

# Cardio Vascular Testing

*By Dr. Jeanette Gallagher ND*

As the No. 1 killer of men and women, cardiovascular disease takes a life nearly every minute of every day, according to the American Heart Association.

And, in any given year, approximately 20 million people suffered from some form of heart disease according to the group. But how can one know they are in the midst of a serious heart-related medical problem? Varied types of heart tests now proliferate, but do they all bring the same result?

As it is in life, it is in medicine – what you present with and what you ask for is what you get. If you have heart palpitations, you get a heart test. If you have a stomach pain, you get a scope of some sort.

Heart testing has come a long way over the decades. Medical professionals no longer view the heart as only an elusive organ that runs blood through the body as your vital force. Tests now can measure the factors of the blood vessel walls that contribute to the actual progression of disease in heart attacks and strokes.

But as testing has progressed, so have the merits and limitations of each test and if the test must also be followed by another form of testing. Each test also carries with it unique side effects. Diagnostic testing takes place when there is a significant medical crisis indicated.

## **CT Scans with Calcium Levels**

A form of diagnostic testing – CT scans with calcium level checks – utilizes 16 to 40 slice views of the heart and surrounding blood vessels to diagnose the exact area of heart disease.

There are several advantages to such a test. First, they can be used with pre and post Coronary Artery Bypass Graft procedures to see exactly where complications are manifested. A CT scan will also image the pericardium and pericardial structures and will safely detect intra lumen dysfunctions of the blood vessels. The calcium level analysis can detect areas of future concern because of calcium deposits.

Some of the concerns raised about a CT scan are high radiation limits. To mitigate this risk, select a center that has been educated on reducing radiation with filters for your weight and size. Patients must also hold their breath for 25 to 30 seconds and be able to take Beta blockers. Compared to the level of information obtained, the cost of such a test is reasonable.

## **ECHO Test**

The Echo test uses ultrasound to record heart valve imaging. Advantages are that the cost is low, risk is low for further cardiac complications and results are readily available and immediate. Disadvantages are limitation in diagnosing vessel disease or blockages.

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## **MRI Angiography**

For detailed images of the internal structures of the heart and blood vessels, an MRI Angiography is best. Advantages include no ionizing radiation, no contrast, and results are readily available. The disadvantages to this test are no calcium scoring for prediction of future complications or treatment indications, metal interference, and limits on small vessel disease.

There are also tests that can detect possible cardiac conditions prior to a medical emergency.

## **Cardiopulmonary Exercise Testing with Pulmonary Function Testing**

Cardiopulmonary Exercise testing with Pulmonary Function Testing, or CPET/PFT, was used in most hospitals and large clinics over 30 years ago but has lost popularity. However, this still might be the best test when symptoms of shortness of breath, exercise induced symptoms, chronic fatigue, fibromyalgia, heart palpitations, irregular heartbeats or irregular blood flow conditions are present. Advantages are that the test has a lower cost to diagnose, the procedure is noninvasive, it can diagnose malingering, can be used with lower limb diseases such as diabetes and knee instability, defines disability issues, detects true cardiac or lung disease versus deconditioning and shows oxygen uptake with improved health parameters over a period of time. Disadvantages are that many small doctors' offices do not provide the test, equipment might not be sufficiently calibrated for exact reproducible results, and there is a 400 pound testing limitation. Seek out the PET test in your area for best and reproducible results.

## **Treadmill Testing**

Treadmill testing is used to diagnose cardiac issues and is the current standard of care for physicians. Disadvantages are: knee pain issues or replacements will hinder results, lung conditions will not be evaluated, further testing will be required to evaluate symptoms, out of shape patients will not be able to perform the test to challenge the heart, no parameters will be established to get exact heart rate target and overweight clients may have difficulty breathing throughout the test.

But even if you have not had cardiac or lung symptoms you don't need to wait to find out in future years that the shape you are in now will impact your health significantly in the next ten or so years. There are blood tests that can be monitored to evaluate the status of your heart and blood vessels. These would be recommended every 18 months to two years if there are no elevated items or every six to nine months with treatment for high levels.

It has also been very popular to add aspirin to the daily regimen. Recent developments have indicated that aspirin has failed to prevent over 75 percent of the vascular events which occurred, and aspirin and ibuprophen are contraindicated together. These items have been noted to decrease the risk of stroke and heart attacks by reducing the blood clot factors in the body. However, now there are tests available to determine if you are one of the millions of people who are aspirin resistant and need further aggressive treatment to prevent stroke or fatal heart issues. One test is urine thromboxane for aspirin resistance. (Note: if you are at risk for rheumatoid arthritis or diagnosed with the disease, tell your

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doctor, this test will provide incorrect results for you.) The other test is VerifyNow Aspirin Assay, an immediate test that will tell how your platelets are reacting.

Whatever the time in your life, it is never too soon to see what your inside blood, heart and organ status is. What you can do now for your health can change the pattern of symptoms and disease later in life. Ask for the testing listed and look at the results yourself with the doctor, and note the levels given for the place in the range indicated. Yes, they are a problem when out of range, but if you can work on your health just when they are becoming elevated, all the better. If you cannot find these tests, seek them out. You are in control of your quality of life and the sooner you assume control, the better your prognosis for good health.

### About the Author



Dr. Jeanette Gallagher, ND is a Naturopath who has been in healthcare for more than 43 years in various positions and education.

Dr. Jeanette helps people who are not well or feel that something is not right, showing them how to be a participant in their healthcare and disease process. The goal is to minimize complications from incomplete records or communication, decrease stress or fear in making hard choices, improve health and quality of life by better personal choices.

She shows you how to support your healthcare provider by providing information consistently and completely about your health so there are less questions or gaps in your care.

She is a former dental hygienist, current patient advocate and mother of four grown children. Over the decades she has encountered many personal and health crises' in her life to learn what works and what does not. Dr. Jeanette is also a super caregiver and can share what it takes to help others.

For a listing of her services visit: [www.MyPersonalAdvocate2.com](http://www.MyPersonalAdvocate2.com)