The suggested wording for the presentation is in regular font and the facilitator directions are in bold, dark red italic. It’s best not to read the presentation, but to use your own words, staying close to the meaning.

Beating the Silent Killer

Background for Facilitators

High Blood Pressure (HBP)
- American Heart Association, HBP and the Cardiovascular System
- National Institute on Aging, HBP
- American Heart Association, Common HBP Myths

DASH
- National Heart, Lung and Blood Institute, The DASH Eating Plan
- American Heart Association, Can Processed Foods Be a Part of a Healthy Diet?

Physical Activity
- Mayo Clinic, Video on Talk Test

Use the Nutrition Facts Label to choose foods with less saturated fat, sodium, and added sugars. Older adults often get too much of these nutrients.

Behavior Goals
Participants will:
1. Gain new insights for the ways uncontrolled high blood pressure could harm them.
2. Identify at least one way to adopt or emphasize DASH diet principles.
3. Be able to identify ways that physical activity is useful in their everyday lives.

Meeting Preparation
1. Review newsletter content. Send questions or concerns to your coordinator.
2. Review background resources (website links provided above).
3. Choose one of the recipe options. Make the recipe at least once before the meeting. Write down helpful tips to share with group. (continued on page 2)
Meeting Preparation (continued)
4. Determine how to transport and taste featured food tasting.
5. Note there are two places for action steps in the newsletter. The first is at the bottom of page 2 (Be Active. Take Action!) and the bottom of page 3 (Eat Healthy. Take Action!).

Props
- Minute timer and pencils or pens.
- Optional: create a display with handouts and resources from the American Heart Association on detecting and managing HBP, and the signs and symptoms of a stroke.

Conversation
Last time we talked about tips for getting more sleep. Are there any you have been implementing?

Examples from March newsletter:
1. Practice a relaxing bedtime ritual such as reading, deep breathing and writing a to-do list for the next day.
2. Avoid naps, especially in the afternoon.
3. Exercise daily.
4. Evaluate your sleep environment.

Physical activity improves sleep quality and increases sleep duration. Exercise may also improve your sleep by tiring you out and reducing stress. Early morning and afternoon exercise may also reset the sleep wake cycle by raising body temperature slightly, then allowing it to drop and triggering sleepiness a few hours later. Exercising outdoors where your body can absorb sunlight can be especially helpful as well.

Introduction
This is the second in a series of meetings focused on cardiovascular health. Today, we’re going to talk about high blood pressure—a very common condition among older adults.

Myths
Read the following myths. Allow time for people to share why each statement is a myth and then review the factual information.

Myth #1: High blood pressure is only a problem for men.
Fact: Women have hypertension, too. And it can be dangerous to their health. In fact, one in three women die of heart disease and stroke.

Older women may be at an increased risk for HBP if they are:
- Overweight
- African-American
- Postmenopausal
- Diabetic
- Have a family history of hypertension
Myth #2: People with HBP are nervous, sweat easily, can’t sleep and their faces become flushed. I don’t have those symptoms so I’m good.  
**Fact:** Many people have high blood pressure for years without knowing it. That’s why it’s called “The silent killer.” You may not be aware that HBP is damaging your arteries, heart and other organs. Don’t make the mistake and assume any specific symptom will tell you have HBP.  
**Know your numbers. Refer to page 2 of newsletter.**

Myth #3: Low blood pressure isn’t anything to worry about, in fact, it’s probably a good thing.  
**Fact:** Low blood pressure can be a problem if it causes symptoms such as dizziness, fainting, or even shock in extreme cases. It’s true that low blood pressure is actually normal for some people, so again, **know your numbers** and talk to your doctor about any symptoms or concerns.

**Nutrition Discussion**

Have you heard about the DASH eating plan? We’ve covered it in Fresh Conversations before so it may not be completely new to you. What do you remember about DASH?

What does DASH refer to? **Dietary Approaches to Stop Hypertension**

The principles of this approach to eating are found on page 2. Do they sound familiar? They should. The Dietary Guidelines for Americans are similar.

I found it amazing that DASH studies have shown results in a matter of weeks. Sounds like an infomercial on TV!

**Refer group to the Smart Choices Quick Tips on page 3. Give them time to review the list and make a heart next two one or two principles they already do really well. Use timer if it helps them to focus their attention.**

**Now, ask participants to circle two things they could do better. Think of a specific action or step they could take to make real progress. Write one specific action or step in the Eat Healthy Take Action section at the bottom of page 3.**

**Tasting Activity**

**Option 1:** Build a Berry Delicious Salad

The source for the recipe in the newsletter is: [Berry Protein Salad Bowl](#)  
Another option: [Blueberry Spinach Salad with Honey Balsamic Dressing](#)
**Teaching Tips**

**Leafy greens**
- Prep salads ahead for the week so you don’t waste a large bag of salad greens.
- Don’t toss with dressing until you’re ready to eat them.
- No need to wash salad greens that have been commercially pre-washed.
- Salad greens can be a good source of folate, which is important for heart health.

**Add high-quality protein foods**
- Brainstorm inexpensive protein options for salads. (both plant and animal sources)

**Toss in berries—especially blueberries**
- Blueberries are small but packed full of heart healthy nutrients and plant chemicals (especially anthocyanins).
- A well-designed study* published in 2019 found that eating 1 cup of blueberries daily for 6 months improved vascular function and other markers of heart health. The people in the study were at risk for cardiovascular disease (average age in early 60’s)
- Can’t manage 1 cup of blueberries? How about a half-cup?
- They’re available year-round (nutritional value for frozen and fresh is the same).
- Easy to add to your favorite foods like yogurt, oatmeal, muffins and salads.
- They’re sweet and so much better than added sugar.
- Find fresh blueberries on sale? Put the plastic container of berries in the freezer until frozen; transfer to a freezer bag until you want to use them.

**Option 2: Taste different types of fresh peas.**

English peas—known as shell peas, snow peas and sugar snap peas. Which would be their favorite to add to a salad?

- **English:** Avoid overly large pods with visible bumps. Shuck them just before eating or cooking.
- **Snow peas:** Associated with Chinese cooking. Look for shiny pods with tiny peas visible through the pod walls.
- **Sugar snap peas:** These are hybrid of English pea and snow pea. Look for fat pods that are uniform in color.

**Option 3: Whole grain frozen breakfast waffle.**

Top a toasted waffle with a half cup of blueberries and a drizzle of honey. Compare breakfast waffle labels for fiber and sodium. Discuss the best options for thawing frozen blueberries use on waffles or mixed in oatmeal.

*Note to coordinators: The study examined the effect of 6-mo blueberry intake on insulin resistance and cardiometabolic function in metabolic syndrome. Methods: A double-blind, parallel RCT (n = 115; age 63 ± 7y; 68% male; body mass index 31.2 ± 3.0 kg/m2) was conducted, which fed 2 achievable blueberry intakes [equivalent to 1/2 and 1 cup/d (75/150 g)] compared with matched placebo. Recommendations: With effect sizes predictive of 12–15% reductions in CVD risk, blueberries should be included in dietary strategies to reduce individual and population CVD risk. This study was registered at clinicaltrials.gov as NCT02035592. Am J Clin Nutr 2019;109:1535–1545.*
Physical Activity

Physical activity is good for your heart. In fact, being active is one of the most important actions that people of all ages can take to improve their health.

Increased physical activity can reduce the risk of more than 20 chronic diseases and conditions including heart disease, type 2 diabetes, obesity, some types of cancer, and depression.

Not only does being active help prevent chronic diseases, but it’s really useful for your everyday life.

Q. How has physical activity helped you in your everyday life?

- Being active helps me:
  - Keep up with activities I enjoy
  - Keep my body warmer
  - Move bowels move regularly
  - Sleep better
  - Manage my blood pressure
  - Prevent further harm to my heart, arteries and veins
  - Boost my mood
  - Sharpen my mental focus
  - Reduces stress
  - Improve my sleep

When you’re active you want your breathing to increase so you can talk to a friend, but not be able to sing a song. We’re going to practice this by using the “talk test.”

Ask participants to march in place or sit in their chair and “conduct an orchestra” for one minute. Set the timer for 60 seconds. After one minute have them talk to their neighbor.

- If it’s too hard to talk, they need to dial back the intensity.
- If they could sing a song, then they may be able to increase their intensity.

Take Action

There is a take action section for physical activity on page 3. Take a moment and write down how you plan to get out and be active this month.

I also have a favor to ask of you. When you shop or get food from your cupboard, take a little more time to look for the updated Nutrition Facts Label. When you come back next month, I want to know how often you found an updated label on food packages. Put this month’s newsletter is your shopping bag or on your fridge to remind you. Can you do that? You can find an example of the update label on page 3.
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April Conversations
• HBP: The silent killer
• Are you making heart-smart choices?
• Try a fresh salad. It's BERRY good!

Contact:
Name: _______________________
Phone: _______________________

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Information & resources for seniors with home & family questions
ISU AnswerLine 1-800-262-3804