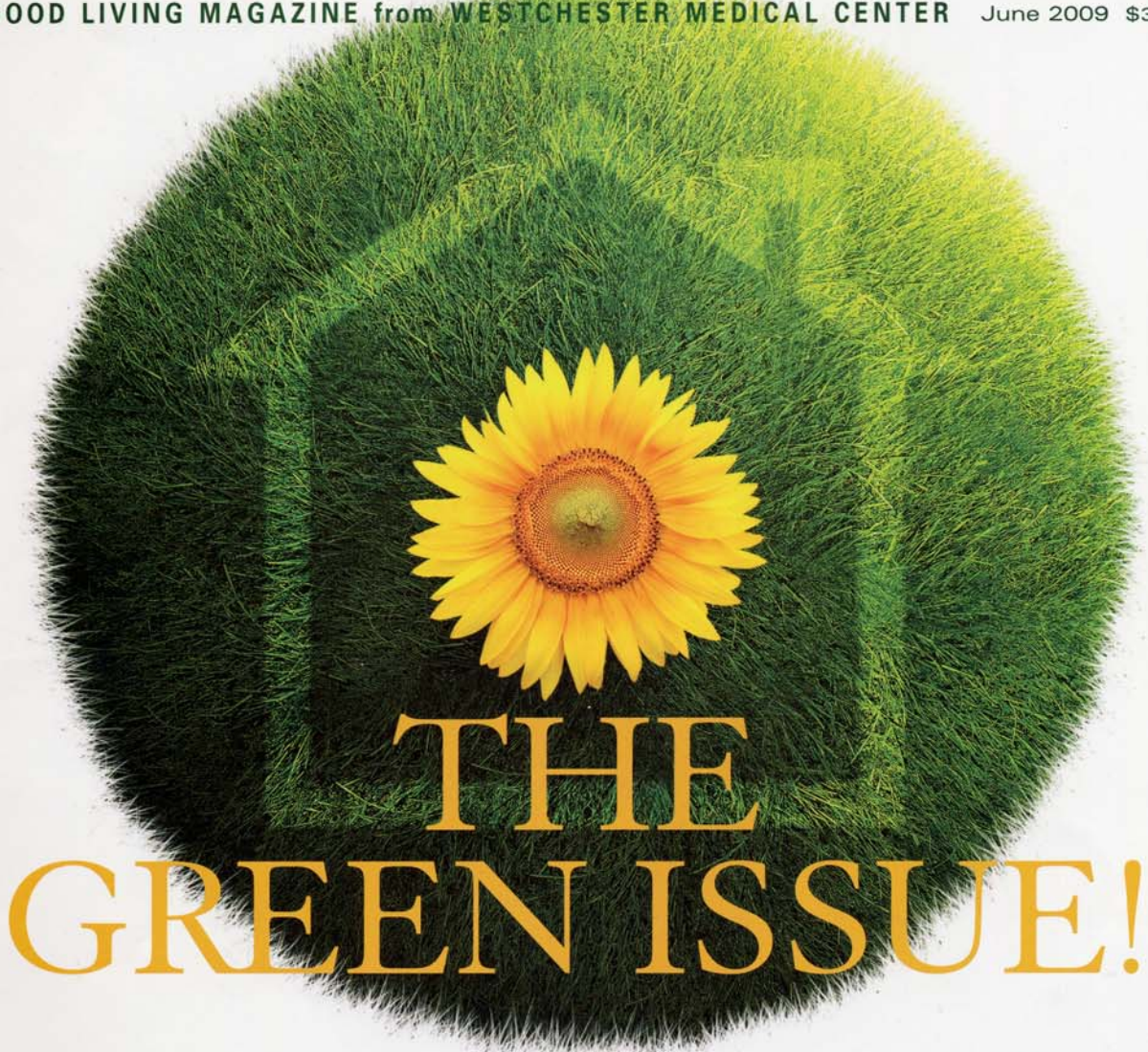


WESTCHESTER health & life

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- Mystery heart attack: The surprising cause
- When foods bring special dangers
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MYSTERY heart attack

AN APPARENTLY HEALTHY WOMAN'S SUDDEN CRISIS
HIGHLIGHTS THE DANGERS OF STRESS

WHEN ROCKLAND COUNTY SCHOOL PSY-
chologist Susan D'Auria rushed into the principal's
office one day last November, she had a startling request:

"Please call 911," she said. "I think I'm having a
heart attack!"

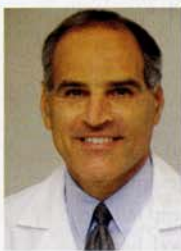
And she was.

D'Auria, now 52, was no one's idea of a likely
heart-attack victim. She had been treated successfully for
breast cancer eight years before, but her overall health
was excellent. Her cholesterol was low, her blood pres-
sure was *usually* low, and she wasn't overweight. She was
a nonsmoker, a healthy eater and an avid exerciser. But
D'Auria almost died that day. Fortunately, she was saved
by physicians at Westchester Medical Center, who
attribute her attack to the sometimes unpredictable role

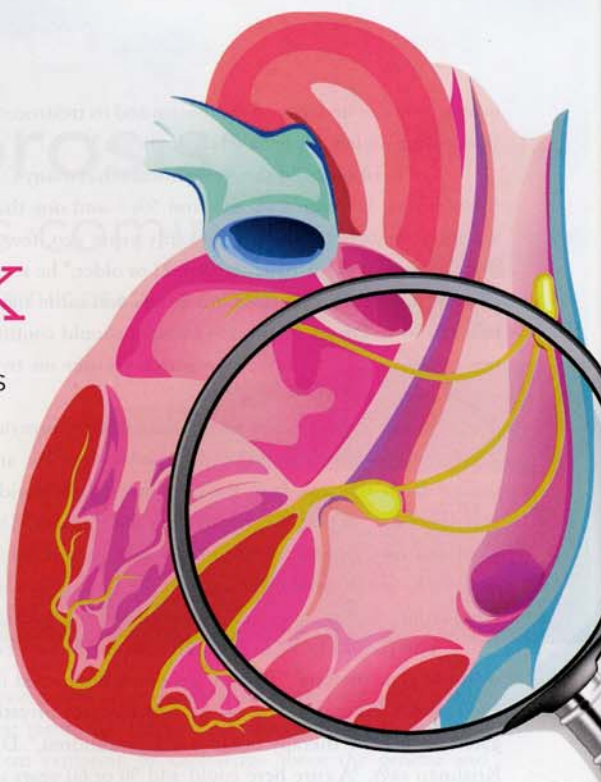
of stress—and a frightening phenomenon
known as takotsubo syndrome.

At a routine follow-up appointment
last fall, D'Auria's oncologist noticed that
her blood pressure was higher than usual
and suggested she see her personal physi-
cian. She made an appointment for
November 4. But for three to four days
before that date, she noticed unusual
symptoms. "I felt an adrenaline rush, like
you feel in a fight-or-flight response," she

recalls. "It would come and go, but there was nothing to
trigger it." On the 4th, at work, she felt light-headed and
fatigued and also had indigestion. She thought it was
just a flu bug, but by the time she got to her car to leave
for her doctor visit, she was too dizzy to drive. Quickly,
things got worse. "I felt a heaviness in my chest," she
says. "I couldn't catch my breath."



Alan Gass, M.D.



That's when she ran back into the school and
made her request of the principal.

An ambulance soon arrived to whisk D'Auria to a
nearby community hospital, where doctors discovered
she had gone into cardiogenic shock—her heart was
pumping almost no blood, and her internal organs were
failing as a result. The doctors ran tests to discover what
had caused her heart attack, but they came up empty.
Her coronary arteries were not blocked.

The next day, D'Auria was sent by helicopter to
Westchester Medical Center, which as a regional center is
better equipped than community hospitals to handle
such extreme emergencies. She was placed in the care of
Alan Gass, M.D., Medical Director of Heart Transplant
and Mechanical Circulatory Support, who ran tests of his
own. He reviewed the other hospital's evaluation and
performed an ultrasound. He found that her heart had
become misshapen, with a narrow neck at the top and an
elongated form that tapered to a point. "It looked exactly
like the shape described in medical literature as tako-
tsubo syndrome," he says.

That syndrome, first identified by Japanese physi-

cians in 1991, is a sudden temporary weakening of the heart muscle. To the doctors who discovered the condition, these hearts looked like the trap Japanese divers use to capture octopi—"tako tsubo" is "octopus trap" in Japanese.

The malady is also known as "broken heart" syndrome, because it is often associated with emotional stress. Typically it comes on after a sudden and severe stressor, such as the death of a loved one. But it can also be caused by persistent day-to-day stress, which seems to be the case for D'Auria, who says there were no traumatic incidents leading up to her attack. "I had ongoing stress," she says, "but who doesn't?"

Indeed, we all have stress in our lives. "But people react to stress differently," says Dr. Gass. "We know that stress releases hormones such as adrenaline that can be toxic to the heart. Some people build up these toxins to the point where they cause real damage."

D'Auria's heart was so weak she needed a special pump—a left ventricular assist device, or LVAD—implanted under her skin to pump blood to the rest of her body. This gave her heart time to rest and heal. After about six days, the pump was removed and her heart took over again. She stayed at the medical center until just before Thanksgiving, and then spent another week at a cardiac rehabilitation facility closer to her home. By spring, she was doing well. "I tried to garden in April and was quickly out of breath," admits the Highland Mills resident, who is married to a high school counselor and has two college-student sons. "But for daily activities like walking and climbing stairs, I am back to 100 percent."

"She looks great," says Dr. Gass. "She went from being almost dead and on mechanical life support to where her heart function is now totally normal. She

D'Auria's heart had become misshapen, with a narrow neck and an elongated form.

should be able to go back to work soon."

Dr. Gass notes that cases of takotsubo syndrome are becoming more frequent, "partly because we now have a label for it that we didn't have before, but also because of what's going on in the world today." Some people's bodies are not prepared for the kinds and levels of stress we face today, he explains, and unfortunately medicine hasn't yet learned

to identify such people in advance.

Still, everyone should find a way to relieve stress. "Some of my patients turn to God, some do yoga, some exercise more," says Dr. Gass. "I try to help everyone find something to do that will complement the traditional Western medicine I practice, because I believe strongly that our physical health is linked to our inner core."

Adds Dr. Gass of the syndrome that apparently almost killed Susan D'Auria: "This is a striking example of the mind-body connection that often leads to illness. As the healthcare crisis worsens, we must look inside to prevent illness and shift the paradigm from treating diseases to preserving wellness." ■

Facts about takotsubo syndrome



- It affects women far more often than men. Some research indicates nearly nine out of 10 cases occur in women, and of those, almost all are in women 50 or older.

- In one study, 11 percent of patients experienced a recurrence of symptoms over a four-year period. About 3.6 percent of cases were fatal; most of these were in patients with other underlying health problems.

- For the vast majority of patients, it appears that the syndrome is temporary and completely reversible.

- Many doctors recommend long-term treatment with medications that block the potentially damaging effects of stress hormones on the heart.

Sources: *Mayo Clinic*, *American Journal of Cardiology*

To learn more about the treatment of heart attacks and heart disease at Westchester Medical Center, please call 1-877-WMC-DOCS or visit www.worldclassmedicine.com.