

5 Reasons Hospitals are Safe for Heart, Stroke Emergencies — Even in the Pandemic

Although COVID-19 has changed the world, it hasn't changed the fact that hospitals are the safest place to be if there's a heart attack, stroke or other medical emergency.

Delaying the 911 call that gets you to the hospital can be dangerous — even deadly. Here's why the coronavirus shouldn't make you hesitate or doubt you need emergency help:

- 1. Hospitals are following infection control protocols** to sanitize, socially distance and keep infected people away from others. In fact, many hospitals have separate emergency rooms, operating rooms, cardiac catheterization rooms and ICUs for people with COVID-19 and for those people suspected to have the disease. Patients are often being met by workers in full protective gear as a precaution, and family member access is restricted.
- 2. Calling 911 immediately is still your best chance of surviving an emergency.** It is **SAFE for EVERYONE** to call 911. It is **SAFE for ANYONE** to go to the hospital in an emergency. U.S. hospitals are no longer overwhelmed by COVID-19. You shouldn't worry about the system being able to provide adequate care.
- 3. Emergency room workers know what to do**, even when things seem chaotic. Emergency rooms have made plans to ensure adequate staffing and keep patients and workers safe. This is their specialty and their strong suit; hospital

workers are trained in disaster readiness and to get the job done in any situation.

- 4. Year in and year out, heart disease and stroke are the top two killers worldwide.** Someone in the U.S. will have a heart attack and someone else will have a stroke every 40 seconds. More than 350,000 out-of-hospital cardiac arrests occur in the U.S. annually. Hospitals know exactly what to do in these instances to save lives.
- 5. Fast care is the key to survival.** Minutes matter. People with blocked arteries or clots causing heart attacks or strokes need care quickly. The difference between life and death can be measured in minutes. With so little time to work with, and the extra time needed to ensure coronavirus safety measures, calling 911 quickly is more important than ever.

Call 911 if you or a loved one experiences heart attack warning signs — chest discomfort; discomfort in other areas of the body such as your arms, back, neck, jaw or stomach; shortness of breath; and other possible signs, like breaking out in a cold sweat, nausea or lightheadedness.

If you or a loved one has stroke symptoms, which you can remember with the acronym FAST: Face drooping, Arm weakness, Speech slurring or other difficulty, then it's Time to call 911.

If you find a loved one or anyone down and unresponsive (with or without a pulse), call 911 and start CPR right away.

"I Don't Want You to Die of Doubt"



Jerry Chiaverini

Minnesotan Jerry Chiaverini was out riding his bike this summer when he started feeling what he thought was indigestion. Fortunately, however, his wife, Lora Lee, a registered nurse with St. Luke's Hospital in Duluth, had recently seen the American Heart Association's new campaign, Don't Die of Doubt. Lora Lee convinced Jerry that he needed to go to the emergency department. A week later he was having triple bypass surgery.

"I'm Lucky I Didn't Die"



Charley Bednarsh's dog,
Atticus

Charley Bednarsh feared burdening health care workers already overburdened by COVID-19. So she didn't call 911. That delay could have killed her. Atticus, her dog, tried to send her a warning sign, one of many that she missed. Eventually, test results confirmed she was having a heart attack, and Bednarsh was shocked.

To read their full stories, visit [Heart.org/DontDieofDoubt](https://www.heart.org/DontDieofDoubt).

Family Affected by Heart Disease Gives Back to Support Research

Len and Barbara Berenfield were terrified when doctors discovered their son Greg had a rare congenital heart condition just six weeks after his birth in 1969. Living in Warren, Pennsylvania, a town of about 15,000 and one hospital, presented some challenges to getting the care Greg needed.

“We took Greg to Pittsburgh Children’s Hospital in hopes of finding some answers,” Len said. “Dr. Robert Zuberbuhler shared that Greg had tetralogy of Fallot. We had never heard of tetralogy of Fallot, a combination of four defects that causes the heart to release oxygen-poor blood throughout the rest of the body. At that time, it was rare that children who had tetralogy lived long enough to be operated on.”



Len Berenfield

Greg went in for checkups regularly, and the Berenfields learned he had a second anomaly — a large artery in the back of his heart that was feeding his lungs. So Greg was able to grow, unlike many other children with tetralogy of Fallot, and the artery put him in the 90th percentiles for height and weight, which was extremely abnormal.

“He was quite large for kids his age, but his stamina did not match other children, and he often stopped to catch his breath,” Len said. “At age 4, doctors at Pittsburgh Children’s Hospital determined that Greg was large enough to be operated on. However, he needed two surgeries — one from the front to correct the tetralogy of Fallot and one from the back to close the large artery.”

The Berenfields traveled to Texas Children’s Hospital in Houston for a consultation with Dr. Denton Cooley who said he could do both surgeries from the front. Even though the tetralogy of Fallot surgery was a success, he could not close the artery from the front after all. So the Berenfields returned to Pennsylvania with Greg in congestive heart failure.

Six weeks after the Berenfields returned, they met with Dr. Zuberbuhler, who had been administering a drug that, at the time, had only been approved to close small arteries in the brain. He had been experimenting with dogs and had a 100 percent success rate. So Greg would be the first human to test the drug for closing the large artery.

“Barbara and I looked at each other for 10 seconds then signed on the dotted line,” Len said. “A few days after a successful administration of the drug, Greg walked out a different person.”

Today, Greg is a father of four boys. One of his sons, Sam, was also diagnosed with tetralogy, which is hereditary. But he didn’t have the extra artery, so he had the operation for tetralogy of Fallot just a few weeks after birth. He had his valves replaced in subsequent surgeries over time.

The Berenfields learned about the American Heart Association’s lifesaving work through a friend who ran the local office in Warren. In his early volunteer days, Len sold apples to raise funds. He later served on the AHA’s Cincinnati board, eventually becoming chairman. He also served on the affiliate board. Though he’s retired from the board, Len occasionally speaks to share his family’s story to showcase where the money from research goes and how it helps individuals.

“My late wife Barbara had atrial fibrillation, and my current wife Ann also has atrial fibrillation,” he said. “Even my parents had heart complications – my mother died of a heart attack and my father had several strokes. In support of my loved ones and future generations, I proudly gift my time, energy and resources to support the vital and impactful work of the AHA.”

Over the years, Len has not only donated cash and his time, he’s also gifted a car and included the AHA in his will. And he contributes through the [AHA Donor Advised Fund Program](#) supporting unfunded worthwhile research projects.

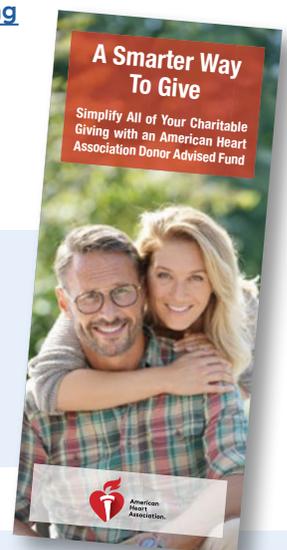
“I hope that by giving to the AHA, the funds will support new technologies that can solve unsolvable problems today,” Len said. “Scientific breakthroughs pave the way for discoveries that advance lifesaving work.”

[Learn more about planned giving options.](#)

A Donor Advised Fund might be a good option for you too.

[Fill out our online form to get your free brochure,](#)

A Smarter Way to Give – The American Heart Association Donor Advised Fund Program.



What Stress Does to the Body and How to Beat it

From daily struggles such as work pressure to traumatic events such as the death of a loved one, everyone has felt some form of stress.

Emotional and mental strain can leave us more vulnerable to depression, anxiety, heart disease, high blood pressure, heart failure, gastrointestinal trouble and other problems.

"The impact of stress on the body can be acute or chronic, and it can happen suddenly or be exerted in a low-grade fashion over time," said Dr. Ernesto Schiffrin, physician-in-chief in the Department of Medicine at Jewish General Hospital in Montreal.



Schiffrin described stress in general terms as "aggression against the body," which could be coming from within — such as a disease or ailment — or from your environment. When the body feels attacked, it activates the "fight-or-flight" reaction, releasing adrenaline and increasing cortisol levels.

Excess exposure to these hormones can affect just about every system in the body.

"After an acute stressor ends, the levels usually return to normal," said Dr. Sherita Hill Golden, professor of medicine and epidemiology at Johns Hopkins University in Baltimore, Maryland. "But if they remain elevated, the body can become more resistant to insulin, leading to heart disease and diabetes. Insulin resistance also can make the body more prone to inflammation and lead to damaged blood vessels."

Fortunately, you can manage stress in multiple ways, even with restrictions and life changes brought on by the coronavirus. You can:

- ✓ Exercise.
- ✓ Maintain social connections.
- ✓ Make time to unwind.
- ✓ Limit pandemic news intake.
- ✓ Get enough sleep.

"If it becomes debilitating or turns into extreme anxiety or depression, it's worth talking to your doctor to see if you could benefit from counseling and medications to treat it," Golden said. "Stress really does adversely impact health. The mind-body connection is very important." [Read the full story.](#)

Son Leaves Entire Estate to Nonprofits to Make a Difference

Charles "Charlie" McCauley fondly remembers how his mom, Edythe, loved receiving holiday cards from the American Heart Association.

"They sent them because she supported the mission for a long time," Charlie said. "Heart disease is the No. 1 killer of people, and she wanted to make a difference in people's lives. I feel compelled to support the association in her honor."

Like his mom — and in her honor — Charlie's support of the AHA is making a difference.

He's listed the AHA as the beneficiary of his IRA, knowing the funds will facilitate scientific breakthroughs that can improve and save lives for many like Edythe, whose triple bypass surgery helped her survive an additional nine years.

While growing up in Waynesboro, Virginia, Charlie "inherited" his mom's love for and skills in gardening — leading him to get a degree in horticulture at Virginia Tech in Blacksburg.

"Eventually, I started a successful landscaping career in northern Virginia," Charlie said. "When her health took a turn, I retired and moved home to Waynesboro to be her caregiver. There, I created a garden for her, which I called 'The Garden of Edythe.'"

Charlie cared for his mom for six years and feels fortunate for the time they shared.



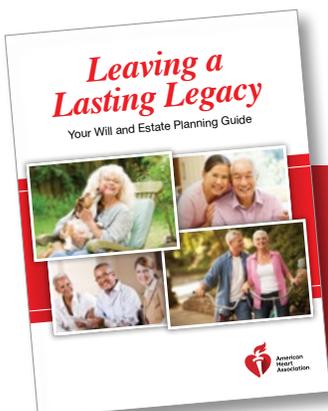
Charlie's mom, Edythe

"She was my rock, my mentor, my everything," he said. "I lost my dad to cancer when he was only 57, and she was all I had left. She taught me so many valuable life lessons and inspired me to be a more selfless person."

Charlie's selfless giving will leave a lasting legacy of his mom for many nonprofits. His estate will be divided among the American Heart Association, American Cancer Society, American Lung Association, St. Jude's Children's Hospital and Virginia Tech.

"I miss her greatly, but I am happy her legacy will live on in the gifts I made in her memory," he said.

[Read more about the different types of gifts you can make to help you achieve your philanthropic goals.](#)



To learn more about leaving a gift through your will or estate plan [fill out our online form to get your free brochure, *Your Will and Estate Planning Guide*](#). Questions? Contact us at PlannedGiving@heart.org or 888-227-5242.

Know the warning signs of heart attack and stroke

You could save your life



Heart disease is still the number 1 killer worldwide, and stroke is a leading cause of disability and the number 2 killer globally. Cardiovascular disease is the leading cause of death in women. Heart attacks and strokes are life-or-death emergencies — every second counts. If you or someone you know is experiencing heart attack or stroke symptoms, call 911 immediately.

For a stroke, also note the time when the first symptom(s) appeared. A clot-busting drug received within 3 to 4.5 hours of the start of symptoms may improve your chances of getting better faster.

Heart Attack Warning Signs

Some heart attacks are sudden and intense, but most of them start slowly, with mild pain or discomfort. The warning signs are:

-  **Chest discomfort** — Most heart attacks involve discomfort in the center of the chest that lasts more than a few minutes, or that goes away and comes back. It can feel like uncomfortable pressure, squeezing, fullness or pain.
-  **Discomfort in other areas of the upper body.** Symptoms can include pain or discomfort in one or both arms, the back, neck, jaw or stomach.
-  **Shortness of breath** — This may occur with or without chest discomfort.
-  Other signs may include breaking out in a **cold sweat, nausea or lightheadedness.**

As with men, women's most common heart attack symptom is chest pain or discomfort. But women are more likely than men to experience some of the other common symptoms, particularly shortness of breath, nausea/vomiting and back or jaw pain. For more information on cardiovascular disease in women visit GoRedForWomen.org.

Stroke Warning Signs

- Sudden numbness or weakness of the face, arm or leg, especially on one side of the body
- Sudden confusion, or trouble speaking or understanding
- Sudden trouble seeing in one or both eyes
- Sudden trouble walking, dizziness or loss of balance or coordination
- Sudden, severe headache with no known cause

The acronym **F.A.S.T.** is an easy way to recognize and respond to the sudden warning signs of stroke. The letters stand for:

-  **Face drooping** — Ask the person to smile. Does one side of the face droop or is it numb?
-  **Speech difficulty** — Ask the person to repeat a simple sentence such as, "The sky is blue." Is the sentence repeated correctly? Are they unable to speak, or are they hard to understand?
-  **Arm weakness** — Ask the person to raise both arms. Is one arm weak or numb? Does one arm drift downward?
-  **Time to call 911** — If the person shows any of these symptoms, even if the symptoms go away, call 911 and get them to the hospital immediately.

For more information on heart attack and stroke warning signs visit heart.org.