

American Heart Association
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Aorta Reporter

The Mended Hearts, Inc. — Atlanta Chapter #81
Founded 1951 Chartered 1973

It's Great to be Alive and Help Others!

It's Great to be Alive—and to Help Others

Dedicated to the Memory of Dr. Paul Ambery

LUCIA KAMM-STEIGELMAN, Ph.D.

KENNESAW STATE UNIVERSITY

“Heart Attack: Women in Midlife”

Tuesday, November 15, 2005

7:30 – 9:00 p.m.

SAINT JOSEPH HOSPITAL AUDITORIUM (ONE FLOOR BELOW LOBBY LEVEL)

FREE PARKING AVAILABLE

Drive past the hospital front entrance and watch for the Cancer Center parking deck on the left opposite the main entrance to the Cancer Center. Ring the button at the parking deck entrance and tell the attendant who answers that you are attending the Mended Hearts meeting and the gate will be opened.

MAKE YOUR RESERVATIONS FOR THE HOLIDAY PARTY ON DECEMBER 7!

HOLIDAY INN HOTEL & SUITES

2265 KINGSTON COURT — MARIETTA, GA

770-952-7581



RESERVATION FORM AND DIRECTIONS ON PAGE 7

DEADLINE — DECEMBER 1



Remember — If you're reading this, you're invited!!!
(and we do it all for you; please come, learn and meet many other MENDED HEARTS)

PRESIDENT'S NOTES

Izaak Walton once said, "God has two dwellings: One in heaven, and the other in a meek and thankful heart."

Let us look back this Thanksgiving and be thankful for another Thanksgiving. It is a time we share with our families and neighbors and/or friends. Let us share our thankfulness in our Grace to God this Thanksgiving. He has given us another day.

I am very thankful for my family, but I am also thankful for our Mended Heart visitors. They are the ones with a meek and sharing heart. Mended Hearts will always be thankful to them for giving of their time to visit others. They will definitely be rewarded.

Happy Thanksgiving!

Doug Steingraber

CHAPTER NOTES

Greetings once again! Here's wishing this issue finds you in good shape, taking good care of your heart, and possessing a positive attitude! I hope you are looking with great anticipation to the upcoming American Heart Association metro Atlanta Heart Walk, a happy and thankful Thanksgiving, and our annual holiday dinner meeting and celebration.

Be a walker or volunteer Red Cap on November 5 at Centennial Olympic Park. Support our cause. Wherever you live, chances are your county has a Heart Walk sometime during the year. Be there!

Our many thanks to the great stuffers who recently helped out at the American Heart Association; namely, Herb and Dixie Jardine, Harold Welden, Carol Olley, Lucille and Max Feinstein, John and Dody Crosbie, and Nick Pavese.

It's not too early to make your reservations for the annual holiday dinner meeting. Details are elsewhere in this issue.

Not surprisingly, our November 1987 issue detailed plans for the same event. That issue contained plans for revising the chapter bylaws and a questionnaire about choosing a location for future meetings. A total of 206 hospital visits were reported, and yours truly had given a presentation to the "Heart Mates" group at DeKalb Medical Center. Also our own Bea and Ed Caine were off on another trip—this time to China.

In my visit to Emory patients, I really never expected to connect with evacuees from Katrina, but it happened recently. I asked a lady recovering from bypass surgery where she was from. She said New Orleans; and according to her daughter, they fled the day before the storm hit. She said her mother was scheduled to have surgery on September 10 in New Orleans. Instead, here she was at Emory and doing very well. In further response, she said her home was under water. Although her mother's had water, it was not as severely

damaged. I must say I was truly impressed by their positive outlook in spite of all they had already encountered and the unknowns they were still facing. They were thankful for surviving Katrina and the mother's great progress from her surgery. The question for ourselves is how can we ever complain about the seemingly minor irritants in our lives?

Since reading the October Aorta, I hope you have signed on as a participant in the "You're the Cure" program of the American Heart Association. By taking that simple step, you help advance the causes we and the AHA support in the fight against heart disease and stroke. It's easy—there's a link on the AHA website at www.americanheart.org.

I'll finish on the lighter side thanks to the South Jersey Devil:

Thought of the day—She who uses Crisco gets fat in the can.

Answer: Selfish

Question: What the owner of a seafood store does?

Question: What do you call it when it rains chickens and ducks?

Answer: Fowl weather

Finally, "Your today is the tomorrow that you worried about yesterday."

God willing, I'll see you here again next month.

George Waterhouse

LET'S VISIT AWHILE

Smith Smallwood made his first solo visit at Saint Joseph's on September 20. As we go to press, Bob Fisher is looking forward to the successful implantation of a new pacemaker—this one with a defibrillator included. It's too bad that Bob could not get a trade in on the old model!

I would like to introduce more of our visitors:

Emory Hospital:

John Friese, Coordinator

Visitors: George Waterhouse, Janet Thompson, James Scaglione, Robert Davis, and Phil Chapman

Atlanta Medical Center:

Max Feinstein, Coordinator

Visitors: Gene Cummings and Joe Slykerman

We thank all of our visitors for their service.

Herb Jardine

MEMBERS NOTE:

Our board meetings are routinely held on the second Tuesday of each month (except July) at 10:30 a.m. at the Metro Office of the American Heart Association, 1101 Northchase Parkway, Marietta, GA.

You are always welcome to sit in.

HOSPITAL VISITING REPORT

During the month of September 2005, we recorded 183 hospital and telephone visits at Emory University Hospital, Crawford Long Hospital, Saint Joseph's Hospital, Atlanta Medical Center, Piedmont Hospital, Grady Hospital, and WellStar Kennestone Hospital.

NOVEMBER CARDIO- VERSARIES

1972	Lewis Welden
1978	Marci White Mary Alice Steinheimer
1980	Clarence Beck
1994	John Cole
1995	Allison Caldwell
1996	Michael Deroma James Bradford
1997	Catherine Jenkins Aubrey Harvey
1998	Billy Jones Paul Verpillot
2000	Harold Welden Willie Cummings
2001	Doug Steingraber
2002	Robert Sellers
2003	Edwin Olsen John Crane

VOLUNTEERING DATE AT AMERICAN HEART ASSOCIATION

November 10

VISITOR REACCREDITATION MEETING AND TRAINING SEMINAR

Mandated by our national headquarters

Saturday, February 11, 2006

9:30 a.m. — 12 noon

Saint Joseph's Hospital Classroom #1

Park in Cancer Center lot

**Light refreshments and
possibly risqué videos!!**

BE THERE!!

SATELLITE MEETING INFO.....

Marietta Satellite

First Tuesday of the month – 6:30 p.m.
Kennestone Hospital Rehab Center (behind the hospital)
Call Doug Steingraber at 770-926-0157 for information.

Piedmont Satellite

Second Thursday of the month – 6:30 p.m.
Piedmont Hospital – Cardiac Rehab
Call Joann Gorell at 404-605-3283 for information.

LAUGHS AND GIGGLES

Two blondes, Sue and Tracey, were doing some carpentry work on a house. Sue, who was nailing down house siding, would reach into her nail pouch, pull out a nail and either toss it over her shoulder or nail it in.

Tracey, figuring this was worth looking into, asked, “Why are you throwing those nails away?”

Sue explained, “When I pull a nail out of my pouch, about half of them have the head on the wrong end, and I throw them away.”

Tracey got completely upset and yelled, “You moron! Those nails aren't defective! They're for the other side of the house!”

A motorcycle cop was rushed to the hospital with an inflamed appendix. The doctors operated and advised him that all was well. However, the patrolman kept feeling something that was pulling at the hairs on his chest.

Worried that it might be a second surgery the doctors hadn't told him about, he finally got enough energy to pull his hospital gown down enough so he could look at what was making him so uncomfortable. Taped firmly across his hairy chest were three wide strips of adhesive tape—the ultra sticky kind that doesn't come off once it is put on. Written in large black letters was the sentence, “Get well soon, Luv! – from the nurse you ticketed last week.”

An old man goes to the wizard to ask him if he can remove a curse he has been living with for the last 40 years.

The wizard says, “Maybe, but you will have to tell me the exact words that were used to put the curse on you.”

The old man says without hesitation, “I now pronounce you man and wife.”

A doctor examined a woman, took the husband aside, and said, “I don't like the looks of your wife at all.”

“Me neither, Doc,” said the husband. “But she's a great cook and really good with the kids.”

AMERICAN HEART ASSOCIATION CONNECTIONS

NEW HEART FAILURE GUIDELINES STRESS EARLY DIAGNOSIS AND TREATMENT

Early diagnosis and new treatments can help battle heart failure—a growing national problem that causes 1 million hospital admissions each year, according to new guidelines released by the American College of Cardiology (ACC) and the American Heart Association (AHA).

Noting that new treatment approaches may also improve the quality of life for patients, the authors classified heart failure on a scale from risk factors to end-stage disease:

- Stages A and B are when patients lack early signs or symptoms of heart failure, but are at risk because of risk factors or heart abnormalities, which could include a change in the shape or structure of the heart.
- Stage C denotes patients with current or past heart failure symptoms such as shortness of breath.
- Stage D designates patients with refractory heart failure who might be eligible for specialized advanced treatment—including cardiac transplantation—or compassionate end-of-life care such as hospice.

Nearly any form of heart disease may ultimately lead to heart failure. The guidelines stress that early recognition and proper treatment of high blood pressure, diabetes, coronary artery disease and other cardiovascular risk factors can help patients delay or avoid heart failure.

The key to prevention is to get the risk factors under control. For instance, studies have shown controlling hypertension can reduce the incidence of heart failure by 50 percent.

“More treatments have made our decision-making far more complex since the last ACC/AHA heart failure guidelines only four years ago,” said Sharon Ann Hunt, M.D., F.A.C.C., professor of cardiovascular medicine at Stanford University Medical Center and chair of the writing group.

From 1990-99, the number of people hospitalized with a primary diagnosis of heart failure increased from 810,000 to more than 1 million. This was due to the population aging and to more people surviving heart attacks. Heart failure mostly affects the elderly, and more Medicare dollars are spent for heart failure diagnosis and treatment than for any other disease.

About 5 million U.S. residents are living with heart failure, and more than 550,000 people are diagnosed with the condition each year. In 2005, the disease will cost an estimated \$27.9 billion in direct and indirect health care expenses, the authors write.

Some people may not realize one of the main symptoms of heart failure is becoming easily exhausted.

“We know there are many people walking around who think they are just out of shape or that they are just getting older, or that their ankles are swelling because it’s

hot,” said co-author Mariell Jessup, M.D., F.A.C.C., medical director of the heart failure and cardiac transplantation program and professor of medicine at the University of Pennsylvania Medical Center in Philadelphia. “They don’t appreciate that this may be due to heart failure.”

The guidelines also change the name of the condition from congestive heart failure (CHF) to heart failure (HF) to reflect the broad spectrum of the disease. Congestion occurs when the heart cannot efficiently pump or eject blood from its chambers. This causes fluid build-up in the lungs and heart, resulting in stiff, fluid-filled lungs and shortness of breath. The panel dropped the word ‘congestive’ because people can have few or no symptoms of congestion and still have a severely abnormal heart with symptoms of fatigue and exercise intolerance caused by poor cardiac output, Jessup said.

In recent years, doctors have recognized that many people with normal ejection fraction have heart failure. This often occurs because the heart pumps properly, but fails to fill adequately with blood, a condition called diastolic heart failure. These patients rarely have been included in clinical trials of new drugs and devices in the past, but they are the subjects of several new, ongoing trials. These trials should help settle the issue of whether their treatment should be the same as that for patients with reduced ejection fraction.

“The second major point is that heart failure does not go away,” Jessup said. “There are drugs that need to be used and medical care that needs to be done on a regular basis.”

The committee also recommended left ventricular assist devices (LVADs) be considered as permanent or “destination” therapy in selected patients.

LVADs are implanted mechanical devices that help pump blood through the heart and can be used as a reasonable permanent therapy in some end-stage heart failure patients who are not candidates for transplants, don’t respond to standard treatment and have a one-year survival outlook of less than 50 percent. The devices, which recently received U.S. Food and Drug Administration approval as permanent or “destination” therapy, were first used as a temporary measure to keep patients alive while awaiting a heart transplant. “It’s going to be a whole new era in treating heart failure,” Jessup said. “Eventually, we’ll have portable artificial pumps that can take over the action of the heart.”

Other recommendations:

- Expand the number of patients eligible for implantable cardioverter-defibrillators (ICDs), devices implanted under the skin that save lives by shocking chaotic heart rhythms back into a healthy pattern.

- Provide information on end-of-life issues. Although treatment advances can extend lives, heart failure is often fatal. The guidelines recommend that cardiologists broach the subject of hospice care—support and comfort for dying patients and their families.

“There is a failure to recognize that end-stage heart failure patients frequently come in and out of the hospital over and over again and suffer a lot with really no impact on their ultimate survival,” Jessup said. “I think using hospice is a way of improving the remaining days that these patients have. Hospice can be a very positive experience for patients and their families.”

She acknowledged that this represents a new role for many cardiologists.

“Cardiologists aren’t used to talking about hospice. They are more used to doing interventions. So it is a big shift,” she said.

The guidelines also suggest that a new perspective on treating end-stage heart failure could result in a smoother, less stressful transition for patients and their families.

Vanessa G. Garrity

Volunteer and Communications Coordinator

JOIN US AT THE ATLANTA HEART WALK

The Mended Hearts will be participating in the upcoming Atlanta Heart Walk on November 5 at Centennial Olympic Park.

The festivities begin at 9 a.m. There will be a special VIP tent for all heart disease survivors.

Last year, the Mended Hearts raised over \$8,900, and we hope to raise \$10,000 this year to help fight heart disease and stroke.

To join the Mended Hearts team or to make a donation, please contact Doug and Sara Steingraber at 770-926-0157 or dcsteingr@aol.com

WE HOPE TO SEE YOU THERE!

NUTRITION NOTES

EAT FISH FOR A HEALTHY HEART, BUT BAKE IT OR BROIL IT

By now almost everyone knows that the omega-3 fatty acids in fish protect the heart by lowering cholesterol.

There’s more to it than that. Several studies show that fish that are fried, or coated with batter and French fried, do not protect the heart. Instead, they tend to decrease heart health by increasing cholesterol levels.

Part of the problem with fish sticks and French fried fish could be the type of fish that is usually used. They are predominantly made from white fish or cod, which have very low levels of omega-3s.

Researchers at Harvard Medical School studied ultrasound images of the hearts of 5,000 men and women. Subjects also filled out a questionnaire about their diets. After allowing for other factors that are known to affect the heart, researchers found that those who regularly ate fried fish and fish sandwiches showed greater signs of heart and blood vessel disease.

Study participants who frequently ate broiled or baked fish had lower heart rates, lower blood pressure, and better blood flow to the heart. Broiled or baked fish tends to be varieties such as salmon or tuna, which are high in omega-3s.



Another study showed that people age 65 or older who ate baked or broiled fish one to four times a week had a 27 percent lower rate of ischemic stroke. Those who ate fried fish had a 44 percent greater risk of ischemic stroke, according to the *Tufts University Health & Nutrition Letter*.

BAKED FISH WITH MUSHROOMS

If frozen, thaw 1 pound of fish fillets or steaks, cut 1/2 to 3/4 inch thick.

Cook 1 cup of sliced fresh mushrooms, 1/2 cup sliced green onion, and 1/4 teaspoon dried tarragon, crushed, in 2 tablespoons margarine or butter until tender.

Spoon over fish and sprinkle with paprika.

Cover and bake in at 450 degrees for 6 to 10 minutes or until fish flakes easily with a fork. Serves 4.

Pages Editorial Service, Inc.

WANT TO TALK

with others who have had a similar cardiac procedure/event?
Call 678-385-2062 and leave a message.
We’ll work to find a connection!

MEDICINE & TECHNOLOGY

FDA APPROVES HEART DRUG FOR BLACK PATIENTS

The Food and Drug Administration's approval in June 2005 of a heart failure drug aimed at black patients marks the first time that the agency has approved a drug for a specific racial group. When added to standard heart failure therapy, BiDil dramatically reduces death and hospitalization in blacks.

BiDil is a combination of two older drugs, hydralazine and isosorbide dinitrate. Hydralazine relaxes the arteries so the heart doesn't have to work as hard to push blood through them. Isosorbide dinitrate relaxes both the veins and the arteries. Experts say isosorbide dinitrate may work by releasing nitric oxide at the blood vessel wall, but its effect usually wears off after half a day. Hydralazine may prevent the loss of this effect, but it's not fully known how the two drugs work together. BiDil is taken by mouth and started at a dose of one tablet three times a day, which may be adjusted based on patient tolerance. Adverse side effects may include headaches and dizziness.

The approval of BiDil was based mainly on the results of the African-American Heart Failure Trial (A-HeFT), a study of 1,050 self-identified black patients with severe heart failure who were already being treated with the best available therapy. This study was conducted because two previous studies suggested a benefit of BiDil in black patients, with no evidence of benefit in the white population.

"We followed a trail of evidence which strongly suggested that there were differences between blacks and whites in response to this medicine," says Anne Taylor, M.D., a professor of medicine at the University of Minnesota Medical School and lead investigator of A-HeFT. "If researchers see differences in disease patterns between population groups, the cause of those differences should be investigated. Differences may be related to environmental, social, lifestyle, or genetic factors or to interactions among all of these factors."

In addition to receiving either BiDil or an inactive substance (placebo), most of the people in the A-HeFT trial also received the current standard therapy for heart failure—a diuretic, an angiotensin-converting enzyme inhibitor or an angiotensin receptor blocker, and a beta blocker. The trial was conducted at more than 160 sites in the United States. Participants included people ages 18 and older who had a heart failure diagnosis for at least three months. In people with heart failure, the heart is weakened and doesn't pump enough blood. Heart failure can be caused by heart attacks, high blood pressure, infections, and other conditions that can damage the heart muscle.

Patients on BiDil experienced a 43 percent reduction in death and a 39 percent decrease in hospitalization for heart failure, compared with patients who took a placebo. Patients taking BiDil also experienced a decrease of their

heart failure symptoms, notably shortness of breath and extreme fatigue. The results were so favorable that the trial was stopped early so that all the participants could take BiDil. Study results of A-HeFT, which ran from June 2001 to July 2004, were published in the November 2004 issue of *The New England Journal of Medicine*. The trial was co-sponsored by the Association of Black Cardiologists Inc. of Atlanta and NitroMed Inc. of Lexington, Mass., which manufactures BiDil.

"Because patients who were already on standard medication saw such a dramatic difference with BiDil, the data suggest that some additional mechanism of the disease was treated by the combination," says Taylor. One hypothesis is that heart failure in blacks may be associated with a deficit in the production of nitric oxide, and BiDil may work by replenishing nitric oxide to the vascular tissue. "This is just a hypothesis, and this trial doesn't prove or disprove it," Taylor says. "What this trial shows is efficacy, and we need to go back and carry out more research to try to understand why it works."

The approval of BiDil is especially significant because blacks between ages 45 and 64 are 2.5 times more likely to die from heart failure than whites in the same age range, according to the Centers for Disease Control and Prevention. Blacks also present with heart failure and die from the disease at an earlier age than whites. Heart failure affects about 5 million Americans, including about 750,000 blacks. There is no cure, and more than half of patients die within five years of diagnosis.

"In BiDil, we now have a treatment that has been shown to save the lives of black heart failure patients, helping a population that is disproportionately burdened by cardiovascular disease," Taylor says.

The differences in health outcomes for blacks are due to many factors. "This includes the prevalence of risk factors, access to care and the availability of insurance, the ability to pay for treatment, the interaction between the physician and patient, where people live, lifestyle factors like smoking and weight," Taylor says. "A single treatment like BiDil is only a piece of the mosaic."

The National Medical Association commended the FDA for the approval of BiDil and expressed its position that a larger clinical trial involving other populations would also be helpful. Taylor says that because results were so positive for those who took BiDil, A-HeFT will stimulate further research on the drug in other populations.

BiDil is a striking example of how a treatment can benefit some patients even if it doesn't help all patients, says Robert Temple, M.D., the FDA's Associate Director for Medical Policy. "The information presented to the FDA clearly showed that blacks suffering from heart failure will now have an additional safe and effective option for treating their condition. In the future, we hope to discover characteristics that identify people of any race who might be helped by BiDil."

*By Michelle Meadows
Contributed by Daryl Thompson, FDA (Ret.)*



HOLIDAY DINNER INFORMATION

**Hors d'oeuvres 6:30 p.m. – 7:15 p.m.
with cash bar**

Dinner — 7:30 p.m.

Buffet dinner with beef and chicken stations

Cost - \$20 per person

Lots of door prizes – Everyone gets a free raffle ticket for prizes upon arrival.

Purchase additional raffle tickets for chance at a two-night stay at the Holiday Inn!

DIRECTIONS:

I-75 going South:

- Exit #261 Lockheed/Dobbins AFB
- Turn right onto Delk Road
- Go .6 miles and turn right onto Franklin Road
- Immediately turn right onto Kingston Court.

Kingston Court dead-ends into Holiday Inn parking lot. Enter the hotel through the ballroom doors or the front door.

I-75 going North:

- Exit #261 toward Lockheed/Dobbins AFB (cloverleaf)
- Turn right onto Delk Road, crossing over I-75
- Go .6 miles and turn right onto Franklin Road
- Immediately turn right onto Kingston Court

THE VENT-RICLE

IN HONOR OF STUPID PEOPLE

In case you needed further proof that the human race is doomed through stupidity, here are some actual label instructions on consumer goods.

On a Sears's hairdryer: "Do not use while sleeping."

On a bag of Fritos: "You could be a winner! No purchase necessary. Details inside." (The shoplifter special?)

On a bar of Dial soap: "Directions: Use like regular soap." (And that would be...??)

On some Swanson frozen dinners: "Serving suggestion: Defrost." (But, it's just a suggestion.)

On Tesco's Tiramisu dessert (printed on bottom): "Do not turn upside down." (Well...duh, a bit late, huh!)

On Marks & Spencer Bread Pudding: "Product will be hot after heating." (And you thought...??)

On packaging for a Rowenta iron: "Do not iron clothes on body." (But wouldn't this save us time?)

On Boot's Children Cough Medicine: "Do not drive a car or operate machinery after taking this medication." (We could do a lot to reduce the rate of construction accidents if we could just get those five-year-olds with head colds off those bulldozers.)

On Nytol Sleep Aid: "Warning: May cause drowsiness."

On most brands of Christmas lights: "For indoor or outdoor use only." (As opposed to what?)

On a Japanese food processor: "Not to be used for the other use." (Now, somebody out there, help us on this. We're a bit curious.)

On Sainsbury's peanuts: "Warning: contains nuts." (Talk about a news flash.)

On an American Airlines packet of nuts: "Instructions: Open packet; eat nuts."

On a child's Superman costume: "Wearing of this garment does not enable you to fly." (Darn the bad luck!)

HOLIDAY PARTY RESERVATION FORM
December 7, 2005 / 6:30 p.m.
\$20.00 per person

Name(s) _____

Telephone _____

Total # of Seats _____

Enclosed is my check for \$ _____

Send to: Mended Hearts, Chapter 81 (c/o John Crosbie)
 3401 Winter Wood Court; Marietta, GA 30062
 Telephone: 770-977-4358

RESERVATION DEADLINE December 1 2005

APPLICATION FOR MEMBERSHIP

We (I) would like to join Mended Hearts, Inc., Chapter #81

Atlanta or Satellite: Marietta Piedmont

NAME _____

SPOUSE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ DATE OF BIRTH _____

DID YOU HAVE:

Bypass Surgery Balloon Pacemaker Heart Attack

Valve Surgery: Mitral Tricuspid Aortic Pulmonary

Other _____

New member family dues are \$32.00 and new member single dues are \$22.00.
Please make your check payable to:
The Mended Hearts, Inc., Chapter #81
Mail to: John Crosbie, Treasurer
3401 Winter Wood Court
Marietta, GA 30062-1247

RETIRED YES NO

DATE OF CARDIAC EVENT OR SURGERY: _____

TYPE OF MEMBERSHIP: FAMILY SINGLE

Membership covers a twelve-month period from date of enrollment and includes:

- Insignia pin
- Chapter newsletter
- Subscription to quarterly national magazine, *Heartbeat*

Aorta Reporter

A copy of *Aorta Reporter* is mailed for three consecutive months following your hospital stay or referral as a heart patient. It is our way of keeping in touch while you continue to recuperate. We enjoyed meeting you and hope you received some comfort and encouragement from us. Having lived the same experiences, we are willing to take time out of our lives because we want to share our experiences in your recovery. As you become active again, you and your family are invited to attend our Atlanta Chapter #81 or any other chapter meetings as guests. In getting to know us, we hope you will decide to join us in helping each other. Our 7:30 p.m. meetings are the third Tuesday of each month.

Mended Hearts

Mended Hearts is a nationwide support organization, affiliated with the American Heart Association, for individuals with heart disease, including persons recovering from heart attacks or open-heart surgery. Members give hope and encouragement to others by providing living proof that persons with heart disease can lead full, productive lives. Family and friends are also welcome to attend the free monthly sessions. For information, call 678-385-2062 or your local American Heart Association.

**Visit Chapter #81 at
www.mendedheartatlanta.org**

ATLANTA MENDED HEARTS, CHAPTER #81

678-385-2062

c/o American Heart Association
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