

## **Spring 2011 NEWSLETTER**

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### *On the Horizon*

May 2011

#### **Heading North for the Spring / Summer?**



Its spring time again and for many South Floridians that means saying “ so long” to our friends and neighbors who will be travelling or heading north this summer. For those of you who wish to have a copy of your medical records please inform us 2 weeks in advance of your departure. We can either mail or fax your records to your northern physician. We can give you a paper copy of your records or place the records on a USB flash drive that fits on your keychain. The USB flash drive can be inserted into any Windows based computer to obtain your medical records. Have a safe trip and a wonderful summer. Please remember to transfer your northern records to us when you return to Florida next fall.

#### **“White Coat” Hypertension – Blood Pressure Readings**

Several recent studies have shed new light on “White Coat” Hypertension. White Coat Hypertension is an elevation of the patient’s blood pressure when they visit the doctor’s office.

In the past we have compensated for this by teaching patients the correct way to measure their blood pressure at home using a digital blood pressure cuff which we gladly calibrate for them. We then use their home BP readings to assess how they are doing. We have always had a bias against the digital BP cuffs because they seemed to show a higher systolic blood pressure reading than the manual office use blood pressure cuffs.



In other instances, we place a 24 hour ambulatory blood pressure monitor on a patient’s arm. The data obtained when you return the equipment reveals all your readings for the previous 24 hours and calculates the median blood pressure reading and average systolic and diastolic readings.

A South Korean University hospital group recently presented data at the American College of Cardiology Conference. They found that “pulse pressure”, which is the numerical difference between the systolic and diastolic pressure readings, correlated strongly with those whose suspected high blood pressure disappeared when monitored outside the office. Thirty-one percent of their patients had white coat hypertension, marked by at least a 20 mm Hg higher systolic blood pressure in the office compared with at home measurements. When they compared pulse pressures, those patients with white coat

hypertension had a pulse pressure of 57.5 or greater when the nurse took the pressure reading or 61.8 or greater if the doctor performed the exam. Patients with true high blood pressure had a smaller pulse pressure difference.

The researchers then looked at the consequences of sustained blood pressure elevation and compared the white coat hypertension group to the patients with true sustained essential hypertension. They found no damage to the heart, blood vessels or kidneys of the white coat hypertension group, while these changes are common in the true high blood pressure group.

Hopefully, in the near future, we will be able to separate those patients with white coat hypertension from those with true high blood pressure. Then we will no longer treat the white coat hypertension group, leading to less medication related problems.

A major review study published by the National Institute of Health found that in situations of assessing high blood pressure, blood pressure during trauma or during an arrhythmia; the manual approach with using a stethoscope was more accurate than an automated machine. In all other instances the digital machine was acceptable for screening patients' vital signs. A recent study presented at the ACC meetings suggested that the digital machines gave a slightly higher systolic reading than the manual cuffs but were in general more reliable.

Our practice will continue to use manual BP machines and continue to calibrate home digital machines versus our manual machine so that we can get the most accurate readings possible.

### **Reducing Triglyceride Levels**

The American Heart Association along with Michael Miller, M.D., director for the Center for Preventive Cardiology at the University of Maryland - School of Medicine in Baltimore, just released data and recommendations that diet and lifestyle changes alone should be sufficient to reduce elevated triglyceride levels.

The researchers analyzed more than 500 international studies conducted over the last 30 years for the purpose of updating doctors on the role of triglycerides in the evaluation and management of **cardiovascular disease risks**. The study confirmed that triglycerides are not directly atherogenic but are instead a marker of cardiovascular disease risk. High triglycerides are commonly seen in diabetes mellitus, chronic kidney disease and certain disorders associated with HIV disease. Alcohol and obesity plus inactivity all contribute to elevated levels with TG levels rising markedly in this country since the mid 1970's in concert with the obesity epidemic we are now seeing.

Triglycerides are checked on a fasting blood test of optimally 12 hours with the upper limit of normal set at 150mg/dl. Newer recommendations will reduce the level to 100 mg/dl. If your triglycerides are elevated the study made the following suggestions to lower them to appropriate levels:

1. Limit your sugar intake to less than 5% of calories consumed with no more than 100 calories per day from sugar for women and no more than 150 calories per day from sugar for men.
2. Limit Fructose from naturally occurring foods and processed foods to less than 50 -100 grams per day
3. Limit saturated fats to less than 7% of total calories
4. Limit trans-fat to less than 1% of total calories.



Elevated triglycerides, especially above 500 mg/dl, are associated with an increased risk of pancreatitis. For individuals with TG levels this high we recommend complete abstinence from alcohol.

Exercise is necessary to lose weight and lower triglyceride levels as well. Physical activity of a moderate level such as brisk walking for at least 150 minutes per week (2.5 hours) can lower your triglycerides another 20-30%.

If lifestyle changes including diet modifications and aggressive exercise do not bring you to target levels we suggest the addition of marine based omega 3 products. Also, eat fleshy cold water fish!

A combination of dietary changes, moderate regular exercise and weight reduction is all that is needed to control most problems with triglycerides. Referrals to registered dietitians can be very helpful in assisting you with the dietary changes required to be successful.

### **Health Education**



The Health Education page of my web site now has health tips provided by the American College of Physicians (ACP) and other useful information including a list for a home-based medical kit. The ACP is a trade association for internal medicine physicians.

The address for my web site is [www.BocaConciergeDoc.com](http://www.BocaConciergeDoc.com).

### **My Blog – Boca Raton Concierge Doctor**

Have you had an opportunity to read my blog on the WordPress Internet site? I encourage you to do so. While there, you can enroll to receive updates.



I frequently post new articles regarding treatment, prevention, detection, diseases, exercise, prescriptions, aging, advocacy, guidelines, health care regulations and policy, community service and other relevant topics. I also post topical guest blogs by experts in their respective fields.

My blog has been gaining national attention and I have had guest articles on KevinMD, Better Health and other notable sites. To view my blog, visit <http://bocaratonconciergedoctor.wordpress.com/>. There are also links to the blog from my web site and Facebook pages.

### **Facebook Page**



Be sure to visit my Boca Concierge Doctor page on Facebook. It will allow you to stay in touch with our practice and any developments. Also, be sure to click the “Like” button when you’re on the page. And, if you have something to share, you can post it to my “Wall”.



### **Membership - If You Like our Care and Service, Please Refer a Friend.**

Practicing medicine in South Florida always involves a constant turnover of patients. Patients move frequently so we need to replenish our patient membership constantly. If you like the way the staff and I care for you, please refer a friend, family member or colleague. There is a discount on membership for patients who send in a referral who joins the practice.

## **Executive Health Plans**

The practice is set up to deliver corporate health care, including executive physicals. Many of you own thriving businesses. We would like to work with you to keep you, your senior management team and your employees healthy. If you are interested in discussing a plan please let us know.



## **Do you have an idea for the practice?**



We have a wonderful and diverse group of patients in this practice. If there is a service or idea you have for improving upon the practice please let us know.

To set an appointment, please contact my practice at:

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**Be sure to visit my web site at [www.BocaConcierge Doc.com](http://www.BocaConciergeDoc.com)**



The staff joins me in looking forward to seeing each of you in the near future.

Steven E. Reznick, M.D., FACP, PA (Boca Concierge Doctor) is a concierge medical practice that provides gracious service in a comfortable and private office setting while administering 21<sup>st</sup> century care and technology with old fashioned attention and concern.

Check out my blog at: <http://bocaratonconciergedoctor.wordpress.com/>