00:00:12 Ama-Robin
Alafia! My Espresso talk today community. It's Ama-Robin here. This month -

00:00:19 Ama-Robin
I'm greeting you with the term "Alafia" and that means in the Yoruba language, "good health and peace." So, Alafia and Akwaaba! to the Espresso Talk Today show.

00:00:36 Ama-Robin
Welcome to the Espresso Talk today show. And Asante Sana for joining our Black Empowerment podcast show this month.

00:00:46 Ama-Robin
Our podcast show will focus on all different aspects of health and healing, physical health, mental health, emotional health, spiritual health. And we are talking to medical doctors.

00:01:01 Ama-Robin
Some are specialist public health specialist, psychologist and traditional healers. They all have a place in health and healing.

00:01:12 Ama-Robin
Remember, Black health is black empowerment. Today's show focuses on heart health.

00:01:22 Ama-Robin
The Espresso Talk Today team is meeting with Doctor Clyde Yancey. Doctor Yancey is a cardiologist, a researcher, and a scholar, and I'll tell you more about him in just a minute.

00:01:37 Ama-Robin
This was our first meeting with Doctor Yancey, and the Espresso Talk Today team had a lot of questions. Doctor Yancey was so grateful to spend a lot of time answering our questions, and we are bringing these answers to you today.

00:01:53 Ama-Robin
Asante Sana to Doctor Yancey for meeting with us today. And Doctor Yancey also brings a wide range of knowledge and experience to this conversation about cardiology and promoting heart Wellness.

00:02:08 Ama-Robin
Very important. So we're going to tap into as much of that knowledge and experience as time permits.

00:02:16 Ama-Robin
Mel will arrive in just a minute, and then we'll get started. While we wait for my esteemed ETT member, let me tell you a little bit about Doctor Claude Yancey.

00:02:30 Ama-Robin
Dr.Yancy is a cardiologist and professor of medicine, cardiology, and medical social sciences at Northwestern University Feinberg School of Medicine. He has previously served as the President of the American Heart Association and he remains its national spokesman.

00:02:50 Ama-Robin
Doctor Yancey also serves as feistein of diversity and inclusion. He is board certified in both internal medicine and cardiovascular disease and is a board and is a member of the Association of Black Cardiologists.

00:03:07 Ama-Robin
Dr. Yancy's research focuses on heart health, heart transplantation, and ways to prevent heart failure. He's also going to share important information about heart health, and you definitely want to hear that part as well.

00:03:24 Ama-Robin
Now, I did a little extra digging and I found that Doctor Yancey's patients describe him as brilliant, compassionate, an excellent listener, and just an incredible human being. Wow.

00:03:41 Ama-Robin
I mean, wow. We really are lucky and I admit I was not a bit surprised.

00:03:48 Ama-Robin
Mel and I have the exact same experience and assessment of Doctor Yancey and we are privileged to have him join us on the show today. We originally contacted Dr.

00:04:00 Ama-Robin
Yancey to discuss one of the deadliest and most disabling illnesses experienced by African Americans, heart failure. And yes, we did have a really informative discussion about heart failure and other cardiovascular diseases.

00:04:18 Ama-Robin
But Doctor Yancey went far beyond the discussion of heart failure into areas where many doctors simply do not fear to go preventive medicine. Doctor Yancey will discuss the 8 essential steps to heart health.

00:04:35 Ama-Robin
And you definitely want to hear those steps, and I am convinced you're going to want to follow them too. His courage and candor and yes, his compassion were expressed throughout this discussion of some scary diseases like heart failure.

00:04:54 Ama-Robin
But he really did take it. He really went so much farther than that.

00:04:58 Ama-Robin
OK, you know what, I'm going to stop here. You can hear it all for yourself.

00:05:04 Ama-Robin
Mel has just arrived. So sit back, relax, grab an espresso or a cup of tea if that's your preference, and let's get started.

00:05:19 Ama-Robin
Hey, Mel.

00:05:20 Mel Lofton
Hi, Robin, How are you?

00:05:22 Ama-Robin
I'm doing really well. How are you today?

00:05:25 Mel Lofton
I am fantastic.

00:05:27 Ama-Robin

I can see that, and you always are. And as you can see, I am having an espresso with a very special guest.

00:05:35 Ama-Robin
This is Doctor Clyde Yancey, professor and chief of cardiology at Northwestern University Feinberg School of Medicine, among other positions too, that he holds there. And you're going to hear about a lot of that.

00:05:48 Ama-Robin
So I've already introduced Dr. Yancey to the espresso.

00:05:51 Ama-Robin
Talk to the community. But Mel, please let me introduce Doctor Clyde Yancey.

00:05:56 Mel Lofton
Hello Doctor Yancey, He's so happy to meet you.

00:05:59 Dr. Clyde Yancy
Hello, Mel, and hello again Robin. How nice is it to have an opportunity to meet the both of you?

00:06:05 Dr. Clyde Yancy
And you have espresso, I have dark roast. So I'm delighted to have this conversation with you.

00:06:12 Ama-Robin
Thank you. We're so happy that you're with us and welcome to the Espresso Talk Today podcast show and Asante Sana for participating on this show.

00:06:22 Ama-Robin
Thank you for being on the show.

00:06:23 Dr. Clyde Yancy
Oh, nice. Thank you.

00:06:24 Dr. Clyde Yancy
Let's get. Let's get going.

00:06:26 Ama-Robin
OK, we're fortunate to have you here. And let's see, I like to open the show almost almost everything with the quote.

00:06:33 Ama-Robin
And in preparation for this show, I read a statement that you made in an address at the annual meeting of the Heart Failure Society of America in 2019. You said there are real differences in the experience that African Americans have when they suffer heart failure.

00:06:52 Ama-Robin
And that's quite a revealing statement to make. And I wonder if it also applies to cardiovascular disease in general and a stroke.

00:06:58 Ama-Robin
But I'm going to ask you about that in a minute. But that statement does set the tone for today's show.

00:07:05 Dr. Clyde Yancy
So it's so remarkable that you captured that statement because that statement is applicable to heart failure as a specific disease, applicable

to cardiovascular disease, but also it's uniquely applicable to health. And that statement is really anchored on over 25 years of my own investigation, research, observation and writing.

00:07:32 Dr. Clyde Yancy
And so, if you will, you got to the bottom of the funnel very quickly. There were a lot of other data inputs that mattered here, but in the context with which that statement was made, there's been a disease entity about which many of us are aware.

00:07:46 Dr. Clyde Yancy
Many family members for you, for me, particularly in the African American community, have experienced this condition known as heart, known as heart failure. And in a more global sense, when we think about heart disease in particular, we are aware that many of the published data points from all over the world describe a very different experience of health and disease as a function of race or ethnicity, but importantly, not necessarily because of race or ethnicity.

00:08:20 Dr. Clyde Yancy
Let me be clear about that. What I'm suggesting to you is that there are crude descriptors of the patient experience that are approximated into race or ethnicity, being black or non black, being Hispanic, non Hispanic, etcetera.

00:08:38 Dr. Clyde Yancy
But what we have devolved at this point in our understanding of disease is that very little, maybe even zero of the root cause of those differences in disease are uniquely attributable to race. So this gets us to the singular concept that really drives contemporary discussions about race based experiences in health and race based experiences in

medicine.

00:09:11 Dr. Clyde Yancy
That is to say that race is limited to the social construct, that is the life and living experiences that impact one's health and as well or in turn the disease state. But there is very little about race per SE that causes the disease.

00:09:33 Dr. Clyde Yancy
That's step forward because not so long ago the very common statements were were blacks suffer disproportionately from this while blacks have this condition or blacks are at greater risk. We recognized then that that language per SE was using rays as a very crude, indistinct placeholder for something that was more pertinent in understanding the genesis of the disease.

00:10:03 Dr. Clyde Yancy
Now I'll stop my comment here because we need to have a longer discussion about this, but I'll just say that when we think about this history of race based medicine, we can partition that history into the very small amount of health and disease that is related to our individual ancestry. And I say our because I am an African American self-described professional.

00:10:30 Dr. Clyde Yancy
So to the extent that we track our ancestry to African heritage, then there is a small amount of disease that may be associated with African heritage. Beyond that, everything else becomes either a recognized contributor to disease like obesity, diabetes, hypertension, and behaviors like smoking or physical inactivity, or they're related uniquely.

00:10:58 Dr. Clyde Yancy
And this is where the conversations become awkward for some, but uniquely to the inequity in life and living, to the bias in life and living, to the structural systemic barriers to the attributes necessary for health and necessary to avoid disease. And some would approximate all of that to the underlying presence of structural racism, which has been present in the United States now for centuries.

00:11:31 Dr. Clyde Yancy
And it's still evident today that there is some residual effect. There's a lot of argument in this country about this latter concept, and there are those that stridently pushed back.

00:11:42 Dr. Clyde Yancy
But the data speak differently. So that's a long preamble to say that for a variety of reasons, there are differences in the way in which persons that are self-described as African American experience disease and or require health, but those differences are driven by a number of very important complexities.

00:12:05 Mel Lofton
So, so basically you're saying that race and racial stress or racism, those are different factors and and we experiencing them differently. Of course we you know, race is, is the way it it is, but racial stress can be a risk factor for the for heart failure and other diseases like cardiovascular and stroke.

00:12:31 Dr. Clyde Yancy
So, Mel, I like the way you're going with this because it's the latter that not only is the more pertinent discussion, but it's the more actionable discussion. Race is a convenience sample.

00:12:43 Dr. Clyde Yancy
It is a labeling of individuals according to a socially derived model. To think that skin color infers a sameness in biology when one understands that skin color is the amalgam of so many different inputs.

00:13:04 Dr. Clyde Yancy
Meaning to say so much intermarriage. Think about persons that are from the Caribbean.

00:13:09 Dr. Clyde Yancy
Think about persons that are from South America. Think about persons that are from Africa and different regions of the continent of Africa.

00:13:16 Dr. Clyde Yancy
Africa and it's not country, it's the continent. And so you begin to understand that it would be very, very difficult to invoke a certain sameness in biology just because of skin color.

00:13:27 Dr. Clyde Yancy
However, the way in which groups have been treated systemically over the last two centuries changes that narrative. Whether it's the perpetual experience of persons that have a history of having been enslaved living in communities where slavery was deeply infested, if you will, in those communities.

00:13:53 Dr. Clyde Yancy
Whether it's persons whose acculturation included an environment where segregation was active. Whether it's persons in a more recent time era who were living in communities that were disinvested, not invested, but disinvested because of the disproportionate clustering of

certain groups of patients that were patients.

00:14:17 Dr. Clyde Yancy
I'm a physician, people that were not favored by municipalities, by public policy. So it's it's very careful discussion.

00:14:27 Dr. Clyde Yancy
But what we've learned over time is that because of your life and living circumstances and all the things that go into that, economics, access to healthy living, to safe living, education, transportation, all of those things that, if you will, are the floor of life. You understand that some people have a solid foundation of life and some people have a wobbly foundation of life, and that has much more bearing on health than we've ever appreciated.

00:14:59 Dr. Clyde Yancy
I can make this even simpler. Turns out that your zip code now is as important as your genetic code when we're thinking about health and disease.

00:15:08 Ama-Robin
Wow, wow. Can I, we, I know we want to continue on with this this and this is really important, but I think we need to back up a little bit, OK, because maybe we did start at the bottom of the funnel.

00:15:23 Ama-Robin
What is how, what is cardiovascular disease and heart failure is a scary term to hear. Can you explain that to Doctor?

00:15:33 Dr. Clyde Yancy
So let me deconstruct that because both of yours patients are are

necessarily a requirement for us to further expand. So cardiovascular disease continues to be the leading cause of death and death and disability in industrialized countries.

00:15:53 Dr. Clyde Yancy
That is because of our Western lifestyles, which are predominant throughout industrialized countries. So that reflects the convenience of food prepared outside of the home, that reflects the ubiquity of certain lifestyle choices, smoking, physical inactivity.

00:16:18 Dr. Clyde Yancy
It reflects the burden that appears to be not ending of obesity and along with that diabetes. These are characteristics of a Western lifestyle.

00:16:33 Dr. Clyde Yancy
The consequence of that lifestyle then is a predisposition where we like to use in medicine, but from a lay perspective, it means a vulnerability to developing diseases of your blood vessels. I want to be very clear that I said diseases of your blood vessels because that really qualifies the next statement.

00:16:53 Dr. Clyde Yancy
Whether it's heart disease, brain disease, or kidney disease, it all starts with this risk factor burden with a slight upload from your genetic ancestry. But it starts with this risk factor burden that then leads to a greater likelihood of stroke in certain communities, a greater likelihood of heart disease, heart attacks and heart failure.

00:17:21 Dr. Clyde Yancy
The two are not the same and a greater likelihood of chronic kidney

disease. So when you begin to think about this deconstructed view of the burden and understand that it tracks primarily the lifestyle, so much so that we can emphatically state that 80% of cardiovascular disease, regardless of the person, black, white, European, American, doesn't matter, 80% is ostensibly preventable.

00:17:51 Dr. Clyde Yancy
That's how important lifestyle is in this conversation. So then as we move over into the second part of your question that is thinking about heart failure per SE.

00:18:05 Dr. Clyde Yancy
You know, Robin, let me give you a shout out and two thumbs up because you articulated with so many patients now that I see are Fred to articulate heart failure is a scary turn. But I told you you had kidney failure, a bone marrow failure or lung failure.

00:18:27 Dr. Clyde Yancy
You would have this unnerving awareness of your own mortality in the early decades of the recognition of diseases of the heart that led the heart to be weak to not function as well. Failure was the right terminology in part because we had no therapies to make a difference.

00:18:48 Dr. Clyde Yancy
And we still face a burden of heart failure, but a heart burden of heart failure that has been enabled by a robust number of important discoverers. So much so that it is my quest now to share with audiences, particularly public audiences, that everything you think about heart failure, every experience someone in in your family argue you've had with heart failure, everything you read on the Internet when you search for heart failure, take three steps.

00:19:20 Dr. Clyde Yancy
Delete, delete, delete because it doesn't reflect the contemporary context. The contemporary context gives us the definition.

00:19:32 Dr. Clyde Yancy
The heart has a structural change incapable of functioning as you needed to function so that you are comfortable. You can do being for work, but in addition to having a structural change, there's already evidence that the heart is becoming inefficient.

00:19:57 Dr. Clyde Yancy
And there are ways that we can do that. There's simple laboratory tests that can give us that information, things we can do in an old fashioned physical examination.

00:20:04 Dr. Clyde Yancy
I still use one of these. And for your listening audience, I'm holding up my stethoscope that's 20 years old, and it's the same thing I've used throughout my whole career, no matter what technologies I have.

00:20:17 Dr. Clyde Yancy
But I'm getting to a point. We know what the condition is.

00:20:21 Dr. Clyde Yancy
It's an abnormality of the heart that's associated with inefficient function of the heart. But we stop there because the way in which it is experienced by different groups, by women, by persons self describes African Americans, by older persons, is sufficiently nuanced that a contemporary physician or care provider, thinking about an advanced practice nurse, for example, really needs to be facile with all of these

different iterations of the disease process.

00:20:52 Dr. Clyde Yancy
So you're right, it is a scary term. But you can exhale and understand that the fear is no longer at such a heightened level.

00:21:05 Dr. Clyde Yancy
It is a topic of concern, something we need to to respect, but it is not a fatality by definition. We can treat this condition and treat it well.

00:21:16 Mel Lofton
So how do, how do physicians go about identifying that? You said that perhaps there are different ways of determining if a person has heart failure, but some physicians may not be familiar with the the new nuances and the new therapies or the the new diagnostic ways of determining that.

00:21:42 Dr. Clyde Yancy
So Mel, you have moved into a different space. Robin wanted us to talk about things definitionally, if you will, but you're helping us enter into a discussion about implementation.

00:21:58 Dr. Clyde Yancy
How do you actualize this awareness of the nuances of heartfelt? So just like I'm working with the two of you today, you Robin and you Mao to socialize perspectives on Heartfelt with your listeners in a separate domain, me and many other professionals are working in the professional space to socialize these new narratives, to amplify the new discoveries and importantly, to promulgate the new approaches.

00:22:33 Dr. Clyde Yancy

But one of the key considerations, nothing drives a physician's behavior more so than a patient or family members question. And so by having this conversation with you and by allowing you to amplify my voice and let your listeners know if you're experiencing the onset of fatigue different than what you've experienced before.

00:23:00 Dr. Clyde Yancy
If you're experiencing frank shortness of breath. If you see that your ankles are getting puffy, If you understand that you've got a persistent cough and you don't feel like you have a fever or a cold.

00:23:13 Dr. Clyde Yancy
These are symptoms that are not due to old age or just being lazy and tired. You should be functional well into your later years.

00:23:25 Dr. Clyde Yancy
And once you begin to see I'm no longer able to walk a certain distance or I'm getting up in the middle of the night to simply catch my breath. I find that I'm more comfortable sleeping upright in the chair because when I get in bed and fully reclined, I'm not breathing well, not breathing well under any circumstance.

00:23:44 Dr. Clyde Yancy
Now let me be very clear, not breathing well under any circumstance, whether it's exercise or your position in space that is being lying or sitting, that's an issue. You don't just ride that out.

00:23:57 Dr. Clyde Yancy
It doesn't just go away if you're not breathing well. That's the moment that you don't search the Internet, you don't get on the computer, you get on the phone or you get in the car and you talk to a professional

because there are many reasons why you might not be breathing well.

00:24:12 Dr. Clyde Yancy
But one of those is cardiac. And even the cardiac causes are not always heart failure per SE, but it could be attributable to an irregular heart rhythm or it could be a triple attributable to blood vessel disease around the heart.

00:24:28 Dr. Clyde Yancy
But don't be your own diagnostician. Don't do that.

00:24:31 Mel Lofton
OK. So if you're experiencing those those things that you just mentioned, should you know this is a risk factor for possible heart failure and people should go in and see their physician about that?

00:24:44 Dr. Clyde Yancy
Mel, you just you, you're so prescient today because the risk factors how to all get started. There's no mystery here.

00:24:53 Dr. Clyde Yancy
There's a trioca, diabesity, obesity, diabetes and hypertension. I'm getting so excited talking to you because you're raising such a good question.

00:25:05 Dr. Clyde Yancy
So I try to say diabetes and obesity in the same word, but diabetes, obesity and hypertension, you know, if you've got those three things going on, that is not a mystery. If you've got those three things going on and you're older age and you start having shortness of breath, I mean that's the flashing yellow light, talk to someone because there's a

chance that's heart failure.

00:25:29 Dr. Clyde Yancy
And oh, by the way, and this gets back to the opening comment, Robin, that same Trioka I just described, particularly when it's associated with shortness of breath, that awareness happens typically 15 years earlier in self-described black patients than non black patients. 15 years earlier, typically happens in the mid 40s to early 50s.

00:25:55 Dr. Clyde Yancy
Well, for everyone else, it happens in the late 60s and early 70s. Think about that.

00:26:00 Dr. Clyde Yancy
Earlier onset, more symptoms, a very compelling circumstance. And unfortunately, the epidemiology that we have tells us that part of that nuance difference is not just in the social circumstance, it's not just in the life and living, not just even an age of onset.

00:26:20 Dr. Clyde Yancy
It's an outcomes Robin, meaning hospitalizations are more frequently and self-described black patients due to heart failure. And unfortunately there appears to be still a signal of more deaths.

00:26:34 Dr. Clyde Yancy
I say that very carefully because there's so many qualifiers on that kind of information. Just the ascertainment of race from medical workers can be very challenging.

00:26:45 Dr. Clyde Yancy
But the data appear to suggest that for certain, hospitalizations are

happening more frequently. And if it's also a risk of death, that's a concern.

00:26:55 Ama-Robin
And you mentioned some, excuse me, ML some qualifiers. You say that.

00:26:59 Ama-Robin
You say this hesitantly because there are some qualifiers. What qualifiers would you would you say?

00:27:04 Dr. Clyde Yancy
So very good question, quite insightful. I love that both of you were ready to speak right away.

00:27:08 Dr. Clyde Yancy
Because anatomies, I've got your attention.

00:27:11 Mel Lofton
Oh, you have?

00:27:12 Dr. Clyde Yancy
But the the qualifiers that are so critically important are first, what are the concomitant other illnesses, Robin, very few people show up with just one condition. They almost always show up with a heart condition and oh, by the way, a kidney condition and oh, by the way, high blood pressure.

00:27:32 Dr. Clyde Yancy
So trying to deconstruct what's really driving the outcome of concern or conversely, understanding the synergy, unfortunately, of progressive renal disease, heart disease, hypertension, all of these I think have to be

carefully addressed when we're trying to sign cause for something like death. And so we must, we must keep this in mind.

00:28:01 Dr. Clyde Yancy
And I would be remiss, terribly remiss, if I didn't put in the same discussion not only the several other associated illnesses, the word I use as concomitant, but also make clear that access to care continues to be a troublesome issue. And it's not access to care like most people would define it.

00:28:25 Dr. Clyde Yancy
I'm pleased that most people in this country can present to a hospital and receive urgent care as indicated. But what concerns me about access to care is that we have a number of people who receive less care.

00:28:43 Dr. Clyde Yancy
They have access to care. But in totality, what they receive is less care.

00:28:51 Dr. Clyde Yancy
And it's that longitudinal care, it's that ambulatory care, it's walking in the doctor's office. It is, and this is the keyword, Robin.

00:28:58 Dr. Clyde Yancy
It is that pre emptive care that thwarts disease. It is that care that helps control the blood pressure, that helps manage the obesity, that helps control the diabetes, that helps facilitate the cessation of smoking, that is that under care experience we were.

00:29:19 Dr. Clyde Yancy
But yes, we have access to care and I applaud that. But many people

are in this under care, not quite robust enough for it to, if you will, change the arc of disease and that's important.

00:29:36 Ama-Robin
Wow, I haven't heard that term before, but under care.

00:29:40 Dr. Clyde Yancy
So yes, you can. You can put it in the context of do you receive adequate care.

00:29:45 Dr. Clyde Yancy
If you are well insured and you're making all of your well woman visits and you're having occasional examinations, some would call them annual physicals. I'm not sure that needs to happen on a yearly basis.

00:29:57 Dr. Clyde Yancy
We might call that adequate care. What I'm suggesting to you, Robin, is that not in a very visible way, but they're or innumerable patients on a large scale that instead of receiving adequate care are receiving something that is inadequate under care.

00:30:17 Ama-Robin
And so most of them are not getting the pre emptive care but they have access. If they come in, come in presenting symptoms, then they'll be treated.

00:30:27 Dr. Clyde Yancy
So let me give you just a blatant example.

00:30:29 Ama-Robin
OK.

00:30:30 Dr. Clyde Yancy
No one in this country with symptoms of stroke will be turned away in a in a United States hospital. Your stroke will be treated and hopefully treated in a way that we can mitigate the consequences of stroke.

00:30:45 Dr. Clyde Yancy
Medicine has come so far and we can do that. But many patients with hypertension and major risk factor for stroke don't receive the adequate pre emptive care, helping that patient manage the blood pressure assiduously, getting to a threshold of blood pressure control where the stroke risk is decreased.

00:31:04 Dr. Clyde Yancy
So think about the scenario I've just said for that urgent crisis care. Yes, you have access to care, let's applaud.

00:31:11 Dr. Clyde Yancy
But for the really important care, the cure that prevents ever having to present with the acute stroke, that's where this under care or inadequate care or lesser care use a synonym you enjoy most. But it's still the same phenomenon.

00:31:30 Dr. Clyde Yancy
We have a scenario where some people just don't get idealized care, optimal care to prevent disease. And that's not just for the stroke now, that's for the heart attack.

00:31:42 Dr. Clyde Yancy
That's for the onset of heart failure. Because let me just say, when a patient presents to the hospital with heart failure, that's what that is

scary.

00:31:50 Dr. Clyde Yancy
You used that word before. That is scary because you really can't breathe.

00:31:54 Dr. Clyde Yancy
You're in a hospital. And we know now with such great clarity, if you are hospitalized with heart failure, that is your symptoms are so profound that you require hospitalization.

00:32:07 Dr. Clyde Yancy
That, unfortunately, is a negative pivot in your life that changes your life expectancy, that changes your quality of living.

00:32:20 Mel Lofton
Well, what can a person do? I mean, are, are we supposed to monitor our bodies in the sense that we recognize these symptoms that you're talking about or these issues of inability to do this, to walk distances, things like you were talking about?

00:32:38 Dr. Clyde Yancy
South Mel, this is great. You've just given me the Segway that I hoped you would give us.

00:32:43 Dr. Clyde Yancy
OK? Because anyone listening to this, and I'm delighted that you've got a legacy.

00:32:47 Dr. Clyde Yancy
Now you have an audience and they're engaged with these kinds of

deeper conversations. So for the listeners, I'm speaking to you.

00:32:55 Dr. Clyde Yancy
These are the steps that you can take of your own volition to preserve your health. Don't smoke, be physically active.

00:33:05 Dr. Clyde Yancy
I'm not suggesting you have to join a gym or buy spandex, just be physically active. Walking in particular very important.

00:33:13 Dr. Clyde Yancy
Know your weight and make certain your weight is appropriate for your height. Not everybody needs to weigh the same but let me just be very clear.

00:33:28 Dr. Clyde Yancy
Any woman less than £200 or more you are obese. There is no height other than about 6 foot 8 inches which allows 200 lbs to be a normal weight for a woman.

00:33:36 Dr. Clyde Yancy
You are obese, medical obese, and I'm sure you're very attractive, but you are obese and you need to think about losing your weight and then follow a heart healthy diet. Don't think about the no's in your diet, think about the yes's.

00:33:50 Dr. Clyde Yancy
Enjoy fruits, enjoy vegetables, enjoy lean red meat, enjoy fish, enjoy chicken. If it is your preference to opt for a plant based diet, please do so.

00:34:03 Dr. Clyde Yancy
That's very healthy. If it's your preference to be a vegetarian, please do so.

00:34:08 Dr. Clyde Yancy
Think about the healthy fats. Think about olive oil.

00:34:11 Dr. Clyde Yancy
Think about nuts. Think about beans.

00:34:13 Dr. Clyde Yancy
Listen to the way that I positioned this. Think about the yeses, not the Nos.

00:34:19 Dr. Clyde Yancy
So you start with those four behaviors, if you will, not smoking, being physically active, knowing your weight, right sizing your weight and then following a heart healthy diet. Now what about other markers about which you should need?

00:34:35 Dr. Clyde Yancy
What about which you should be aware? Know your blood pressure, know your blood sugar, know your blood cholesterol level.

00:34:43 Dr. Clyde Yancy
Let me be incredibly clear to this. I am confident that everyone listening, still talking to the listeners, knows your cell phone number without any hesitation.

00:34:53 Dr. Clyde Yancy
You can recite it in three seconds. Can you do the same thing?

00:34:58 Dr. Clyde Yancy
Can you do the same thing for your cholesterol? Can you do the same thing for your blood sugar?

00:35:00 Dr. Clyde Yancy
You should be able to do that. You should have that kind of self-awareness.

00:35:05 Dr. Clyde Yancy
Socially, we talk about self self-awareness all the time. That's all good.

00:35:09 Dr. Clyde Yancy
But the real self-awareness you need to have are your measures of health. So I've given you 7 things so far.

00:35:14 Dr. Clyde Yancy
I've given you 4 behaviors, smoking, activity, weight and diet. And I've given you 3 markers, blood pressure, cholesterol, blood sugar.

00:35:23 Dr. Clyde Yancy
But here's the critical next variable, sleep. It's so incredibly important.

00:35:32 Dr. Clyde Yancy
Your body recuperates when you sleep, particularly if you get into what's called slow wave sleep. Your body is restored.

00:35:39 Dr. Clyde Yancy
It improves your cognitive function, your level of alertness. It actually helps you with your weight management.

00:35:46 Dr. Clyde Yancy
It improves your metabolism. So I've just given every listener 8 steps was better health.

00:35:54 Dr. Clyde Yancy
I'm a national spokesperson for the American Heart Association and a former president of the American Heart Association 11 years ago. But this is what we call the essential 8.

00:36:04 Dr. Clyde Yancy
If you embrace the essential 8, the closer you get to all 8, the more likely you are to avoid cardiovascular disease. The more likely you are to avoid certain cancers, the more likely you are at a level longer have your healthier life.

00:36:22 Dr. Clyde Yancy
We don't want to sign up for that. Eight things.

00:36:24 Dr. Clyde Yancy
Don't smoke, be active, learn your weight, have a good diet, learn your blood pressure, your cholesterol, your blood sugar, and get some sleep, folks. That's it.

00:36:34 Dr. Clyde Yancy
Now, if we transition from that now, I wanted to be certain and thank you again for the Segway that we were able to articulate to the entire listening audience. What's necessary for you to embrace health?

00:36:45 Dr. Clyde Yancy
And that has no bearing on race or sex or gender or ethnicity. That's just the truth for the human soul.

00:36:52 Dr. Clyde Yancy
OK. But if we're talking about any cardiovascular condition, pay attention to how you feel.

00:37:02 Dr. Clyde Yancy
If you're beginning to vary from a sense of Wellness. Maybe it's your blood pressure, maybe it's heartfelt.

00:37:10 Dr. Clyde Yancy
I hope it's not. Maybe it's atherosclerosis.

00:37:13 Dr. Clyde Yancy
I hope it's not, but don't hesitate to speak up to check. Pay attention to your family history.

00:37:22 Dr. Clyde Yancy
What did your grandparents have? Did they experience heart disease?

00:37:27 Dr. Clyde Yancy
Do your parents have heart disease? If you've got siblings, talk to each other.

00:37:32 Dr. Clyde Yancy
Hey, what's your blood person doing? Anyone ever talked about heart disease?

00:37:35 Dr. Clyde Yancy
If you find that there's a history in your family of strokes or heart attacks, don't think you're the lucky 1. Be proactive.

00:37:46 Dr. Clyde Yancy
Step up and say I want to know. And that first step is painless.

00:37:51 Dr. Clyde Yancy
It's checking the blood pressure. It's checking the cholesterol, it's checking your weight.

00:37:55 Dr. Clyde Yancy
That's the thing to do. And one last thing about weight.

00:37:57 Dr. Clyde Yancy
I know that our time is getting short. Everybody wants to know what's the right diet?

00:38:03 Dr. Clyde Yancy
What's the magic pill? What's the secret?

00:38:06 Dr. Clyde Yancy
There's one secret. It's 1 secret.

00:38:09 Dr. Clyde Yancy
Now, Robin and Melon want you to lean in a little bit so I can tell you the secret. There's only one secret.

00:38:15 Dr. Clyde Yancy
It's portion control. Think about what you eat now.

00:38:20 Dr. Clyde Yancy
Whatever you eat right now. Are you able to eat maybe only 80% of this?

00:38:27 Dr. Clyde Yancy
I'm going to make both of you smile. It's nice that I can see you and get your feedback.

00:38:32 Dr. Clyde Yancy
There's this phenomenon in the world called the Blue Zones. And what's characteristic about the Blue Zones?

00:38:39 Dr. Clyde Yancy
There's five communities in the world. Fine.

00:38:42 Dr. Clyde Yancy
They're the Blue Zones. What's characteristic about those communities is that people typically live into their 90s, even into their hundreds.

00:38:51 Dr. Clyde Yancy
So what are they doing in those five communities? That's not happening in the rest of the world.

00:38:58 Dr. Clyde Yancy
They have these wonderful commonalities without even talking to each other. They just kind of happen upon it.

00:39:03 Dr. Clyde Yancy
But their diets are calorie restricted. They are physically active, but they do one other thing that I think is really impressive.

00:39:12 Dr. Clyde Yancy
They follow the 80% rule. They only eat to 80% satiety.

00:39:17 Dr. Clyde Yancy

They're never that Thanksgiving Day full. And you know what I'm talking about now, They're never that Thanksgiving Day full.

00:39:24 Dr. Clyde Yancy
They eat to 80% of their satiety, meaning feeling full. But there are two other things they do that I think are so precious.

00:39:35 Dr. Clyde Yancy
And I do mean to use that word precious. They're in social networks where they have the spirit of being able to collaborate, having a knowingness of others.

00:39:46 Dr. Clyde Yancy
It could be friends, it could be family, and they're able to understand their value in life. So if you have a sense that your life is valuable to somebody else because of who you are, what you do, and you're in a network of people that are supportive, those are secrets to longevity and you do everything else we talked about.

00:40:08 Dr. Clyde Yancy
You'll live a good life and it will all be a better place.

00:40:13 Mel Lofton
Suppose someone in our audience or others, Benny in our audience have already have these issues, they're already overweight, they, you know, are not sleeping correctly and all these. Is it possible to reverse that and and get back on a good plane?

00:40:31 Dr. Clyde Yancy
Mel, I don't know how you've done this, but somehow or another you've immersed yourself into my reference library, my e-mail inbox, or my

whole assortment of prior presentations that are all evidence based by the way the data are this. Regardless of your current age or burden of risk thinking about obesity, diabetes, hypertension, there is no point in time where you can't change your health.

00:41:00 Dr. Clyde Yancy
You can always change your health and reap a benefit fund. So if that stuff's already embedded, that's your reality, fine.

00:41:08 Dr. Clyde Yancy
But you can make an effort beginning this day, going forward, to lose the weight, to stop smoking, to control your blood pressure. For every kilogram of weight loss that's 2.2 lbs mile, your blood pressure goes down by a point.

00:41:23 Dr. Clyde Yancy
OK, now if you get 10 kilograms of weight loss, no matter what weight you're starting, your blood pressure goes down by 10 points. That's enough to change your burden of disease.

00:41:32 Dr. Clyde Yancy
And you do that all on your own by changing your behavior. And here's another thing, Robin, in the beginning we, we talked about the different partitions of what determines disease as a function of race.

00:41:43 Dr. Clyde Yancy
And I said there's a small amount that might be attributable to your genetics. self-described black persons are African Americans attributable to African ancestors.

00:41:53 Dr. Clyde Yancy

But everybody has a genetic history. We understand this, that even when you are genetically predisposed to have heart disease, guess what, a heart healthy lifestyle, even in a setting of genetic risk dramatically lowers your burden of disease.

00:42:10 Dr. Clyde Yancy
So it's not a fail complete that because you have a genetic risk, you'll have the disease, but it's a higher bar. It's an imperative to adopt these lifestyle circumstances.

00:42:21 Dr. Clyde Yancy
So I love that you're thinking about this, Robert, because I hope that I'm giving you some almost disruptive thoughts that you've not had before. And by the way, I got 3 more minutes with you.

00:42:31 Dr. Clyde Yancy
So what's your question?

00:42:33 Ama-Robin
OK, yeah, there is one thing, one thing you didn't didn't mention. I was trying to find that one thing.

00:42:38 Ama-Robin
What about controlling stress?

00:42:41 Dr. Clyde Yancy
Perfect question. Perfect question.

00:42:44 Dr. Clyde Yancy
We have evidence now. The stress is not just some kind of vaporish thing where I feel stressed today.

00:42:50 Dr. Clyde Yancy
We understand stress is biological. We understand the stress is manifest as a signal of inflammation.

00:43:00 Dr. Clyde Yancy
To help you understand what inflammation is, if you or I get an insect bite, that area of redness on your skin, around the bite, that area of skin is inflamed. Inflammation in your body is not a good thing.

00:43:11 Dr. Clyde Yancy
And imagine what happens when the inflammation is systemic throughout your vessels, throughout your cardiovascular system. That has a bearing on disease.

00:43:22 Dr. Clyde Yancy
So now we're closing with where we started. What is it about a life and living circumstance that predisposes to more disease?

00:43:30 Dr. Clyde Yancy
What is it about living in a community where there's been disinvestment? What is it when you have housing density that's not ideal, when you don't have good employment opportunities, when you don't have good educational opportunities, don't have good transportation opportunities, don't have free spaces where you can roam and be physically active outdoors in a Safeway?

00:43:49 Dr. Clyde Yancy
All of that, Robin, engenders stress, and that stress becomes manifest as blood vessel thickening, as an increase in blood pressure, as inflammation, which starts a cascade of events that leads to the early

onset of disease. And I meant to say early onset.

00:44:08 Dr. Clyde Yancy
You know what I meant to say that, Robin? Because this starts in children.

00:44:14 Ama-Robin
In children from what age 10 clip or five younger.

00:44:18 Dr. Clyde Yancy
Younger, we call them adverse childhood experiences and when children experience adverse childhood experiences, single parent home abuse, when substance abuse, alcoholism, when children are in that environment. Each of those singular adverse childhood experiences, we call them Aces, starts this cascade of stress and it has a manifestation on their biology so that by the time they are early aged adults, some of these risk factors are already set in place.

00:44:54 Dr. Clyde Yancy
This is going to Floyd Robin, but think about the young black women you might know who are thirtyish. 1/3 of them already have high blood pressure.

00:45:04 Dr. Clyde Yancy
I probably haven't had that blood pressure checked unless it's been pregnancy related.

00:45:10 Ama-Robin
At 31. Third.

00:45:13 Ama-Robin

Wow. Oh my goodness.

00:45:15 Ama-Robin
Yeah, the 11 other thing too. You did bring up about alcoholism.

00:45:19 Ama-Robin
What about alcohol use in general?

00:45:23 Dr. Clyde Yancy
Oh, I've got to come clean and tell you that I love red wine and there's not an evening that goes by, including last evening, where I don't have at least 1/2 glass of red wine with my dinner at night or because I just enjoy it and I'm hoping that there really is. Modest is probably the correct way to calibrate that.

00:45:46 Dr. Clyde Yancy
And it's too easy to go pass one glass, but that's a softer sort of conversation. If you enjoy wine like I do, there may be a modest health benefit.

00:45:56 Dr. Clyde Yancy
If you don't drink, don't start drinking just so you can get a modest benefit anyway in the last minute. Mel, it's been so fun engaging with you and I love that you've been in lockstep with the way I think.

00:46:08 Dr. Clyde Yancy
So let me give you the final opportunity. What's the one space we haven't covered that you'd like for me to cover?

00:46:15 Mel Lofton
Well, one of the things I'd like for you to tell our audience is, you know

what, what would you, of all the things that you talked about, what's the one or two things that you would want them to take away? That's really critical and important.

00:46:31 Mel Lofton
And one other thing too. How much sleep is enough sleep?

00:46:34 Mel Lofton
Oh yeah.

00:46:35 Dr. Clyde Yancy
So for a general audience, I'll say this to really truncate it. Do more, be physically active, eat less.

00:46:46 Dr. Clyde Yancy
Everybody can stand to lose some weight. Know your numbers, your blood pressure in particular, and your hours of sleep at night.

00:46:56 Dr. Clyde Yancy
For an adult, that's probably 7 hours. Shoulder need more sleep.

00:47:02 Dr. Clyde Yancy
Older persons typically need more sleep, but in the big metal it's probably 7 hours, but no less than six hours. Know your numbers and get enough sleep.

00:47:17 Dr. Clyde Yancy
Yay. So Robin, I have to go and refill my dark ruffs.

00:47:21 Ama-Robin
OK, very.

00:47:22 Dr. Clyde Yancy
Much for this opportunity to visit with you, Yeah.

00:47:25 Mel Lofton
I'm at the end of my tea also.

00:47:28 Ama-Robin
Yeah, I'm probably gonna go for a double, but yeah, thank you so much. Really.

00:47:32 Ama-Robin
Asante sana, Dr. Doctor.

00:47:35 Ama-Robin
Oh, my gosh, Yancy. I'm tired.

00:47:37 Ama-Robin
This. This.

00:47:37 Mel Lofton
Is amazing.

00:47:39 Ama-Robin
Yeah, this, I'm just floored by so much of this. Yeah, and this has been very, very helpful, Very helpful.

00:47:45 Ama-Robin
Really appreciate it. Great talking to a doctor.

00:47:48 Ama-Robin

I did want to ask you about the A1C numbers and about cortisol, but you have to go, so I won't do that.

00:47:53 Dr. Clyde Yancy
Oh, I I can tell you very quickly, you really want an A1C less than 7 if you have diabetes, closer to six, but not less than six. Particularly if you achieve that with medical therapies.

00:48:05 Dr. Clyde Yancy
There may be some risk there and cortisol probably is one of the mediators of this whole phenomenon of stress. Again, getting from kind of the experiential understanding of stress, I feel stressed out to the biological expression of stress amongst the many mediators and there are a number that have been identified.

00:48:24 Dr. Clyde Yancy
Cortisol is in that bucket.

00:48:26 Ama-Robin
OK, OK. So know that number then too and all, right?

00:48:30 Dr. Clyde Yancy
No, not know that number. Know that risk, that risk.

00:48:34 Dr. Clyde Yancy
Understand that when you feel stressed, it's not just that you feel stressed, it's that your body is stressing and then process. So stressing is elaborate audience that can't relate with that one word hormones.

00:48:51 Dr. Clyde Yancy
While the hormones do more than control your bodies and have you

feel as a woman should feel and have me because of testosterone feel as a man should feel. We all are familiar with hormones, but we don't extend that familiarity to a whole nother suite SUITE of hormones that impact our health with cortisol being just one of those.

00:49:18 Dr. Clyde Yancy
So you've got a bonus question in Robin I caught that I appreciate.

00:49:23 Ama-Robin
That yes all.

00:49:25 Dr. Clyde Yancy
Right. Listen, I really want you guys to have a wonderful.

00:49:28 Mel Lofton
Day, this has been very helpful. Thank you.

00:49:30 Mel Lofton
Really appreciate it.

00:49:31 Ama-Robin
Thank you. Bye.

00:49:33 Mel Lofton
Bye.

00:49:37 Ama-Robin
Well, this ends today's discussion with Doctor Clyde. DNC Alethia Espresso talk today.

00:49:43 Ama-Robin

Community. It's Alma Robin again.

00:49:47 Ama-Robin
1st, I want to begin by saying a big asantesana to Doctor Clancy for giving us his time and his energy and his expertise about this important, important issue. Thank you so much, Doctor Clancy.

00:50:02 Ama-Robin
I was thinking that we really should call this a Black empowerment discussion because as I said earlier, Black health is Black empowerment and Doctor Yancey gave us tools and knowledge that can empower us to work towards optimal health. Let's just recap a few points.

00:50:25 Ama-Robin
Doctor Yancey noted that, and this is a quote, heart failure is a topic of concern, something we need to respect, but it is not a fatality. By definition, we can't treat this condition and we can treat it well.

00:50:41 Ama-Robin
End Quote. That's great news, but we still need to take certain symptoms very seriously and see a doctor.

00:50:51 Ama-Robin
What are those symptoms? Doctor Ganci said that, but I'm going to repeat them here.

00:50:54 Ama-Robin
Let's listen up. Fatigue, The onset of fatigue that's different from what you normally experience #2 shortness of breath #3 persistent cough without a fever or cold, and #4 swollen ankles.

00:51:14 Ama-Robin
Pay close attention to these symptoms. Don't just write them out.

00:51:18 Ama-Robin
Don't get on the Internet and look there. Don't be your own diagnostician.

00:51:22 Ama-Robin
Don't try to diagnose yourself. See your doctor.

00:51:26 Ama-Robin
You might not have heart failure. There might be some other reason.

00:51:31 Ama-Robin
There might be something else on the horizon. There might be nothing.

00:51:34 Ama-Robin
But see your doctor as soon as possible. Doctor Yancey also discussed 3 risk factors for cardiovascular disease.

00:51:43 Ama-Robin
3 risk factors. Do you remember them?

00:51:46 Ama-Robin
Mel asked about them and I'm so glad she did because these factors are really prevalent in the black community and actually they're prevalent throughout Western society, as Doctor Yancey mentioned at the beginning of the show. What are those three factors #1 obesity #2 diabetes #3 hypertension, obesity, diabetes, hypertension.

00:52:16 Ama-Robin

So if you have one or more of these risk factors or you start having symptoms, shortness of breath, swollen ankles, persistent cough, unusual fatigue, see your doctor right away. No need to wait.

00:52:30 Ama-Robin
And if you're a black, these symptoms can appear 15 years earlier than they appear in white people. For black people, the onset can appear in the mid 40s or the OR the early 50s.

00:52:47 Ama-Robin
Doctor Yancey described heart failure as a very nuanced illness. It's not a one-size-fits-all disease and every treatment will not fit everyone.

00:52:57 Ama-Robin
African Americans, older people, younger people, women, each will have a different experience with the illness and a contemporary physician will need to know the different presentation of the illness. Remember Doctor Yanchi's words about heart failure?

00:53:16 Ama-Robin
We can treat this condition and we can treat it well. That is a quote.

00:53:21 Ama-Robin
We can treat this condition and we can treat it well, but you have to go to a doctor. You cannot treat this illness yourself.

00:53:28 Ama-Robin
And this really is great news. But remember those symptoms, Fatigue, shortness of breath, persisting cough, swollen ankles.

00:53:37 Ama-Robin

Also remember that Doctor Yancey is a cardiologist, former president of the American Heart Association and national spokesman for the American Heart Association. So if he says this is what you need to do for heart health, then this really is what you need to do.

00:53:55 Ama-Robin
He also says that these symptoms, these steps can help you to avoid certain cancer, cancers and to live longer, live happier lives and live healthier lives. That's what we all want, right?

00:54:08 Ama-Robin
Darting Auntie says that you need to do these eight essential steps for optimal health. 8 steps.

00:54:16 Ama-Robin
Here they are. Don't smoke #2 be active #3 maintain a healthy weight #4 eat a healthy diet #5 maintain good blood pressure #6 maintain good cholesterol #7 have the right level of blood sugar and #8 get enough sleep.

00:54:45 Ama-Robin
That's it. That is what's necessary for optimum health.

00:54:50 Ama-Robin
Some of these we are a bit more difficult than others for certain people. We all have our challenges, but this just means that we need to work a little bit harder in certain areas.

00:55:00 Ama-Robin
Does your health really kept depend on it? Finally, and this is really important, Doctor Yancy discussed 1 issue that is not often discussed by

doctors.

00:55:12 Ama-Robin
Many people, particularly black people, are receiving inadequate medical care, meaning that we receive less care than our risk factors or our symptoms require. This is called under care.

00:55:29 Ama-Robin
Under care. I had never heard that term before this discussion, but I can absolutely see how it affects Black health.

00:55:37 Ama-Robin
Under care is an issue even when people have full access to health care. But under care ignores or fails to address symptoms, risk factors, or lifestyle issues before they can turn into disease.

00:55:55 Ama-Robin
You know, I think that under care could also involve other forms of under treatment, such as failing to prescribe proper medication for pain, downplaying treatments like physical therapy that can help people live more independently, delaying doctor's appointments or surgeries, or failing to recognize and address mental health issues. Many doctors also failed to discuss with their patients their range of treatment options.

00:56:28 Ama-Robin
These are all under care and they can have a negative effect on our health. I am so happy that Doctor Yancey addressed the issue of under care.

00:56:41 Ama-Robin

Just because you may have access to health care does not always mean that you're receiving the appropriate level of care. So let's take the issue of under care very seriously, especially as Black folks and pursue the health care that is right for you.

00:57:00 Ama-Robin
Again, I want to say a big asantesana to Doctor Clyde Yancey for sharing his valuable time with us to discuss cardiovascular disease and heart health. And I say asantesana to Mel and to you, my community for being in the building with me to day.

00:57:20 Ama-Robin
We are so grateful for your support. You really are the reason that we do what we do every single day.

00:57:28 Ama-Robin
Doctor Yancey has taught us a lot today and as Maya Angelou once said, when you know better, you can do better. With this information, we can help ourselves and help each other to take the steps to live longer, healthier and happier lives.

00:57:47 Ama-Robin
We all can do better. Black health is Black empowerment.

00:57:54 Ama-Robin
We hope that you are feeling that empowerment and sharing it as well. We are a community and we can work together.

00:58:02 Ama-Robin
This is the end of our show with Doctor Clyde Yancey. If you have any questions, please feel free to reach out to me at

team@espressotalktoday.com or on Instagram at AMA.

00:58:15 Ama-Robin
Robin L. That's the letter.

00:58:16 Ama-Robin
Li also encourage you to check out the website of the Association of Black Cardiologists. They have great health related information and a directory so that you can find a trusted black cardiologist in your area.

00:58:35 Ama-Robin
And also of course check out the American Heart Association website. They also have great information and they can help you find a doctor too.

00:58:43 Ama-Robin
You can find all this information and links on these organizations. This important the important risk factors we talked about earlier and those never ignore symptoms on the Habari page of the Espresso Talk Today website espressotalktoday.com.

00:59:00 Ama-Robin
You'll also find this information on my Instagram page at AMA Robin L. There's a lot of information in both places because we really wanted to make it easy for you to find it and to use it.

00:59:12 Ama-Robin
I'm Ama-Robin for the Espresso Talk Today podcast show and remember now more than ever, strength, soul and reparations. Ashe Community.