

Healing hearts

Markham Stouffville Hospital's Chest Pain Clinic treats the whole person, providing after advice and follow-up

On a visit to her family doctor in early March for an annual physical, Linda Parker never dreamed she was a heartbeat away from sudden death.

When she mentioned experiencing chest pains on and off for the previous six months, the physician referred her to Markham Stouffville Hospital (MSH) for a stress test. The results proved to be highly abnormal; indeed, the artery supplying most of the blood to her heart was almost entirely blocked.

Three days later, Parker was at Southlake Regional Health Centre, the main cardiac facility for York Region, undergoing open-heart surgery — and grateful that the diagnosis and double bypass procedure had happened so promptly.

"I was shocked," says Parker, 50, a part-time administrative assistant, recalling her reaction when doctors told her the blockage in the artery to the left ventricle, if left untreated, could have killed her instantly. "I would have been dead before I hit the floor."

Parker's fortunate visit to MSH's new Chest Pain Clinic is an example of "refocusing cardiac care within our community," says Dr. Joseph Minkowitz, head of cardiology at the hospital.

He recalls arriving at MSH in 1990, fresh out of medical training as a cardiologist, when it first opened. "We were in a corn field," he remembers. The hospital and the community have grown and evolved a great deal since then, he notes, as has the practice of cardiology.

Acute cases, such as heart attacks, are now dealt with in regional tertiary-care centres such as Southlake, which is in Newmarket. This often leaves care "extremely fractured," says Dr. Minkowitz, for those who have chronic and suspected cardiac problems, or who require follow-up. He also points out that community hospitals have a critical role to play, especially given our aging population.

Following its recent expansion, Markham Stouffville Hospital has been a model for community-based cardiac programs and services. Its Enhanced Cardiac Care (ECC) Unit, which opened in April of this year, and the Chest Pain Clinic focus on three types of patients — those who have had heart attacks and require longer-term care, those who have been discharged home from tertiary centres but need follow-up, and those who have cardiac symptoms and merit further diagnosis.

MSH's cardiac program

includes four cardiologists, a team of technicians and technologists and a cardiac nurse practitioner, Sue Feltham — "the constant" of the group, says Dr. Minkowitz — bringing a fresh perspective to caring for heart patients.

"We have a comprehensive, almost holistic, approach, wherein we're not just concentrating on the heart; we're looking at factors that have an impact on patients' futures," he says.

Feltham, who came to the hospital in 2011, sees all of its cardiac patients, triaging those in the Chest Pain Clinic, then reviewing their histories and test results, as well as co-managing patients in the ECC Unit with the cardiologists. Working closely with one another is critical. "It links the program back with the community," she explains.

Patients in the hospital's emergency room who are experiencing chest pain, as well as those referred by family doctors, are promptly booked in for tests in the new diagnostic centre — the first such "fast-track" system of its kind in Ontario, according to Dr. Minkowitz.

In the past, cases such as Parker's, especially as a referral to a cardiologist, "depended on all the cards falling into place," notes Dr. Minkowitz. And, "unless the patient is lucky," he adds, it can take weeks, even months. Not anymore — urgent cases are now flagged immediately at the Chest Pain Clinic. "With our new set-up, we've taken the luck element out of it," he says. "What we have is a system approach."

Turnaround times are usually 24 to 48 hours, says Feltham, and follow-up notes are sent to family physicians "moments after they're written," ensuring a continuum of care.

As part of her job, Feltham counsels Parker and other heart patients in management of risk factors. A big element of cardiac care is prevention and education about lifestyle issues such as smoking cessation, moderate alcohol intake and stress reduction.

Meanwhile, Parker, having had a loud wake-up call to take better care of her heart, is now working on losing 30 pounds. She exercises five days a week and eats healthy foods and has eliminated salt in her diet.

Recovery has been a long process, but she feels much better now. "It's a very scary thing to have happen," Parker says of her brush with death. "I'm glad I was in good hands."

Visit msh.on.ca for information.

THOMAS BOLLMANN



Dr. Joseph Minkowitz, head of cardiology at Markham Stouffville Hospital, helped patient Linda Parker recover after a double bypass that probably saved her life. The Chest Pain Clinic operates a 'fast-track' system for urgent cases, the first of its kind in Ontario.



DAVID STRESSED HE WAS TOO YOUNG FOR HEART FAILURE. NOW HE STRESSES THE NEED FOR NEW BEDS.

It started with a tingling sensation in his arms. Then, David almost passed out in an elevator. Running through Pearson Airport, he couldn't breathe and knew it was serious. Dr. Minkowitz got to the heart of the matter. The doctor persistently investigated beyond these mild symptoms and ultimately discovered a major blockage and recommended a quadruple bypass. David was 45 years old. With outstanding care and support at MSH, he made a full recovery and has returned to his active life. Naturally, his heart is in MSH and he's an enthusiastic supporter of our Buy a Bed campaign. Government does not fund all new equipment and expansion needs at the hospital. And your support has a huge impact on the lives of others. **Buy a Bed. Be a Life Saver.**

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Vital signs

- There are 70,000 heart attacks — 1 every 7 minutes — each year in Canada.
- 500,000 Canadians live with heart failure; 50,000 new patients are diagnosed each year.
- The populations at higher risk of heart disease are smokers, diabetics, people of Southeast Asian descent, and people who have first-degree relatives with premature heart disease.
- Up to 50 per cent of patients with heart failure die within five years of diagnosis.
- 40 per cent of Canadians have high blood cholesterol.
- To maintain heart health, do cardio exercises for 20-30 minutes 3 times a week and eat healthy foods.



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