURE

(‘pressure’)



Blood pressure is the pressure of the blood in your arteries. You need a certain amount of pressure in your arteries to keep your blood flowing.

The target for most people is to have a blood pressure below 140/90mmHg. Or, if you’ve had a heart attack or stroke, or have coronary heart disease, diabetes or kidney disease, your target is **below 130/80mmHg.**

High blood pressure can increase your risk of having a heart attack or a stroke. Over time it can cause the heart to become abnormally large, or the pumping action of the heart to become less effective.

High blood pressure has been described as a ‘silent killer’, because there are usually no symptoms. A small number of people may experience headaches, blurred or double vision, nosebleeds and shortness of breath. But the only way of knowing if your blood pressure is high is to have it measured. Ask your GP or practice nurse to do this. Or they may do this as part of your health check (see page 11).

What you can do

The following tips can help reduce your blood pressure and protect your heart:

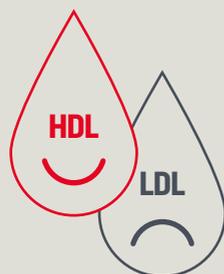
- ✓ Cut down on salt (page 50).
- ✓ Do more physical activity (page 26).
- ✓ Keep to a healthy weight (page 28).
- ✓ If you drink alcohol, drink within sensible limits (page 54).
- ✓ Eat more fruit and vegetables (page 46).
- ✓ Stop smoking (page 16).

If your doctor prescribes you medicine to control your blood pressure, it is very important that you take the medicine, following your doctor’s instructions.

› For more information, see our booklet ‘Blood pressure’.

Risk factor: HIGH CHOLESTEROL

Cholesterol is a fatty substance that is mainly produced by the liver and is found in the blood.



It plays an essential role in how every cell in the body works. However, too much cholesterol in the blood can increase your risk of developing cardiovascular disease.

Cholesterol is carried around the body by lipoproteins, which are a combination of cholesterol and proteins. There are two main types:

- **LDL** (low-density lipoproteins) is the 'bad' type of cholesterol. This is sometimes called **LDL cholesterol**.
- **HDL** (high-density lipoproteins) is a 'good' type of cholesterol, because it removes the bad LDL cholesterol from the bloodstream. It is sometimes called **HDL cholesterol**.

Having too much harmful LDL cholesterol in your blood can increase your risk of developing cardiovascular disease.

One of the causes of high blood cholesterol is eating too much saturated fat. (We explain more about saturated fats and which foods they are found in on page 48.) However, some people have high blood cholesterol even though they eat a healthy diet. For example, they may have inherited a condition called **familial hypercholesterolaemia**.

Triglycerides are another type of fatty substance in the blood which can increase your risk of developing cardiovascular disease. Being overweight, having lots of fatty and sugary foods and sugary drinks, and drinking too much alcohol, can increase your triglyceride levels.

What you can do

Ask your GP or practice nurse to measure your cholesterol level. Or they may do this as part of your health check (see page 11). It's particularly important to have your cholesterol checked if one of your close relatives has a high cholesterol level – for example, a parent, brother, sister, child, or real aunts or uncles.

You should aim to lower your cholesterol level, to help reduce your risk of developing cardiovascular disease. You can do this by cutting down on saturated fats and replacing them with healthier fats. We explain more about the different fats and which foods they are found in on page 48.

Doing **regular physical activity** can help to increase your protective HDL cholesterol.

Your doctor may prescribe you medicine to control your cholesterol. It is very important that you take your medicine, following your doctor's instructions.

› For more information, see our booklet '**Reducing your blood cholesterol**'.

**CUT THE
CHOLESTEROL.
CUT THE
RISK.**

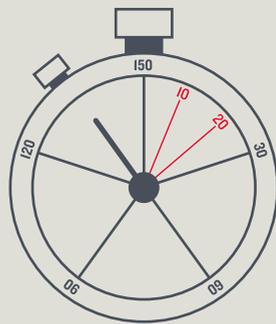
High levels of cholesterol in your blood can increase your chances of developing coronary heart disease.

**EAT MORE
VEG. TAKE
A WALK.
STAY HAPPY.**

You can start to reduce cholesterol by eating a healthy balanced diet and taking regular, moderate exercise.

Risk factor: PHYSICAL INACTIVITY

Getting active helps to lower your blood pressure and cholesterol levels, control your weight and reduce your risk of developing diabetes. It's also a good way of relieving stress.



150 MINUTES' ACTIVITY A WEEK

This could be 30 minutes a day, at least five days a week, or shorter bouts of at least 10 minutes at a time.

The best activity for heart health is 'moderate-intensity' rhythmic (aerobic) exercise. Moderate-intensity means that the activity should make you feel warm, and breathe more heavily than normal, but you should still be able to talk. Brisk walking, cycling and swimming are good examples. Walking is one of the best forms of physical activity. It's easy to do, you don't need to wear any special clothes, and it's easy to fit into your everyday life.

What you can do

Aim to do at least 150 minutes' activity a week. For example, you could do 30 minutes a day on at least five days a week. You can do the 30 minutes all in one go, or in shorter bouts of at least 10 minutes at a time. If you're not used to this amount of activity, it's important that you build up to this level over a period of time.

If you're not used to doing any physical activity, ask your GP or practice nurse for advice on how much activity you should do to start with.

If you have a long-term medical condition such as heart failure, or have had a heart attack or stroke, or have high blood pressure or diabetes, check with your GP or practice nurse before you start doing any physical activity.

Whatever sort of exercise you do:

- ✓ Start slowly for the first few minutes and build up gradually. At the end, spend a couple of minutes slowing down gradually.
- ✓ If you feel tired, breathless or dizzy, or have a pain or feel unwell, stop exercising. If the symptoms don't go away, or if they come back later, see your doctor or go to your nearest accident and emergency department.

› For more information, see our booklet 'Get active, stay active'. Or, if you are over 65, see our booklet 'Be active for life'.

Are you a **HEALTHY WEIGHT AND BODY SHAPE?**

Keeping to a healthy weight and body shape can help to protect you against diabetes and high blood pressure, and also help to lower your cholesterol.

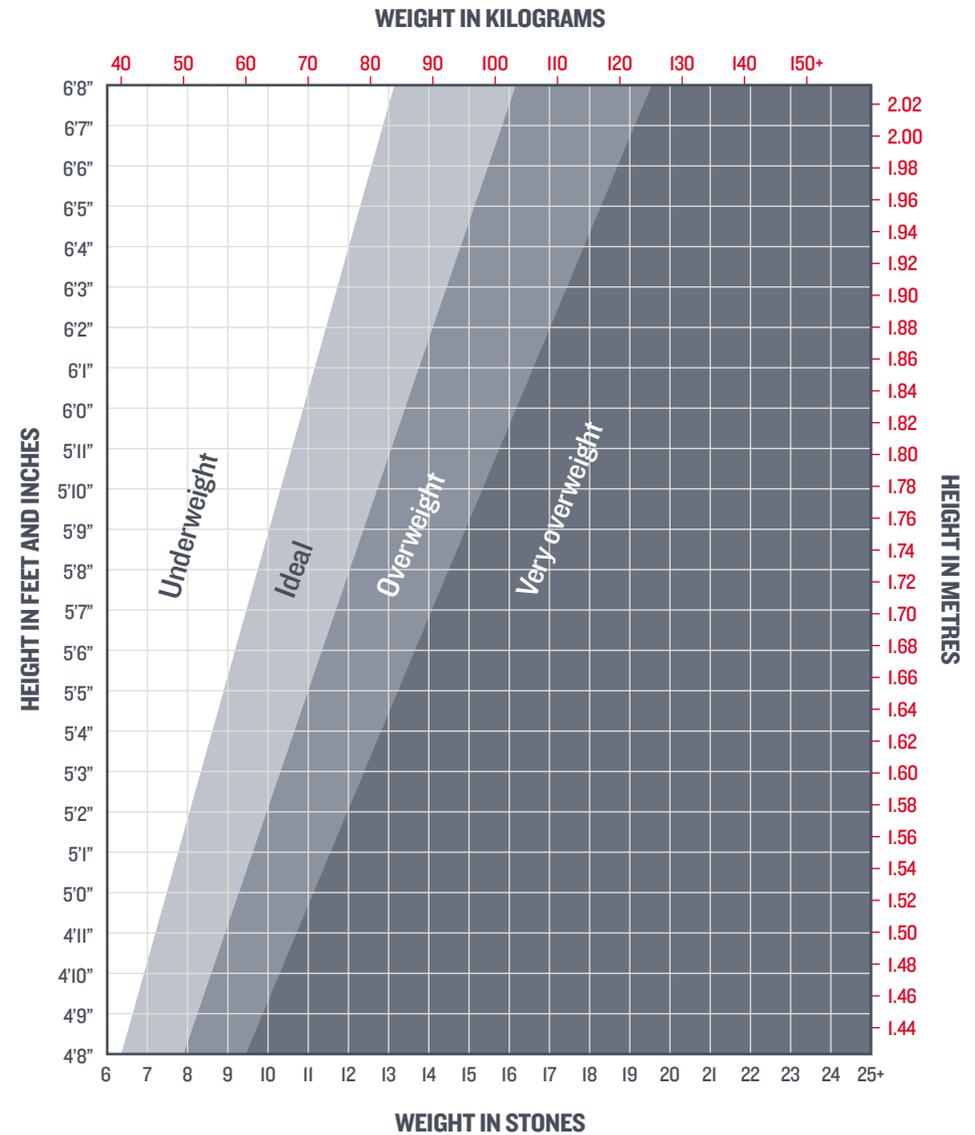
Fatty foods, sweet foods, sugary drinks and alcohol are very high in calories. If you eat more calories than your body burns up, the extra calories are stored as fat, resulting in weight gain. You are also more likely to put on weight if you are physically inactive.



Your weight

The chart opposite is a guide for finding out if you are an ideal weight for your height. Take a straight line up or down from your weight, and a line across from your height (without shoes). Put a mark where the two lines meet. If you fall into the 'Underweight', 'Overweight' or 'Very overweight' categories in the chart, your health may be at risk. This is only an approximate guide.

If you fall into the 'Underweight', 'Overweight' or 'Very overweight' categories in the chart, your health may be at risk.



People who carry too much weight around their middle are at greater risk.

Your body shape

Your body shape is important too. People who carry too much weight around their middle have a greater risk of developing coronary heart disease, high blood pressure and diabetes. One way to check your body shape is to measure your waist with a tape measure. Your GP or nurse may do this as part of your health check.

To measure your waist yourself, find the midpoint between the bottom of your ribs and the top of your hips. This is often at the level of your tummy button. Breathe out normally and measure around your waist. Try to relax, and avoid breathing in while taking your measurement. Then check your measurement in the box below.

If your waist size exceeds the below measurements, your health is at:

HIGH RISK

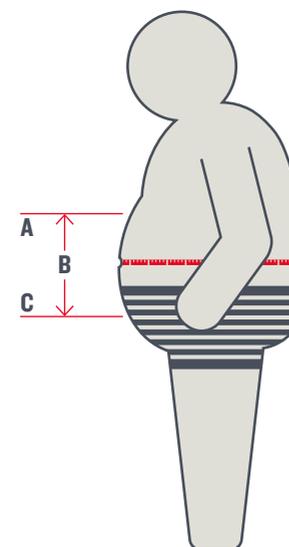
Men

over 90 cm (35.5 inches)

Women

over 80 cm (32 inches)

› For more information, see our booklet **Facts not fads - Your simple guide to healthy weight loss**.



What you can do

The best way to lose weight and reduce your waist size is to:

- ✓ follow a healthy, balanced diet (see page 44), and
- ✓ increase your daily physical activity (see page 26).

It's healthier to lose weight slowly and steadily – about 1 or 2 pounds (0.5 to 1 kilo) a week – as you're more likely to keep the weight off for good. Losing even a small amount of weight can benefit your health. Weigh yourself once a week and not every day.

You should weigh yourself at the same time of day and on the same weighing scales each time, wearing as little as possible.

MEASURING YOUR WAIST

A Bottom of ribs
B Midpoint
C Top of hips

My story THEN

My mum, Sister Mary Bramble, was a very fit lady who had a healthy diet and walked everywhere.

At the age of 70 she was diagnosed with diabetes. She had to inject insulin twice a day and she had heart failure later in life.

Mum lived life to the full with her church commitments but the diabetes and a weak heart made it difficult for her to walk far without being out of breath. She passed at the age of 82.



My story NOW

I always loved exercise, but seeing Mum's experience, I was even more determined to keep my heart staying strong.

Every week I walk and run with my walking group at 6am, go to the gym three times, swim and bike ride. I do a lot with my exercise partner, Amelia.

I love Caribbean food and I still enjoy it at the weekends. But in the week when I'm training I eat mostly chicken, fish, vegetables, salads and fruits.

I drink mainly water and have cut down on oily foods, salt and fizzy drinks.

I'm looking after my body and my heart. I'm going to continue to exercise regularly and eat well to give me a long life and a healthy heart.

Roydon Allen, 64

Risk factor: DIABETES

('sugar')

If you are of an African Caribbean background, there is an increased risk of developing diabetes, which can lead to cardiovascular disease.



Diabetes can lead to other serious health problems too.

Diabetes develops when your body doesn't produce enough of a hormone called insulin, or when the insulin doesn't work effectively, leading to abnormally high glucose (sugar) levels. This can cause atheroma to develop in your arteries.

There are two types of diabetes:

Type 1 diabetes is when your body cannot make any insulin. It usually develops in children and young adults.

Type 2 diabetes is more common and occurs when not enough insulin is produced, or when your body has become resistant to it. It tends to develop gradually as we get older – usually after the age of 40 – and is closely linked with being overweight and physically inactive. You are also more likely to develop this condition if you have a family history of diabetes.

Diabetes is a serious disease and, if it is not controlled, over time it can cause damage to the heart and blood vessels, the eyes, kidneys, feet and nerves.

Symptoms for type 1 & type 2 **DIABETES**

Thirst

Passing **more urine** than usual,
particularly at night

Tiredness

Unexplained **weight loss**

Blurred vision

Itching in the genital area
(or regular episodes of thrush)

Who is at risk of developing diabetes?

If you are of an African Caribbean background, there is an increased risk of developing diabetes. The following risk factors can also increase your risk:

- not being physically active
- being overweight
- having a family history of type 2 diabetes, and
- previous diabetes in pregnancy.

If you have any of the symptoms listed in the box, go and see your GP about them.

What you can do

If you have diabetes, or if you don't have diabetes but want to reduce your risk of developing cardiovascular disease as much as possible, it's very important to control your blood sugar, blood pressure and cholesterol levels. The following things will help you control your blood sugar.

- Do more physical activity (page 26).
- Eat a healthy, balanced diet (page 44).
- Control your weight and body shape (page 28).

Your doctor or nurse may do a blood test to check your glucose level, to see if you have diabetes.

If you are diagnosed with diabetes, your doctor may prescribe you medicines, to control your glucose level. You may also need to take medicine such as statins (a cholesterol-lowering medicine) to help protect your heart. This is because having diabetes increases the risk of cardiovascular disease.

› For more information, see our booklet 'Diabetes and your heart'.

**DIABETES.
IT'S NOT
JUST YOUR
HEART.**

Untreated, diabetes can lead to cardiovascular disease. It can also cause serious problems for your eyes, kidneys and nerves.

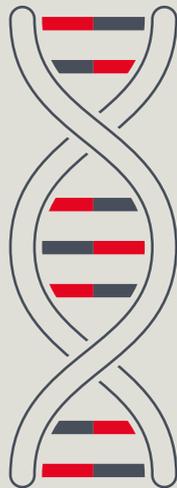
**TAKE THE
TEST.
IT'S GOOD
TO KNOW.**

Ask your GP to check your blood sugar levels – it's easy. And there's a lot that can be done to prevent or control diabetes besides medication.

Risk factor:

FAMILY HISTORY

If your father, mother, brother or sister developed cardiovascular disease at a young age (under 65 for women, and under 55 for men), you may be at an increased risk of developing the disease yourself.



Family behaviour can influence your risk of cardiovascular disease too. Lifestyle habits, such as poor diet or smoking, can sometimes be passed on from one generation to the next.

Genes may also play a role in the risk of developing cardiovascular disease, although more research is needed to understand this. A single gene has not been identified and it is likely that several genes are responsible. There is no genetic test available to check for the risk of cardiovascular disease running in families.

What you can do

Do you have several close relatives – such as your parents, grandparents, brother, sister, or real aunts or uncles – who have had coronary heart disease or have had a stroke? Or has a close relative developed cardiovascular disease at a young age? If so, it is even more important that you look carefully at the risk factors for cardiovascular disease and make changes to your lifestyle to reduce your own risk.

It's important to tell your doctor if you have a family history of cardiovascular disease. He or she may ask you to have your blood pressure checked regularly or to have other tests to assess your risk.

Healthy eating FOR YOUR HEART



A healthy, balanced diet can help to protect your heart. It will help you to control your weight, your blood sugar, and your cholesterol.

Are traditional dishes healthy?

The exciting range of fruits, vegetables, pulses and grains in African Caribbean food can be very healthy as they provide a good range of vitamins, minerals, fibre and protein and are traditionally believed to be the secret to a long and happy life. However, adding too much salt or fat to your meals can make these foods less healthy.

To help make your traditional meals healthier, use less oil, choose unsaturated oils such as olive oil, rapeseed oil, sunflower oil instead of palm oil. And use fresh herbs and spices, garlic, peppers, coriander and limes, rather than adding salt.

In our cookbook '**Taste of the Caribbean**', you will find many recipes to help you cook traditional dishes in a healthier way, but with the same great taste.

Eat plenty of fruit and vegetables

Eating a wide variety of fruit and vegetables will make sure you get a combination of vitamins and minerals to keep you healthy. Potassium is one particular mineral – found in several fruits and vegetables – which may help to control blood pressure.

There is no evidence that taking vitamin tablets or supplements has the same benefits as eating fruit and vegetables.

What you can do

- ✓ Eat at least five portions of fruit and vegetables a day. They can be fresh, frozen or tinned. Dried and juiced also count, but only once a day.

SWAP



Sugary fruit pastry **FOR**



Fresh fruit salad

What about fish?

All fish are a source of protein and many vitamins and minerals.

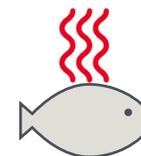
Oily fish – such as trout, sardines, herrings, mackerel or fresh tuna – contain healthy polyunsaturated fats, which may help to keep your heart healthy.

Salted fish and smoked fish are both very high in salt, which can increase the risk of high blood pressure.

What you can do

- ✓ As part of a healthy diet, aim to eat two portions of fish a week. One of these should be an oily fish.
- ✓ Cut down on salted fish and smoked fish.

SWAP



Smoked fish **FOR**

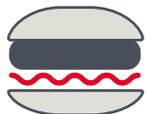


Oily fish

Choose healthier fats

Foods containing fat have a combination of saturated, monounsaturated and polyunsaturated fats. Choosing healthier fats can help to protect your heart. But remember that all fats are high in calories. So, if you are watching your weight, you should limit the amount of all the fats you eat.

SWAP



Red meat **FOR**



Lean meat

What you can do

- ✓ **Reduce the total amount of fat you eat** by cutting down on foods such as sugary pastries and fatty crisps, and replacing them with healthier fruits and vegetables. Choose low-fat or reduced-fat options. For example, use semi-skimmed, 1% or skimmed milk instead of full-fat milk. And choose reduced-fat cheese or reduced-fat sausages rather than the regular versions. Cut down on patties, dumplings and bun. Use less oil when cooking.
- ✓ **Replace saturated fats with unsaturated fats.** Saturated fats are found mostly in foods from animal sources – such as fatty meat, butter, cheese and cream. Palm oil, coconut oil, coconut cream and coconut milk are also high in saturated fat. Saturated fats raise cholesterol levels. Replace them with healthier monounsaturated and polyunsaturated fats. For example, use rapeseed or sunflower or olive oils instead of palm oil or coconut oil. And have more lean meats like chicken and turkey, or fish, instead of red meat.
- ✓ **Avoid trans fats where possible** as they can increase your total cholesterol and LDL cholesterol levels. Trans fats are naturally found in small amounts in dairy foods and meats. However it is the industrially produced trans fats which have been linked to increased risk of coronary heart disease. They are formed when vegetable oils are 'hydrogenated', and can be found in processed foods like some cakes, biscuits, crackers and hard margarines. Foods that have 'hydrogenated oil or fat' or 'partially hydrogenated oil or fat' in the list of ingredients are likely to contain trans fats.

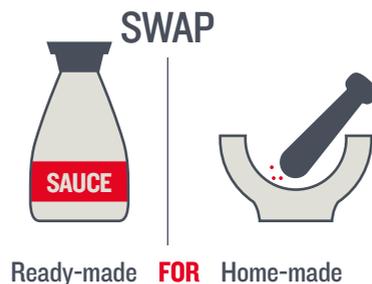
Cut down on salt

People who eat a lot of salt are more likely to have high blood pressure. It is the sodium in salt that contributes to high blood pressure. There is sodium in all types of salt, whether it's salt in grains, crystals or flakes. There's also sodium in sea salt, rock salt and garlic salt.

Most people eat far more salt than they need. It is recommended that adults have no more than 6 grams of salt (2.5 grams of sodium) a day. That's about one level teaspoonful.

Three-quarters of the salt in our foods is found in processed foods. Also, many traditional African Caribbean dishes have salt added during preparation or cooking.

African Caribbean people can be more sensitive to the effects of salt, so it's important to watch how much salt you eat on a daily basis.



What you can do

- ✓ **Cut down on processed foods that contain a lot of salt**, such as ready meals, pizza, salty snacks (such as salted peanuts), ketchups and sauces, sausages, and bacon. And cut down on salted fish and smoked fish.
- ✓ **Don't add salt to your food at the table.**
- ✓ **Cook without adding any salt. And avoid using high-salt products to flavour foods, such as stock cubes, soy sauce, gravy granules, and sauces such as brown or tomato sauce.** Use alternatives such as herbs, spices, peppers and chillies. Annatto seeds, curry powder, lemon juice, ginger and pimento are important in jerking, so use more of these instead of salt when making jerk meals. You'll find that, within a few weeks, your taste buds will get used to less salt and you'll be able to appreciate other flavours more.
- ✓ **Check the labels.** Some ready-made curry powders and spices often have added salt. Try making your own from a variety of freshly home-ground spices.

Other things you can do

- ✓ When choosing bread, rice and pasta, choose the wholegrain versions.
- ✓ Try and cut down on sugar, sugary drinks and sweet foods like coconut drops, and use less condensed milk. This will help you to control both your weight and your blood glucose levels.

› For more tips on healthy eating and cooking, see our booklets **'Eating well'** and **'Cut down on salt'**. See also our cookbook **'Taste of the Caribbean'**, for a collection of recipes that include interesting variations on familiar African Caribbean dishes using traditional ingredients.

ONE TOO MANY FOR YOUR HEART?

Drinking too much alcohol can cause high blood pressure, strokes and coronary heart disease.

FEWER UNITS. BETTER HEALTH. MORE ENJOYMENT.

You don't have to stop completely. Keep within the recommended limits to stay healthy, and you'll probably enjoy what you drink more!

Risk factor: ALCOHOL

Drinking too much alcohol can contribute to cardiovascular disease.



1 UNIT OF ALCOHOL =

A small glass of wine
(10% ABV [alcohol by volume])

OR

Half a pint of normal-strength
lager, cider or beer (for example,
3.5% ABV)

OR

A pub measure of spirits

What you can do

If you drink alcohol, make sure you drink within the recommended limits.

- ✓ **Men** should not regularly drink more than **3 to 4 units of alcohol a day**.
- ✓ **Women** should not regularly drink more than **2 to 3 units of alcohol a day**.
- ✓ Try to have at least two alcohol-free days a week.

Moderate drinking (1 or 2 units a day) may offer some protection from coronary heart disease, especially in men over 40 and women who have been through the menopause. But if you don't already drink alcohol, there is no need for you to start, as there are much healthier ways to look after your heart.

Drinking more than the recommended limits does not protect the heart and can actually lead to damage to the heart muscle, high blood pressure, stroke, liver disease and some types of cancers. Alcohol is high in calories too, so it can lead to weight gain.

Try to avoid binge drinking. It is better to have just a small amount regularly rather than large amounts in one go.

› To check how many units of alcohol you're drinking, use our interactive alcohol units calculator at [bhf.org.uk/alcoholcalculator](https://www.bhf.org.uk/alcoholcalculator).

Risk factor: STRESS

We all need challenges to keep us motivated, but when we feel unable to cope with the high demands that are placed on us, we experience stress.



When people are under stress they can be more likely to smoke, eat unhealthily, be less physically active, or drink too much alcohol to help them cope – and all of these things increase the risk of developing cardiovascular disease. Also, if you have an underlying health problem (such as high blood pressure or diabetes – even if it has not yet been diagnosed), stress could make it worse.

It's important to learn how to relax and deal with stress effectively.

What you can do

It may not be easy to solve issues such as family problems and money worries, but you may find that the following help to manage your level of stress.

- ✓ **Physical activity** – for example, walking, swimming or cycling. Exercise is a good way of releasing tension.
- ✓ Yoga.
- ✓ Meditation.
- ✓ Prayers.
- ✓ Relaxation techniques.
- ✓ Deep breathing.
- ✓ Don't take on too much. Learn to say no in a positive way.

› For more information, see our booklet 'Coping with stress'.

Medicines

Depending on your condition, your doctor may prescribe you **medicines to control your blood pressure, diabetes or cholesterol**. It is very important that you take your medicines, following your doctor's instructions. Some of these medicines do have side effects, but don't stop taking any medicine without consulting your doctor. Your doctor may be able to prescribe another medicine that does not have the same side effects.

Before taking any form of **herbal medicine or herbal supplement**, talk to your doctor or pharmacist about whether it is safe to take it alongside any other medicines your doctor has prescribed for you.

For more information

British Heart Foundation website bhf.org.uk

For up-to-date information on heart disease, the BHF and its services. See bhf.org.uk/africancaribbean for information specifically for African Caribbeans.

Heart Helpline 0300 330 3311

(A similar cost to 01 or 02 numbers) for information and support on anything heart-related.

Booklets and DVDs

The British Heart Foundation (BHF) produces a wide range of resources to help you and your family and friends look after your heart health. Many of these have been mentioned throughout this booklet.

To order our booklets or DVDs:
— call the BHF Orderline on **0870 600 6566**
— email orderline@bhf.org.uk or
— visit bhf.org.uk/publications

You can also download many of our publications from our website. For a list of resources available from the BHF, ask for a copy of our catalogue. Our booklets are free of charge, but we would welcome a donation. (See page 63 for how to make a donation).

Heart Matters

Heart Matters is the BHF's **free**, personalised service that provides support and information for people who want to improve their heart health. Join today and enjoy the benefits, including 'heart matters' magazine and an online members' area. Call the **Heart Helpline** on **0300 330 3311**, or join online at bhf.org.uk/heartmatters

Useful organisations

Alcohol Drinkline 0300 123 1110

Blood pressure Blood Pressure UK www.bloodpressureuk.org

Diabetes Diabetes UK 0345 123 2399 www.diabetes.org.uk

Healthy eating NHS Choices www.eatwell.gov

Heart UK (The Cholesterol Charity) 0845 450 5988 www.heartuk.org.uk

Smoking NHS Smokefree 0800 022 4 332 www.nhs.uk/smokefree For advice on stopping smoking, and to find your local NHS stop smoking service.

Quit 0800 00 22 00 www.quit.org.uk

Stroke Stroke Association 0303 3033 100 www.stroke.org.uk

Dad was just 42 when he died from complications of coronary heart disease. He had very high cholesterol, so the whole family were checked.

I was only 21 and I remember getting the letter. Both me and my brother had very high cholesterol.

We were told to be careful with our diet. Honestly, I never gave it much thought until I was in my thirties with three children.

That's when I started to feel unwell.

I had coronary heart disease, and I needed to have a stent fitted, as well as medication.

My doctor advised me to change my diet and lifestyle to keep my heart healthy.

You can't change your family history, but you can choose your lifestyle.

I've cut right down on processed foods, and I eat more healthily.

I love my children and my grandchildren and I want to be around for them.

My children are affected too.

I was upset when I heard my son had high cholesterol, but we have worked together to make sure we both make the right choices.

Yvonne Hamilton, 56



My story
THEN

My story
NOW

How you can **HELP**

For over 50 years we've pioneered research that's transformed the lives of people living with heart and circulatory conditions. Our work has been central to the discoveries of vital treatments that are changing the fight against heart disease.

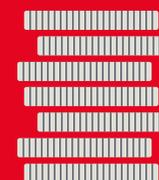
But cardiovascular disease still kills around one in four people in the UK, stealing them away from their families and loved ones.

**Every pound raised,
minute of your time
and donation to
our shops will help
make a difference
to people's lives.**

**Join our fight for every
heartbeat in the UK.**

If you'd like to make a donation, please call our donation hotline on **0300 330 3322** or visit our website at **bhf.org.uk/donate** or you can post it to us at BHF Customer Services, Lyndon Place, 2096 Coventry Road, Birmingham B26 3YU. Or, complete the form on the next page and send it to the address above.

**Your support will help in the
fight against heart disease.**



Join our fight DONATION FORM

Title _____ Full name _____

Address _____

Postcode _____

Email _____

We would like to keep in touch with you to let you know how your support has made a difference. By supplying your email address you agree that the BHF may use this to contact you about our work.

PLEASE ACCEPT MY GIFT OF EITHER: £10 £15 £20 Other

(Please make your cheque / postal order / CAF voucher payable to The British Heart Foundation)

Or please debit the above sum from my:

CAF Card MasterCard Visa/Delta Maestro Amex

Card No. _____ (Maestro Only)

Valid from ____ / ____ / ____ Expiry date ____ / ____ / ____ Security code _____

Signature _____ Date ____ / ____ / ____ Issue No. (Maestro Only) _____

The British Heart Foundation, registered charity number 227971 (England and Wales) and SC039426 (Scotland).

Once completed please return this form to:

BHF Customer Services, Lyndon Place, 2096 Coventry Road, Birmingham B26 3YU

**Make your gift worth almost
a third more – at no extra cost to you!**

giftaid it

GA1 Yes, I am a UK taxpayer and would like the BHF to reclaim the tax on any of the donations I have made in the last four years and any future donations I may make.*

Date ____ / ____ / ____ **GA2** No, I am a non-taxpayer.

Are you a UK Taxpayer?

If you are a UK tax payer please tick the first box so we can claim up to 25p for every pound you give at no extra cost to you.

*To qualify for Gift Aid, you must pay an amount of UK Income Tax and/or Capital Gains Tax at least equal to the amount that all the charities or Community Amateur Sports Clubs (CASCs) will reclaim on your gifts for that tax year (6 April one year to 5 April the next) and you understand that other taxes such as VAT and Council Tax do not qualify.

- If you do not wish to be contacted by post, please tick this box. (MP0074)
- If you do not wish to hear from us by phone, please tick this box. (MP0075)
- From time to time we allow other similar organisations to contact our supporters. If you do not wish to be contacted by them, please tick this box. (MP0060)



Have your say

We would welcome your comments to help us produce the best information for you. Why not let us know what you think? Contact us through our website **bhf.org.uk/contact**. Or, write to us at the address on page 63.



**British Heart
Foundation**

Coronary heart disease is the UK's single biggest killer.

For over 50 years we've pioneered research that's transformed the lives of people living with heart and circulatory conditions. Our work has been central to the discoveries of vital treatments that are changing the fight against heart disease.

But so many people still need our help.

From babies born with life-threatening heart problems to the many Mums, Dads and Grandparents who survive a heart attack and endure the daily battles of heart failure.

Join our fight for every heartbeat in the UK. Every pound raised, minute of your time and donation to our shops will help make a difference to people's lives.

**FIGHT
FOR EVERY
HEARTBEAT**

bhf.org.uk