

The Jersey Heartbeat



Message from the President

June 2009

Saying goodbye for the last time to a member is always difficult but when it happens so quickly and unexpectedly it adds to the pain. When we gathered at the volunteer luncheon Lucille Cardace was her usual bubbly self. She was pleased to receive the pin signifying the Orion award. Being a patient visitor was a very significant part of her life. When I read the obituary in the May 12 *Asbury Park Press*, I learned that Lucille had been one of the Radio City Rockettes. As a member of Mended Hearts the dance went on. You can honor her memory by volunteering to be a patient visitor; she would like that. *Requiescat in pace* Lucille, you are missed.

This month's message will try to concentrate on helping you get your health care money's worth. A good place to start is a visit to your doctor. I have noticed most of them are overbooked and hurry from patient to patient. In the process they seem to talk faster than my hearing can process, I don't think I'm alone. So how do you deal with this? The first step is your own preparation. If it is a routine checkup, you should

come prepared with routine questions. If there are issues that have appeared since your last visit you should make a list with specific symptoms and questions. When talking with the doctor it's always valuable to have a friend or caregiver with you taking notes. Another alternative is to purchase a small handheld audio tape recorder; a recording will allow you to replay both your questions and the answers. The editor of our newsletter always records the speakers at the programs he attends. His recorder is only about 2" x 6" wide. (And you thought he did it all from memory). Many doctors' offices are now offering e-mail questions and answers; your physician might be one of them. The technology is there; use it.

Sometimes you have to spend money to find ways to save it. I have subscribed to the Consumer Reports on Health. It's a monthly publication, chock-full of information. Copyright laws prohibit complete use of the articles

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but I can give you a synopsis. A June cover story dealt with how to stretch your health funds. Most of it dealt with people still working, however the last segment is specifically targeted to people with Medicare. It gave reference to a website that Medicare Rights Center operates on the web, www.medicareinteractive.org. The article dealt with some interesting topics such as understanding the difference between Medicare and Medicare Advantage, understanding the trade-offs offered by Medicare Advantage and cautioning the reader to

(Continued on page 2)



President's Message

New Members

Soon E. Wheeler

May 13



Birthdays

Thomas J. Bott	Jun 1
Mark Stewart	Jun 5
Emidio A. Caruso	Jun 8
Joan A. Varga	Jun 8
Neil Paulsen	Jun 9
Arnold Lomita	Jun 12
Joseph W. Dye	Jun 13
Manuel D. Pinho	Jun 14
Sheila Turkel	Jun 15
Matthew M. Klug	Jun 20
Matilda R. Underhill	Jun 23
Lou Massarelli	Jun 29



Surgiversaries

Nick Kaiser	Jun 1
Louis J. Sas	Jun 1
Manuel D. Pinho	Jun 2
Barbara Waage	Jun 8
Walter Gunn	Jun 12
William Balicki	Jun 13
Laurence C. McNamara	Jun 16
John Blair	Jun 19
Clifford J. Parker	Jun 21
John R. Casagrande	Jun 28



Visiting

May 2009:
141 patients and
96 family members
visited



*If you want to be listed here, or
would rather not be...*

Please contact the Treasurer.

(Continued from page 1)
carefully select private fee-for-service plans. The last segment suggested that you find out whether you're entitled to government help, read the Medicare publications.

Another article is titled "How to save a bundle on prescription drugs." The article suggests you should seek your doctor's help. I have found when doctors are prescribing a medication they may have samples to get you started. Dealing with one pharmacist is not only convenient but just plain sensible. An alert pharmacist can identify medical incompatibility that can arise with two or more doctors prescribing medication for different symptoms. Some health plans' prescription services prefer to deliver a three-month supply of the medication. If it's a generic drug, your local pharmacist may be able to provide the same quantity at a much lower cost. Check the federal website at www.Medicare.gov for more information. I would encourage you to ask your local library for the Consumer Reports on Health publication. If it's not available, ask the librarian if they would purchase a subscription. It is good reading.

(Continued on page 10)

Mended Hearts Chapter # 179

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General Meeting

Thursday, June 25
6:00 pm

Kathryn Collins, VP,
Campus Planning and Construction Mgmt., JSUMC

Talk & Tour: The Hospital of the Future is Now

Room B-104
Jersey Shore University Medical Center, Neptune

Refreshments will be served

— Call for information —
— Please register —
1-800-DOCTORS

Executive Meeting

First Thursday
July 2, 1:30 PM

Conference Room
4th Floor Ackerman
Jersey Shore University Medical Center, Neptune

Interested members are invited to attend

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Help!

Our chapter Treasurer also edits this newsletter and maintains the chapter website. Our Vice President manages visitor training, the visiting program, and the annual Celebration of the Heart. The chapter President handles everything else except the executive meeting minutes. As you can see, we have too few people doing what has to be done. You can help. Contact Bill Ryan: 732-367-3648, drbillryan86@alum.rpi.edu.

Not Mended Hearts, but of interest to heart patients
SUPPORT GROUPS
Free - registration required

ICD Education and Support Group
call
732-775-5500 Ext 5249

Successful Living with Heart Failure
call 1-800-560-9990

Central Jersey Transplant Support Group
call 732-450-1271

Meeting Schedule

Noon, fourth Thursday
(usually)

Even Months
(Feb., Apr., June, Aug., Oct., Dec.)
Jersey Shore University Medical Center, Neptune

Odd Months
(Jan., Mar., May, July, Sept., Nov.)
Ocean Medical Center, Brick (fourth Tuesday)
and
Riverview Medical Center, Red Bank

**Please Note:
Evening Meeting
This Month**



A superposition of two graphics
each © Pages Editorial Service, Inc.

May Meeting at Ocean

Carla
Jones



Diane JanTausch
opened the meeting



Featured speaker
Debra Shar

Diane JanTausch began our meeting with the sad news that Lucille Cardace passed away two weeks ago. She was a loyal Mended Hearts member, a visitor at JSUMC and an upbeat enthusiastic friend. We will all miss her.

Debbie Shar was our presenter today, speaking on the topic “Sleep Well—Live Well.” She is an RN and Community Educator for Meridian. She joined us for our heart healthy lunch of turkey sandwiches and fresh fruit before getting down to her lecture.

Sleep is a basic need and there are many causes of disruption of sound sleep, including prostate problems, night-time trips to the bathroom, restless legs, stress, depression and migraines as well as side effects of medication. Most of use take several medications from different doctors. *An old tip*—always use the same pharmacy to keep track of interactions.

Sleep can't be “made up”: once lost it can't be regained.

Some suggestions of what not to do before bedtime: Don't do stressful chores like paying bills, making phone calls, cleaning or computer work. No TV news or violent movies. Try a warm shower or bath and cool down before bed.

Lack of sleep can lead to daytime drowsiness, lack of alertness (especially driving), not feeling well, accidents (walking and driving), not completing tasks, mood disturbances, family feuds and weight gain.

Amazingly a poll shows that the number one health complaint is pain; number two is insomnia. More women than men suffer insomnia.

Here's a partial list of causes of insomnia: arthritis pain (keep the affected joints working by using them), cardiovascular disease, coronary artery disease, chronic lung disease, diabetes, menopause, neurological disease (Alzheimer's, stroke, Parkinson's), obesity (snoring, sleep apnea).

Stages of sleep change every ninety minutes: (1) very light sleep, (2) light, (3) deeper—may dream, (4) very deep—most restorative, (5) rapid eye movement (REM)—most dreams. Older adults need to get to the deep sleep stage, which can be difficult if they wake often. Naps of thirty to sixty minutes (not more) may help prevent sleepless nights.

Sleep apnea is common in the older and obese. A sleep lab can check the time between breaths. Many people

(Continued on page 7)

May Meeting, Riverview

*Martin
Brilliant*

As we straggled in and began munching our heart healthy lunch, Sheila Turkell answered questions. For instance, herbs can be quite potent and they can interact with other medications, but since they don't have to be approved we don't even know exactly how potent they are.

Sheila opened the meeting, issued the usual call for volunteers for Mended Hearts, and introduced our featured speaker, pharmacist James Hode, RPh, and his topic, anticoagulants and their drug interactions. He gave us a detailed handout and referred to it as he spoke.

Many of us, we told him, take Coumadin (generic: warfarin), Plavix (clopidogrel) or daily aspirin; none are on low-molecular-weight heparin. These are drugs prescribed to inhibit clotting if clots are likely to cause heart attack or stroke.

A diagram in the handout helped explain how these drugs work. Coumadin and heparin work in different ways to inhibit the formation of thrombin, the most important part of blood clots. Thrombin reacts with platelets, which is where Plavix and aspirin act. Disrupting any part of the process prevents clots.

Doctors titrate Coumadin depending on the diagnosis. For most patients the target is an INR (measured by a standard blood test) of 1.5 to 2.5 (higher INR means "thinner" blood: less clotting). Most patients reach this target with 2.5 to 5 mg a day.

Drug interactions for anticoagulants center on two things: Vitamin K, and the Cytochrome P450 system.

Cytochrome P450 is a group of enzymes in the liver that metabolize drugs and other substances, usually changing them into something less active. Some drugs can alter the effectiveness of these enzymes.

Herbs are not safe

Vitamin K is found in green leafy vegetables and is also produced in your gut flora (the bacteria in your intestines) and in your liver. It makes your blood "thicker"—more likely to clot. Coumadin works by counteracting Vitamin K.

Normally your coagulation is naturally balanced: proteins S and C inhibit coagulation, while Vitamin K promotes it. Research published just recently suggests a maintenance dose of Vitamin K for patients on Coumadin to make them less sensitive to small changes.

(Continued on page 10)



Sheila Turkell opened the meeting

The CHF Corner

*Kimberly McCourt
Nurse Practitioner
Coordinator,
Heart Failure
Center, JSUMC*

Reference: www.cdc.gov

The heat of summer is upon us. Overheating yourself can lead to heat exhaustion and even to heat stroke, a dangerous condition that can be fatal.

According to the Center for Disease Control (CDC), people with heart disease and the elderly should be checked on at least twice a day during a heat wave and observed closely for signs of heat stroke or heat exhaustion. These conditions can be fatal if not treated. Recognizing the signs and symptoms of these conditions could save your life or the life of a loved one.

Signs of heat related illness:

- Dizziness
- Heavy sweating
- Muscle cramps
- Cold or clammy skin
- Headaches
- Rapid heartbeat

If you have these symptoms, get out of the heat, move to shade or an air conditioned room, drink some water or a sport drink, and don't drink too much especially if you are diabetic. Get medical attention.

If these symptoms continue or go un-

treated they may lead to heat stroke, which is an emergency. The symptoms include:

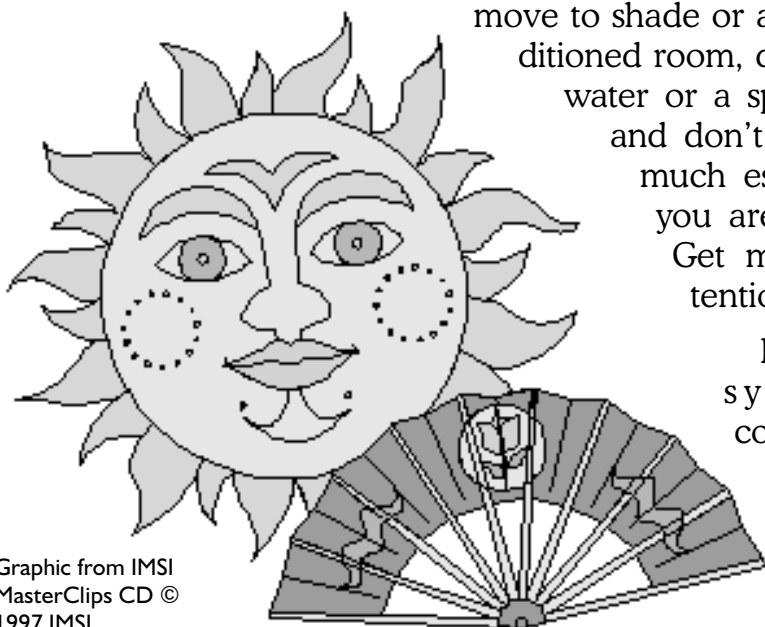
- Rapid heart rate
- Confusion
- Warm, dry skin
- Fever
- Severe headache
- Seizure or muscle twitching
- Unconsciousness

If you suspect heat stroke call 911! This is a medical emergency.

Tips for Preventing Heat Related Illness:

- Drink water. Sodas and alcohol actually act as diuretics and take water from your body instead of adding it.
- Stay in the shade. Temperatures can be as much as 10 degrees cooler in the shade than in the hot sun.
- Wear a hat and sunglasses. The glasses will protect your sensitive eyes from sunburn, while the hat will keep the heat off of your head
- Wear lightweight and light-colored clothing. Dark colors absorb heat.
- Don't exercise or overexert yourself if you can help it, especially between 10am and 2pm.

Follow these tips and you can stay cool and healthy during the hot summer months. ♡



Graphic from IMSI
MasterClips CD ©
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Low Sodium Summer recipe:

CAJUN CHICKEN WINGS WITH HONEY AND CAYENNE PEPPER

(Sodium per chicken wing: 26.8 mg)

15 skinless chicken wings (285 mg)
1/4 cup unbleached flour (.625 mg)
4 teaspoons cayenne pepper (2 mg)
1/8 teaspoon black or white pepper (.1 mg)
1/4 teaspoon sage (trace)
2 medium egg whites, well beaten (109.6 mg)
1/3 cup honey (4.75 mg)
2 tablespoons distilled or red wine vinegar (.3 mg)
2 teaspoons arrowroot powder (2 mg)

- Preheat the oven to 450 degrees.
- Wash and dry the skinless chicken wings.
- Combine the flour, 1 teaspoon of the cayenne, the black or white pepper, and the sage. Dredge the chicken in this mixture, coating each wing well. Dip the wings into the egg white mixture and transfer the pieces to a lightly oiled baking sheet.
- Bake in a 450 degree oven turning once, until crisp and brown but not blackened.
- While chicken is cooking, mix well the honey, the remaining cayenne pepper, the vinegar, and the arrowroot in a nonstick saucepan. Heat to boiling while stirring with a whisk until the mixture is thick. When ready, pour it over the chicken wings. ♡

Gazzaniga, Donald K. *No-Salt, Lowest-Sodium Cookbook* July 2002

Graphic from IMSI MasterClips CD © 1997 IMSI

(Continued from page 4)
don't know they have sleep apnea but it can be treated.

Sleep and normal aging: try to get 7-8 hours a night, going to bed and getting up at consistent times and waking naturally without an alarm. If you need naps keep them short.

More tips: exercise early in the day; make your bedroom a clutter-free, comfortable place with calm colors; invest in a good mattress and pillows. Make a to-do list so it doesn't

bother you in bed. If you don't fall asleep in 20 minutes, get up and read something boring until you get sleepy.

More don'ts before bed: caffeine, nicotine (a stimulant), alcohol (depressant, and dehydrates), stress, exercise (avoid for 3-4 hours before bedtime—raises body temperature and alertness).

Thanks, Debbie, for your many good suggestions. Happy better sleeping to all! ♡



May Meeting at Ocean

Heart News and Notes *Martin Brilliant*

Weight and Lifestyle

Information from
medpagetoday.com
and theheart.org

Researchers at the Medical University of South Carolina tell us our lifestyle is deteriorating. Only 8 percent of patients today, compared with 15 percent in 1988, follow all five healthy habits: controlling weight, eating fruits and vegetables, moderate use of alcohol, exercising, and not smoking. Weight is up, activity and fruit and vegetable consumption are down, smoking is unchanged, while moderate drinking is up.

Is our weight going up *because* we're exercising less? A study of American weight gain by Australians, presented last month in Amsterdam, calculated from food supply data how much weight we should gain. If the weight gain matched the prediction it would be entirely due to caloric intake, not inactivity.

They found that for children the facts matched the prediction, meaning that childhood obesity is entirely due to eating more. But exercise can still counteract the effect of overeating. Adults

Five classes of drugs lower blood pressure: beta blockers, ACE inhibitors, ARBs, calcium channel blockers, and diuretics. A review of past trials, led by Dr. James Elliott of Rush Medical College in Chicago, found that all but ARBs prevented heart events and all were effective in preventing stroke.

A broader review done in the UK concluded that all five drug classes lowered the incidence of

weighed less than predicted, meaning we must have increased our physical activity. The researchers suggest that the increased intake is due to successful marketing by the food industry.

Losing weight doesn't require strenuous exercise, according to another study comparing two groups of overweight heart patients. The control group followed a typical cardiac rehab program of walking, biking or rowing three times a week. The other group, walking at lower intensity 45 to 60 minutes five or six days a week, lost twice as much weight and had a greater reduction in insulin resistance and other risk factors.

But another study, reviewing previous trials, found that fitness counts. Participants with low cardiorespiratory fitness, as measured by exercise tolerance, had 70 percent higher risk of death from all causes, and 56 percent higher risk of cardiovascular events, than those with high fitness. ❤️

Blood Pressure Drugs for All?

Information from
theheart.org and
medpagetoday.com

stroke and heart events, *even if the patients had normal blood pressure*. Don't measure blood pressure, the authors say, just give blood pressure drugs to everyone at risk for stroke and heart disease.

Dr. Elliott and others disagree. Too many different trials were lumped together. Some patients' blood pressure is already too low. Lifestyle change is safer than drugs. Measure blood pressure, they say, before you treat it. ❤️

Scientists are still trying to come to grips with what they call the “obesity paradox.” People who weigh too much are more likely to have heart attacks, heart failure, sudden cardiac death, and atrial fibrillation. But once they get these conditions, they’re more likely to survive than thinner people. A recent review article by Dr. Carl J. Lavie in the *Journal of the American College of Cardiology* summarized the current state of knowledge of this paradox.

Free radicals are not anarchists at large. Strenuous exercise makes muscle cells create certain “free radicals”—highly reactive oxygen compounds—that can damage tissues and have been linked to the aging process, and it seems logical to take antioxidants, like Vitamins C and E, to deactivate them.

But in an experiment in Jena, Germany, in which forty men exercised regularly for a month, the half who took daily doses of Vitamins C and E did not experience the improvement in insulin sensitivity (which protects against type

Last month the FDA (the federal Food and Drug Administration) sent a letter to General Mills, makers of the breakfast cereal Cheerios, warning that the labeling on the box was in violation of the law.

Statements on the box and on a website claim that Cheerios (ostensibly without any other treatment or lifestyle change) can lower bad cholesterol by a specific

In some conditions their extra weight apparently provides an energy reserve. But for conditions like hypertension and peripheral vascular disease this is an unlikely explanation. Lavie conjectures that the heart disease people get from being obese may be different from the disease thin people get.

All things considered, your chances are better if you maintain normal weight and stay healthy in the first place. ❤️

If diabetes), and the activation of the body’s natural defenses against oxidants, that the control group did. The researchers stress that their results apply only to supplements, not to fruits and vegetables containing these vitamins.

They also warn against taking action based on only one study, but in fact other studies support their conclusions. One published last year, at the University of Valencia, Spain, found that a different antioxidant interfered with useful adaptations to exercise. ❤️

amount in a specific time, and that Cheerios is “clinically proven” to lower cholesterol. These statements go beyond the claims allowed by law for the health benefits of whole grains, and would be permitted only after approval as a new drug.

Cheerios is still safe, nutritious and heart-healthy. The only issue is the labeling. ❤️

Survival of the Fattest

Information from
theheart.org

Antioxidants Inactivate Exercise

Information from
nytimes.com,
webmd.com and
pubmed.gov

Cheerios: an Unapproved Drug?

Information from
medpagetoday.com
and www.fda.gov

President's Message

(Continued from page 2)

For the people that have asked for information about *Uncle John's Bathroom Reader*: I don't think your local library will have them but Barnes & Noble has a good selection. A couple more of his gems, "lemons contain more sugar than

strawberries do" and "60% of all chicken soup sold in the United States is bought during cold and flu season." You just can't fool Uncle John.

*Bill Ryan, President
Mended Hearts
Chapter #179
A.K.A. Dr. Bill*

May Meeting, Riverview



Our featured speaker,
James Hode, RPh

Photo by Martin Brilliant

(Continued from page 5)

Diet should be adjusted for patients taking Coumadin to avoid too much Vitamin K. That doesn't mean foods containing Vitamin K are prohibited, just don't eat a lot of them.

High protein diets can increase clotting. Coumadin binds to protein (albumin) in the blood and when it does it becomes less active. Consuming more protein binds more Coumadin, so the dosage may have to be increased.

Important: limit grapefruit (and grapefruit juice) to about 8 ounces a day. It increases the activity of many drugs, including Coumadin and calcium channel blockers, by interfering with the Cytochrome P450 pathways that eliminate the drugs.

Alcohol, caffeine and other food substances increase the activity of Coumadin. Others, including the hydrocarbons in grilled meats, counteract it. Avoid excess.

Proton pump inhibitors (PPI) reduce stomach acidity and may be prescribed to prevent stomach bleeding due to anticoagulants. Recent research has found that they inactivate Plavix. Plavix itself is inactive; its active form (which reduces clotting by inactivating platelets) is made in the liver through the Cytochrome P450 system. PPIs (especially Prilosec and Nexium) use up the enzymes that activate Plavix.

Many drugs, including anti-fungals and antibiotics, increase or decrease warfarin activity. Your doctors should be told about all the drugs you're taking. Stay away from alternative medicine products because they're untested and their effects are not predictable.

We got a lot of information, a better understanding of interactions, more detail than described here, and a comprehensive handout to keep and refer to. ❤️



The Mended Hearts, Inc.
Hearts of Jersey Chapter #179
NEW MEMBER APPLICATION
 Not for renewals—wait for renewal notice

This is not the approved form. We put the best features of the approved form into our own form. You send us this form, and we fill out the approved form and send it to National.

Membership information: (please print or type)

Name (Mr./Mrs./Ms.) _____ Phone () _____
 FOR FAMILY MEMBERSHIP — other member (one only): Alt Phone () _____
 (Mr./Mrs./Ms.) _____ Email: _____
 Address _____ Preferred Contact: Phone Email Mail
 _____ Would like to visit patients
 City _____ State _____ ZIP _____ Help with other activities
 Preferred meeting time: Day Evening Place: JSUMC, Neptune OMC, Brick RMC, Red Bank

Medical/Demographic Information: (Optional—no application is denied based on information below)

YOURSELF	THE OTHER MEMBER
Date of Birth _____ Retired <input type="checkbox"/> Yes <input type="checkbox"/> No	Date of Birth _____ Retired <input type="checkbox"/> Yes <input type="checkbox"/> No
Vocation _____	Vocation _____
Interests _____	Interests _____
Are you a: <input type="checkbox"/> Physician <input type="checkbox"/> RN <input type="checkbox"/> Health Admin	Are you a: <input type="checkbox"/> Physician <input type="checkbox"/> RN <input type="checkbox"/> Health Admin
<input type="checkbox"/> Other health professional <input type="checkbox"/> Caregiver (not professional)	<input type="checkbox"/> Other health professional <input type="checkbox"/> Caregiver (not professional)
Heart patient? Date of Surgery/Treatment _____	Heart patient? Date of Surgery/Treatment _____
Please enter one date (month/day/year) and initial here _____ to let us list your name and dates on page 2.	Please enter one date (month/day/year) and initial here _____ to let us list your name and dates on page 2.
<input type="checkbox"/> PTCA <input type="checkbox"/> Atrial Septal Defect VALVE:	<input type="checkbox"/> PTCA <input type="checkbox"/> Atrial Septal Defect VALVE:
<input type="checkbox"/> MI <input type="checkbox"/> Pacemaker <input type="checkbox"/> Aortic	<input type="checkbox"/> MI <input type="checkbox"/> Pacemaker <input type="checkbox"/> Aortic
<input type="checkbox"/> Aneurysm <input type="checkbox"/> Transplant <input type="checkbox"/> Mitral	<input type="checkbox"/> Aneurysm <input type="checkbox"/> Transplant <input type="checkbox"/> Mitral
<input type="checkbox"/> Bypass (how many _____) <input type="checkbox"/> Other _____ <input type="checkbox"/> Pulmonary	<input type="checkbox"/> Bypass (how many _____) <input type="checkbox"/> Other _____ <input type="checkbox"/> Pulmonary
<input type="checkbox"/> Tricuspid	<input type="checkbox"/> Tricuspid

Membership Dues: includes national dues and \$5.00 annual chapter dues. National membership includes subscription to *Heartbeat* and one insignia pin for an individual or two for a family membership. Chapter membership includes subscription to *The Jersey Heartbeat*. Dues less \$10.00 are tax deductible.

	<u>Annual Dues Payment</u>		<u>National Life Membership</u>	
	First Year	Renewal*	First Year	Renewal*
Individual:	\$ 22.00 <input type="checkbox"/>	\$ 17.00	\$ 155.00 <input type="checkbox"/>	\$ 5.00
Family:	\$ 29.00 <input type="checkbox"/>	\$ 22.00	\$ 215.00 <input type="checkbox"/>	\$ 5.00

Dues Summary:

First Year Dues \$ _____ (check one box in table above)
 Contribution \$ _____ (optional—tax deductible)
TOTAL \$ _____ (enter total here).

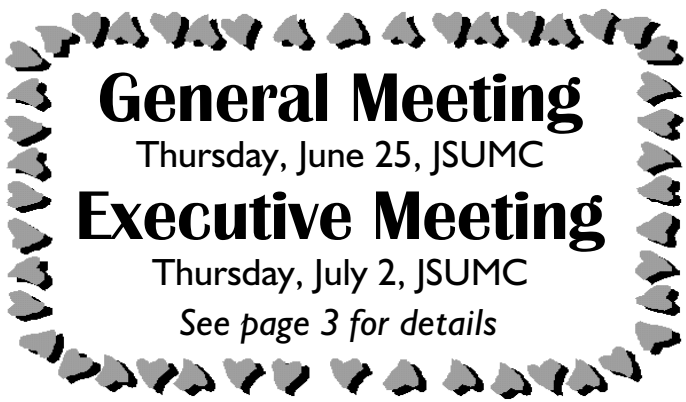
* Current members will receive a renewal notice in the mail from the national office each year three months before the renewal date. National Life Members pay chapter dues annually but will not pay any further national dues.

Please write check for the TOTAL to:
The Mended Hearts, Inc.

Send to Chapter Treasurer:

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39 McCampbell Road
Holmdel, NJ 07733-2232

Hearts of Jersey Chapter #179
The Mended Hearts, Inc.
72 Newbury Road
Howell, NJ 07731



General Meeting
Thursday, June 25, JSUMC
Executive Meeting
Thursday, July 2, JSUMC
See page 3 for details

The Mended Hearts

is a support organization consisting of heart patients, their families, health professionals, and other interested persons. The focus of



the organization is members visiting heart patients in hospitals as living examples of survival and recovery.

Not all members visit. Many contribute in other ways. YOU are invited to scan the list of officers and committees and let one of us know how you can help.

Graphic from IMSI Masterclips CD © 1996 IMSI

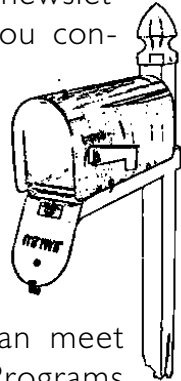
Your Last Issue?

If you are a member, the national office will send you a renewal notice three months in advance of your due date. You will receive the newsletter for a few extra months while you consider renewing.

If we visited you in the hospital, we will send you the newsletter for three months while you recover.

Whether or not you are a member, you and your family are invited to attend our meetings, where you can meet others who share your experience. Programs are selected to be of interest to heart patients.

Members receive this newsletter each month. There is an application form on the opposite side of this page.



Don't throw this copy away!

Please pass it along for someone else to read.

Graphic from a photo by Martin Brilliant