

From The Desk Of

Gina

**Greco-Tartaglia, MD**

## September 2023 Newsletter

### Month #4 of our Personalized Care Adventure!

Hello Everyone,

I hope you are all doing well as the summer comes to a close, and enjoyed your Labor Day!

### Member Portal

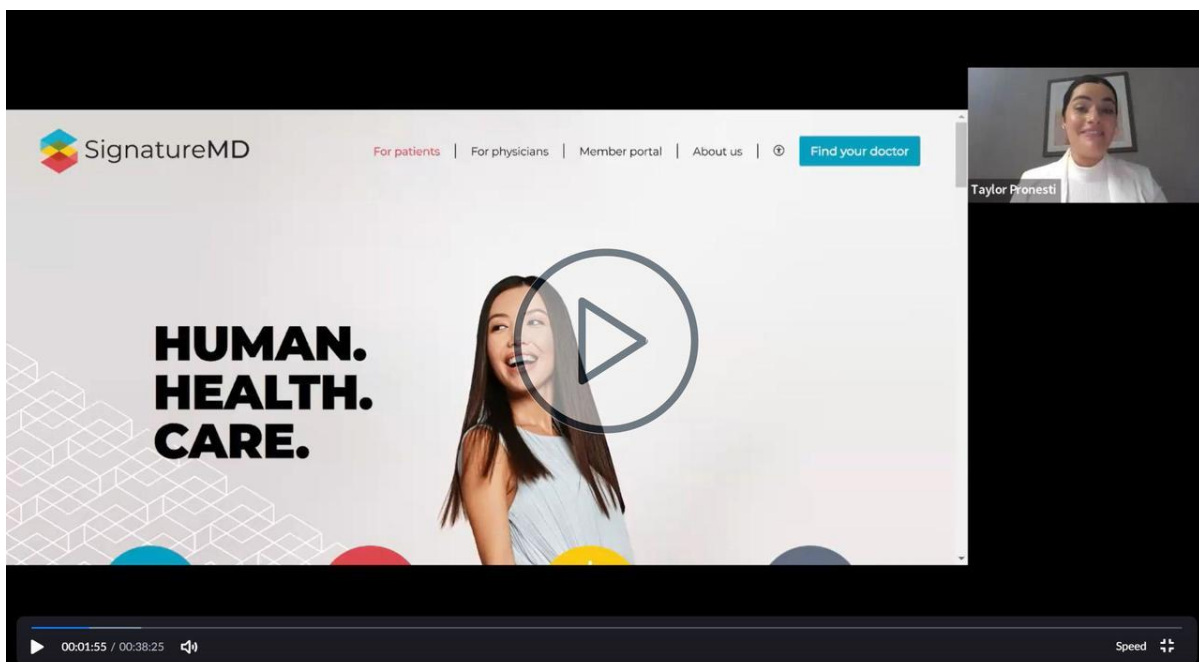
Thank you to all who attended the webinar on August 3rd.

Drop me a line to let me know if anyone has taken advantage of any SMD benefits on the portal

Below is the link to watch the webcast for anyone who missed it and is interested in taking advantage of all your MEMBER PERKS/ discounts, etc.

CLICK [HERE](#) OR THE IMAGE BELOW TO VIEW THE VIDEO.

PASSCODE: **j9qjPlzU**



## Upcoming Events

### Flu Clinic

I typically tell patients to HOLD OFF until October to get the FLU vaccine, as it only confers immunity for about 6 months.

However, if you are above 65 years old, it may be a good idea to get it sooner rather than later, as we have already seen some INFLUENZA in the office.

We always have the “regular flu” shot in the office. If you want the “senior flu shot” feel free to get it at your local pharmacy.

We will be hosting a flu clinic on Saturday, October 7, 2023 from 8 am – Noon. **Please call the office to save your spot!**

### Member Event

Our first member event in July was a BLAST!

We posted some pictures in our August news letter and on my SMD website. Go take a look!

Our next member event is scheduled for **Saturday, NOVEMBER 18, 2023**. We will be celebrating DIABETES AWARENESS MONTH.

Location: TBD

I hope to see a HUGE turn out for this one as we will have plenty of giveaways, pharmaceutical reps with other goodies and lots of information to disseminate!

### Contact information

Remember to use the info on your MEMBER CARDS to contact me via Cell/ Text/ Email.

You also have an OFFICE number that is Private: 914-962-GINA (4462).

*(The original cards had the wrong number. If you need a new card, please let us know).*

## National Health Observance September is Cholesterol Education Month

### Cholesterol Myths and Facts

**Myth: All cholesterol is bad for you.**

**Fact:** Some types of cholesterol are essential for good health. Your body needs cholesterol to perform important jobs, such as making hormones and building cells. Cholesterol travels through the blood on proteins called lipoproteins.

Two types of lipoproteins carry cholesterol throughout the body: low-density lipoprotein (LDL), sometimes called “bad,” cholesterol and high-density lipoprotein (HDL), or “good,” cholesterol.

When your body has too much LDL cholesterol, it can build up in the walls of your blood vessels. This buildup is called plaque.

HDL, or “good” cholesterol, carries cholesterol back to the liver. The liver then flushes it from the body. High levels of HDL cholesterol can lower your risk for heart disease and stroke.

As your blood vessels build up plaque over time, the insides of the vessels narrow. This narrowing can restrict and eventually block blood flow to and from your heart and other organs. When blood flow to the heart is blocked, it can cause [angina](#) (chest pain) or a [heart attack](#).

**Myth: Eating foods with a lot of cholesterol will not make my cholesterol levels go up.**

**Fact:** It can be complicated. We know that foods with a lot of cholesterol usually also have a lot of saturated fat. Saturated fats can make your cholesterol numbers higher, so it’s best to choose foods that are lower in saturated fats. Foods made from animals, including red meat, butter, and cheese, have a lot of saturated fats.

Instead, aim to eat foods with plenty of fiber, such as oatmeal and beans; and healthy unsaturated fats, such as avocados, olive oil, and nuts.

**Myth: I don’t need statins or other medicines for my cholesterol. I can manage my cholesterol with diet and exercise.**

**Fact:** Although many people can achieve good cholesterol levels by making healthy food choices and getting enough physical activity, some people may also need medicines called statins to lower their cholesterol levels. [Guidelines](#) also suggest that other medicines in addition to statins may be needed to help control cholesterol.

People who may need statins or other medicines to manage cholesterol levels include the following:

- **People with FH or people with very high levels of “bad” cholesterol.** FH is a genetic condition that causes very high LDL (“bad”) cholesterol levels beginning at a young age. If left untreated, cholesterol levels will continue to get worse. This greatly raises the risk for heart disease, heart attack, and stroke at a young age.
- **People with cardiovascular disease (CVD).** People with CVD may already have narrowed arteries because of too much plaque. Medicines that lower cholesterol may help reduce the risk for heart attack or stroke.
- **People with diabetes.** [Type 2 diabetes](#) lowers HDL (“good”) cholesterol levels and raises “bad” cholesterol levels. This combination raises your risk of heart disease and stroke.

Other groups of people may also need medicines to manage their cholesterol, including people who have a high risk for CVD. Always talk with your health care team about the best ways to manage your cholesterol.

**Myth: I can’t do anything to change my cholesterol levels.**

**Fact:** You can do many things to improve your cholesterol levels and keep them in a healthy range!

- **Get tested at least every 5 years** (unless told otherwise by your doctor).<sup>1</sup> Learn more about [cholesterol screenings](#).
- **Make healthy food choices.** Limit foods high in saturated fats. Choose foods naturally high in fiber and unsaturated fats. Learn more about healthy diets and nutrition at CDC's [Division of Nutrition, Physical Activity, and Obesity website](#).
- **Be active every day.** The *Physical Activity Guidelines for Americans* recommends that adults get 150 to 300 minutes of moderate physical activity each week. Learn more about [physical activity basics and tips](#).
- **Don't smoke or use tobacco products.** Smoking damages your blood vessels, speeds up the [hardening of the arteries](#), and greatly increases your risk for heart disease. If you don't smoke, don't start. If you do smoke, quitting will lower your risk for heart disease. Learn more about tobacco use and ways to quit at CDC's [smoking and tobacco use website](#).
- **Talk with your health care team** about ways to manage your cholesterol; if any medicines are given to you to manage your cholesterol, take them as they are prescribed. Learn more about [medicines to lower cholesterol](#).
- **Know your family history.** If your parents or other immediate family members have high cholesterol, you probably should be tested more often. You could have a condition called [familial hypercholesterolemia](#) (FH).

**Dr. Gina Greco-Tartaglia**

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