

Balanced Diet for Healthy Heart- General Aspects

K S Vijayalakshmi¹, Sathiyalatha Sarathi², V. Hemavathy³

¹Department Of Community Health Nursing, Sree Balaji College of Nursing BIHER, Chrompet, Chennai, Tamil Nadu, India.

²Department of OBG Health Nursing, Sree Balaji College of Nursing, BIHER Chrompet, Chennai, Tamil Nadu, India.

³BIHER, Sree Balaji College of Nursing, Chrompet, Chennai, Tamil Nadu, India.

E-mail ID:

vijayalakshmi.ks25@gmail.com

sathilathasarathi@gmail.com

sbcnchennai@gmail.com

ABSTRACT

Globally, cardiovascular disease is the leading cause of mortality, according to the WHO. Coronary heart disease, cerebrovascular illness, rheumatic heart disease, and other ailments are among a category of disorders of the heart and blood arteries. Diet and lifestyle are crucial for preserving heart health. An unhealthy diet can increase the risk of heart disease and set off additional risk factors that may result in heart disease. A healthy eating habit is more beneficial than a specific diet at reducing the risk of heart disease. Although some cardiac anomalies, such as congenital heart problems, cannot be prevented, dietary adjustments and a change in lifestyle can assist.

Keywords

Cardiovascular, Coronary heart disease, Diet, Lifestyle

Imprint

K S Vijayalakshmi, Sathiyalatha Sarathi, V. Hemavathy. Balanced Diet for Healthy Heart-General Aspects. *Cardiometry*; Issue No. 26; February 2023; p. 503-506; DOI: 10.18137/cardiometry.2023.26.503506; Available from: <http://www.cardiometry.net/issues/no26-february-2023/balanced-diet-healthy>

According to the 2020-2025 Dietary Guidelines for Americans, saturated fat should make up no more than 10% of daily calories.

- Simple steps can be taken to reduce saturated and Trans fat intake, such as trimming the fat from meat or choosing lean meats with less than 10% fat.

- When cooking and serving, use less butter, margarine, and shortening. For a diet that is heart-healthy, whenever possible, substitute low-fat foods.
- For instance, use low-fat yoghurt or low-sodium salsa to top baked potatoes instead of butter, or put low-sugar fruit spread over toast instead of margarine.

INTRODUCTION

The cardiac diet promotes the consumption of heart-healthy, anti-inflammatory foods with the goal of lowering chance of Heart disease. The best diet for preventing heart disease is one that emphasises fresh produce, whole grains, nuts, fish, poultry, and vegetable oils; it includes alcohol in moderation, if at all; and it limits consumption of red and processed meats, as well as of refined carbohydrates, as well as of foods and drinks with added sugar, sodium, and trans fats. Numerous studies on the connection between diet and heart disease have focused on particular vitamins, minerals, types of lipids, and specific substances like cholesterol (and foods high in dietary cholesterol, such eggs).

HEALTHY HEART DIET

1. Salt restriction: A salt intake of even less than the recommended aim of 6 g per day is preferable. One can reasonably limit their salt intake to 3.8 g per day. Spot urine samples can be used to assess salt intake in general medical settings. Since salt content is frequently stated as sodium content in processed foods.

2. Nutrients besides salt: Increased consumption of vegetables and fruits should be combined with decreased consumption of saturated fats and cholesterol. Increased fish (fish oil) consumption is also recommended.

3. Weight Maintenance: Although a weight reduction of 4-5 kg can significantly lower blood pressure, the desired body mass index is 25 kg/m² (BMI: body weight [kg] and height [m]). Additionally, the waist circumference needs to be kept at a healthy range.

4. Exercise: Exercise should be done, primarily cyclical (30 minutes daily) moderate aerobic exercise is recommended. Patients with hypertension who do not have cardiovascular diseases must follow this. Medical examinations and the required actions must be made in advance for patients who are at high risk.

5. Alcohol Restriction intake: Men's Liquor consumption must be limited to 20–30 ml per day and women's intake should be 10–20 ml per day.

6. Giving Up Smoking: It should be avoided since it raises blood pressure levels and puts people at high risk for cardiovascular disease. Passive smoking is also to be avoided.

7. Others: Cold exposure should be avoided. Managing emotional stress is important.

Dietary Balance for Healthy Heart

Carbohydrate intake is moderate. A mostly cereal made from whole grains such wheat, oats, millets, etc. These are excellent sources of vitamins, particularly vitamin B complex, which lowers the risk of heart disease and lowers the morbidity and mortality from stroke. Minerals and vitamins also aid the contraction of the heart muscle. Which absence may result in heart problems.

Protein A diet that is both healthy and well-balanced must include protein. Egg, fish, poultry, legumes, milk, and milk products are sources. It assists in lowering blood pressure, maintaining a healthy weight, and lowering cholesterol. But in order to maintain heart health, red meat and other proteins high in saturated fat must be avoided.

Fat. In a typical diet, fat must be present in some quantity. The greatest cooking oils for heart health are those that include PUFA (polyunsaturated fatty acids) and MUFA (monounsaturated fatty acids). Canola oil, sesame seed oil, and peanut oil are PUFA-rich oils. Sunflower oil, olive oil, and other oils are MUFA-rich.

Vegetables and fruits take a crucial part in keeping one's health. These are excellent providers of vitamins and minerals, which are crucial for maintaining the health of our hearts. By neutralising free radicals, which may play a major part in the pathophysiology of atherosclerosis and Cardio Vascular Disease, Vitamins can slow the progression of oxidative stress, especially those with antioxidant power like vitamin C, E, and carotenoids.

Dietary guidelines for patients with heart disease

- Increasing the amount of fibre in your Diet can help you keep a healthy weight while lowering your blood pressure and cholesterol.
- Poor blood sugar control can result in heart disease. Patients with diabetes should adhere to a strict eating plan to keep their blood sugar levels in check and save their hearts.

- High salt intake can cause hypertension, which can increase cardiac issues. So it is important to monitor salt intake. If sodium consumption cannot be avoided, knowing the amount of sodium in packaged and processed foods will be helpful.
- Regular exercise, proper sleep, stress free lives along with healthy dietary practices are the key to keep our heart healthy.

CARDIAC DIET PLAN

TIME	RECIPES	QUANTITY
6: 00 AM	Tea	100 ml
	Ragi Cookies	75 gm
8: 00 AM	Idly with	300 gm
	Tomato Chutney	150 gm
10: 30 AM	Apple Juice	150 ml
12: 30 PM	Rice with	300 gm
	Ladies finger Sambar	100 ml
	Fish curry	100 ml
	Drumsticks leaves poriyal	100 ml
	Butter milk	100 ml
3: 00 PM	Green Gram (Boiled)	100 gm
5: 00 PM	Tea	100 ml
	Aval Cookies	75 gm
8: 00 PM	Chapathi	300 gm
	Channa Dhal	150 gm

MENU	INGREDIENTS
Tea	Milk 50ml Sugar 5gm
Ragi Cookies	Ragi 30gm Butter 5gm Sugar 5gm
Idly	Rice 50gm Black gram 10gm
Tomato Chutney	Black gram dhal 2gm Curry leaves 5gm Onion 50gm Ginger 5gm Garlic 5gm Tomato 50gm Dry chillies 5gm Cooking oil 50ml Salt
Apple Juice	Apple 50gm Milk 100ml Sugar 20gm
Rice Ladies finger Sambar	Parboiled Rice 50gm Red gram dhal 50gm Onion 5gm Curry leaves 5g Ladies finger 50gm Tomato 10gm

MENU	INGREDIENTS
	Green chillies 5gm Tamarind pulp 5gm Oil 10ml
Drumsticks leaves poriyal	Drumstick leaves 50gm Onion 5gm Coconut 5gm Mustard seed 2gm Red chillies 5gm Oil 5gm Salt
Fish curry	Seer fish 50gm Tomato 5gm Onion 5gm Garlic 5gm Green chillies 5gm Curry leaves 3gm Tamarind pulp 5gm Turmeric 5g Mustard seed 5gm Cooking Oil 5gm
Aval Cookies	Rice flakes 20gm Butter 5gm Sugar 5gm
Chapathi	Wheat flour 50gm
Channa Dhal	Bengal gram 50gm Onion 5gm Tomato 5gm Garlic 5gm Ginger 5gm Coconut 5gm Turmeric 3gm Cloves 3gm Cardamon 2gm Curry leaves 3gm Cooking Oil 10gm

CONCLUSION:

Starting a diet can feel like climbing a mountain, especially if you haven't had much success in the past. However, there is no mountain that can't be climbed if you plan and prepare to do it. Dieting is something that is most likely to succeed when you approach it methodically.

Creating a diet chart for heart patients is an excellent way to plan and follow a new diet. One of the major reasons new diets are difficult to follow is that you have to change the ingredients, cooking styles and portions. These changes can be difficult to deal with if you do not establish a routine.

Consider talking to a nutritionist or a dietician if you need help with a diet chart for heart patients. This way, you can create a plan that includes your favourite ingredients that are allowed in a diet plan for heart patients.

REFERENCES

1. Galli F, Azzi A, Birringer M, et al. 2017, 'Vitamin E: Emerging aspects and new directions', *Free Radical Biology and Medicine*, vol. 102, pp. 16-36.
2. Jones PJH, Shamloo M, MacKay DS, et al. 2018, 'Progress and perspectives in plant sterol and plant stanol research', *Nutrition Reviews*, vol. 76, no. 10, pp. 725-746.
3. Sun YE, Wang W, Qin J 2018, 'Anti-hyperlipidemia of garlic by reducing the level of total cholesterol and low-density lipoprotein: A meta-analysis', *Medicine*, vol. 97, no. 18, pp. e0255.
4. Cheng Y, Sheen J, Hu WL, et al. 2017, 'Polyphenols and oxidative stress in atherosclerosis-related ischemic Heart disease and stroke', *Oxidative Medicine and Cellular Longevity*, vol. 2017, Article ID: 8526438.
5. Australian guidelines to reduce health risks from drinking alcohol, National Health and Medical Research Centre.
6. Nutrient Reference Values (NRVs) for Australia and New Zealand, Australian National Health and Medical Research Council.
7. GBD 2017 Risk Factor Collaborators. Global, regional, and national comparative risk assessment of 84 behavioural, environmental and occupational, and metabolic risks or clusters of risks for 195 countries and territories, 1990-2017: a systematic analysis for the Global Burden of Disease Study 2017. *Lancet* 2018; 392:1923.
8. Lawes CM, Vander Hoorn S, Rodgers A, International Society of Hypertension. Global burden of blood-pressure-related disease, 2001. *Lancet* 2008; 371:1513.
9. Flint AC, Conell C, Ren X, et al. Effect of Systolic and Diastolic Blood Pressure on Cardiovascular Outcomes. *N Engl J Med* 2019; 381:243.
10. Rapsomaniki E, Timmis A, George J, et al. Blood pressure and incidence of twelve cardiovascular diseases: lifetime risks, healthy life-years lost, and age-specific associations in 1.25 million people. *Lancet* 2014; 383:1899.
11. Whelton PK, Carey RM, Aronow WS, et al. 2017 ACC/AHA/AAPA/ABC/ACPM/AGS/APhA/ASH/ASPC/NMA/PCNA Guideline for the Prevention, Detection, Evaluation, and Management of High Blood Pressure in Adults: A Report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines. *Hypertension* 2018; 71:e13.

12. Angeli F, Reboldi G, Verdecchia P. Hypertension, inflammation and atrial fibrillation. *J Hypertens* 2014; 32:480.
13. Lewington S, Clarke R, Qizilbash N, et al. Age-specific relevance of usual blood pressure to vascular mortality: a meta-analysis of individual data for one million adults in 61 prospective studies. *Lancet* 2002; 360:1903.
14. Son JS, Choi S, Kim K, et al. Association of Blood Pressure Classification in Korean Young Adults According to the 2017 American College of Cardiology/American Heart Association Guidelines With Subsequent Cardiovascular Disease Events. *JAMA* 2018; 320:1783.
15. Yano Y, Reis JP, Colangelo LA, et al. Association of Blood Pressure Classification in Young Adults Using the 2017 American College of Cardiology/American Heart Association Blood Pressure Guideline With Cardiovascular Events Later in Life. *JAMA* 2018; 320:1774.