



May 2009 Issue #12

## HDL cholesterol

THE "GOOD" CHOLESTEROL MAY HAVE EVEN MORE BENEFITS

## coffee

GOOD FOR THE HEART?

**PLEASE REMEMBER TO USE OUR MAIN BOOKINGS TELEPHONE NUMBER TO ARRANGE APPOINTMENTS AT OUR MAIN CITY BISHOPSGATE OFFICE: TELEPHONE 0845 4370691.**

## H1N1 flu - latest news

- There are now more than 1000 confirmed cases of swine flu in more than 20 countries. The WHO however has no immediate plans to raise the alert level above phase 5. Phase 5 indicates that there is proven human to human transmission of H1/N1 in more than one country. The main implication of this is that countries and organisations should activate their pandemic plans.
- The Foreign and Commonwealth Office (FCO) is now advising against all but essential travel to Mexico but the WHO is not recommending travel restrictions. Travel restrictions should however be considered at a company and individual level.
- Roodlane will operate "business as usual" and all of our sites and clinics will be running as normal. We will continue to dedicate resource to dealing with questions and clinical queries from our clients and to undertake clinical assessments by telephone and face to face where necessary.
- Following our "Swine Flu- Advice to Clients" on 27th April we have been sending out further updates about the swine flu situation (latest on 5 May). If you have not received these then please contact Hannah.Hawkins@roodlane.co.uk.
- The latest up to date information and advice on safety measures can be found on the HPA website at [www.hpa.gov.uk](http://www.hpa.gov.uk). There is also useful information to be found on the CDC website at [www.cdc.gov](http://www.cdc.gov) and on the WHO website at [www.who.int](http://www.who.int).

## coffee drinkers have improved survival after a heart attack

**A STUDY PUBLISHED IN THE AMERICAN HEART JOURNAL SUGGESTS THAT REGULAR COFFEE DRINKERS SURVIVE LONGER AFTER A HEART ATTACK THAN DO PEOPLE WHO RARELY DRINK THE BEVERAGE.**

Researchers followed 1369 patients hospitalised with a confirmed first heart attack between 1992 and 1994 as part of the Stockholm Heart Epidemiology Program and follow-up lasted almost 10 years. Participants completed a questionnaire while hospitalized, in which they reported how many cups of coffee they normally consumed per day or week over the preceding 12 months.

Coffee intake was not associated with hospital admission for congestive heart failure or stroke, however, and the team could not identify any likely biomarkers linking coffee to lower mortality. Further studies to confirm this hypothesis are recommended by the researchers.

Am Heart J 2009; 157: 495-501



The table shows the reduction in risk for coffee drinkers compared with drinking less than 1 cup of coffee per day:

Coffee Consumption (cups)	Total Mortality Reduced Risk (%)	Cardiac Mortality Reduced Risk (%)
1 - 3	32	27
3 - 5	44	40
5 - 7	47	42
> 7	42	48

# work-stress link to low birth weight

Researchers from University College Dublin, examined statistics on 676 women who were working at the time of their first prenatal visit, and delivered a single baby. The women gave information on their health, income, lifestyle and employment, and this was linked to their medical records relating to pregnancy.

Results showed "significant and strong associations" between high physical work demands such as 40 hours or more a week or shift work and low birth weight (less than 2.5 kg), and between temporary work contracts and premature birth. It was also confirmed that smoking and heavy alcohol consumption led to an increased risk of low birth weight.

One explanation for the premature births could be that working under a temporary work contract causes stress and anxiety due to job insecurity. It is known that physical and psychological stress in pregnant women can lead to adverse birth outcomes.



"I'm afraid your work insurance won't apply, Mrs. Ferguson — you didn't have the baby during office hours."

Niedhammer, I. et al. Occupational predictors of pregnancy outcomes in Irish working women in the Lifeways cohort. BJOG, Published online April 7, 2009.

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# HDL cholesterol inverse relationship with MS disability

## COULD HIGHER LEVELS OF HDL ('GOOD') CHOLESTEROL PROTECT AGAINST DISABILITIES ASSOCIATED WITH MULTIPLE SCLEROSIS?

Preliminary data on the subject intimates that the answer may be – yes.

This finding is based on a study overseen by Dr. Bianca Weinstock-Guttman, M.D., UB associate professor of neurology and director of the JNI's Baird Multiple Sclerosis Centre; presented during the 2009 annual meeting of The American Association of Neurology.

Plasma HDL is a small, spherical, dense lipid-protein complex that is half lipid and half protein. HDL is most commonly known for its reverse cholesterol transport role which transports excess cholesterol from peripheral tissues to the liver. The protein species of HDL are biologically active and have anti-inflammatory properties protective in cardiovascular disease and other chronic inflammatory disorders.

The latest study collected clinical, demographic and HDL data on 186 MS sufferers over 6 year period. 20% of the study participants had low HDL (<40mg/dl or <1.03mmol/l) on entry and went on to perform worse on follow up disability scores as measured by the Disability Severity Scale (EDSS). Based on this small study, it seems that having low HDL cholesterol doubled an individuals risk of disability.

Weinstock-Guttman noted that in her experience adding both statins and omega-3's have preliminarily shown "beneficial effects for MS patients." The researchers agree that further studies on the relationship between HDL levels, disease modifying therapy and MS disease progression are warranted.

Low HDL levels have also been linked to memory loss and depression in other studies.

Various lifestyle and genetic factors are known to contribute to higher HDL levels. Factors such as regular exercise (can increase HDL by 3 to 9 percent); weight maintenance; diet (low in saturated fats and high in omega 3's), moderate alcohol intake and smoking cessation all increase HDL levels.

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