

Bruce Inverso-Moderator:

Hello and welcome to the American Heart Association Tele Town Hall call on COVID-19. I'm Bruce Inverso with the American Heart Association. We are calling out to many participants, as it will be a few minutes before we officially start, but I wanted to welcome you to the call. In the meantime we have representatives of the American Heart Association who can take your questions for our panelist of speakers.

To ask a question, you could press zero on your phone at any time and people are available now to take your questions. We will do our very best to get to your question and get it read on this call, so that the panelists can answer. But again, press zero to ask your question now, we have people standing by who can take your call.

We're also going to be doing some polling throughout just for some information, just fun information, we will not share individual answers, but I'll ask questions, polling questions throughout the phone call and I'll ask you to press one or two for your answer on your phone and we'll share the results. So just simple fun, questions to find out a little bit about, what people are thinking these days.

In the meantime, I wanted to let you know a little bit about the American Heart Association while we're waiting and it's going to be a few minutes before we could get everybody on our dial out. So, just ask you to give us a few minutes worth of patience. But here's a few things that I wanted to let you know about the American Heart Association. For one thing, our organization is nearly 100 years old. We were founded back in 1924 by six cardiologists. One of those founders, Dr Paul Dudley White, described the early years as a time of almost unbelievable ignorance about heart disease.

We have certainly come a long way since then, we still have a ways to go but we have certainly come a long way since this organization, the American Heart Association was founded in 1924. We're already making plans now to celebrate our 100th anniversary. Another little fact about the American Heart Association, in 1963, actually it was February of 1964, the president of the United States declared February as American Heart Month. Every year since, February has been declared by proclamation American Heart Month and we hope that many of you have celebrated with us during the month of February for American Heart Month.

I'd also like to tell you a little bit about what the American Heart Association is doing around the COVID-19 epidemic and pandemic. First of all, as an organization we've invested at least two and half million dollars so far to investigate the cardiovascular implications of corona virus and these are with rapid research funds, to fast track scientific research to better understand COVID-19 and its interaction with both the heart and the brain.

Another thing that we've done is we have advocated for policies that ensure that our families nationwide have access to care and our front line health workers have the ability to care for people with medical needs. That charitable organizations can continue their life saving work such as the American Heart Association.

Hi, for all you who joined, welcome to the American Heart Association's Tele Town Hall call on COVID-19. I'm Bruce Inverso, I'm with the American Heart Association Southeast and we ask for you a little more patience as we have a few more minutes before we start at the top of the hour officially. In the meantime, if you'd like to ask a question, we have people available now to take your questions. All you simply have to do is press zero and someone will answer your question, your call and your question, to be read on this call for our expert panelists. We'll do our very best to get to your question on this call, and again, to ask a question press zero now.

I had mentioned a couple minutes ago that we'll be doing polling questions as well throughout this call just for some interaction with you. I'm going to ask my first polling question now. So be ready

and the way to answer is very simple, I'll just ask you to press either one or two on your phone. But here's the first polling question. Is this your first interaction with the American Heart Association? Press one for yes, press two for no. Is this your first interaction with the American Heart Association? Press one for yes, press two for no.

So, we have some early results and it's about 68% of you, this is your very first interaction with the American Heart Association and we are thrilled that you could be with us today this evening on this very important call. So, welcome aboard and thank you. Again we're going to be starting in just a few minutes at the top of the hour. I'll remind anyone if you'd like to ask a question, to press zero and we have people standing by now for you to be able to ask your question. We'll do our best to get your question read on this call with our three expert panelists, and again press zero to be able to do that.

Another little bit of interesting information about the American Heart Association, as you know summer is here, fast approaching and our kids who have been not in school physically for the past few months and it's not summer time for them. We understand what parent are going through with their kids at home and we want to make sure that their kids are staying healthy, eating healthy, being active and safe. So, we're working with parents on it, with information that we are distributing through a variety of ways to help parents keep their kids healthy and active while they're away from school and even now over the summer.

Another polling question for all of you. Again I'll ask you to press a number on your phone. The question is this, let me set it up first, the American Heart Association is a strong voice and advocate with our policy makers around issues impacting people's health and we need many voices in our community to be our advocates. If you would like your voice heard on an issue impacting health, considering joining the American Heart Association's grassroots network called You're the Cure.

So if you would like to join the American Heart Association's grassroots network and be a voice, on our issues around health, please press one now. If you would like to be a voice for the American Heart Association's grassroots network called you're the cure, please press one now. People will be following up with you after this call in the next few days, because we certainly need every advocate voice. We have many people saying that they would like to join our grassroots network called You're the Cure. So thank you on behalf of the American Heart Association, thank you for being an advocate for us and for the health of your neighbors and friends. We very much appreciate it.

We are going to get officially started at the top of the hour so just give us one or two more minutes and we will go ahead and get started officially in a minute. But I am going to ask that first polling question that I asked again, just because we have more people calling in and that we've reached out to actually. We have thousands of people on the line right now, thousands of people within the Southeast. The polling question is this, is this your first interaction with the American Heart Association? Press one for yes, press two for no. Again, and that's on your phone, if this is your first interaction with the American Heart Association? Press one for yes, press two for no.

We have hundreds and hundreds, we have nearly ... We have over 400 people on this line right now at least who's first interaction with the American Heart Association is tonight. We are so thrilled that you could be with us tonight and with us on this very important telephone call. Well we have so many people on the line and it is right at the top of the hour. So I am going to officially get started with the American Heart Association's Tele Town Hall call on COVID-19.

I'm Bruce Inverso, I'm the Senior Vice President of Health for the American Heart Association Southeast and welcome officially to the American Heart Association's Town Hall. I'm going to again remind people that we have people standing by now for the American Heart Association ready to take your question and we'll do our very best to get to your question for our panelists on the line. Simply

press zero and someone will take your question and we'll do our best to get to it. I'll also be asking a few more polling questions just to get group answers throughout this call.

So, let's start actually with another polling question. Another polling question, a different question that you may have heard before and here's the question, do you know someone who has been impacted by COVID-19? Press one for yes, press two for no. I'll repeat the question. Do you know someone who has been impacted by COVID-19? Press one for yes, press two for no. It's about a 50, 50 split, actually yes it's around right at 50, 50 where some people know someone who's been impacted by COVID-19 and others do not someone personally who's been impacted.

But tonight's call is all about the American Heart Association and COVID-19 and how this pandemic is impacting people in our region and what we can be doing to stay healthy. Just so everyone knows very quickly the states that are in the region of the Southeast for the American Heart Association. Actually we start in the beautiful island of Puerto Rico and we go up to Florida, up to Georgia and South Carolina and North Carolina, over to Tennessee, down to Alabama and over to Mississippi and then into Louisiana, where actually one of our panelists is from. So, again thank you for joining tonight.

It is not my pleasure to introduce our three very special panelists and guest who are joining us tonight. The first is Jeremy Beauchamp, he is the Executive Vice President of the American Heart Association Southeast. Jeremy is joined by Dr. Eduardo Sanchez, Chief Medical Officer for Prevention for the American Heart Association and Molly Kimball a registered Dietician founder of Ochsner Eat Fit and president of the American Heart Association's New Orleans Board of Directors. Jeremy welcome and I'll turn it over to you for the first word.

☐ Jeremy Beauchamp, EVP, AHA, SE:

Well thank you Bruce, thanks so much for that introduction and all the fun facts about the Heart Association as we led into the call. I would like to thank everybody and welcome you to our the first ever Town Hall that we've done in the Southeast via telephone like this, we're really excited to have you all join us. You know for nearly 100 years the American Heart Association has been fighting heart disease and stroke, striving to save and improve lives.

The Heart Association is deeply concerned about the public health crisis that we're facing in our country right now. Really our top priority regarding COVID-19 is the health and wellbeing of all individuals and their families today and in the future in every community everywhere. We're working with researchers, medical experts, hospitals, community leaders, business partners, families and more to reduce the impact of COVID-19 in heart and stroke patients.

Our mission, to be a relentless force for a world of longer and healthier lives is more important now than ever. Millions of people are counting us, through our science based information, health resources, community programs and patient support. We're really fortunate tonight to have Dr. Eduardo Sanchez join us. As Bruce said, Dr. Sanchez is the American Heart Association's Chief Medical Office for prevention.

I'd love to start off tonight Dr. Sanchez you know thinking about COVID-19, we really first thought this was a respiratory virus. Now we know it's much more. What have you seen and you know what your observations about this virus at this point?

☐ Dr. Eduardo Sanchez, CMO, Prevention, AHA:

Well thank you Jeremy, thanks for having me but yeah COVID-19 definitely thought of as a respiratory illness. Definitely does its more damage in the lungs. But affects the body from head to toe. It can infect and affect the brain. It can of course affect the heart, that's important to us. It can cause heart

inflammation, it can cause what are called arrhythmias which are irregular heart beats that can result in sudden cardiac arrest. It can affect the kidneys and it can affect blood vessels all the way down to the feet.

But I'd say Jeremy that, almost more important than where can the virus do damage, it's who amongst us might be at higher risk if we were to get the virus of having bad things happen? From the perspective of the heart association, one thing that we've been paying attention to since the first reports came from Wuhan, is that the virus can affect persons very adversely.

That is have a bad, bad outcome either a very severe COVID-19 experience or death. In persons who have cardiovascular disease already in persons who have high blood pressure, persons who have type 2 diabetes, persons who have morbid obesity and persons particular in their 70s or 80s but people over age 65, are generally at higher risk. So it does affect many parts of the body, but maybe more important if you are in one of those high risk categories you have to be extra careful.

☒ Jeremy Beauchamp, EVP, AHA, SE:

Well thank you for that Eduardo, you know I think it's so important that we all pay attention to what's going on around us and to certainly follow what we're hearing. You know another big thing the American Heart Association noticed is during the COVID-19 epidemic is it's, or pandemic as it's become, is that real need for nutrition security across the Southeast. So, I wanted to share a couple of examples of how the Heart Association's staff and volunteers and working in all of our local communities, really connecting nutritious food to food banks so people can eat healthy.

For example, in Atlanta we got healthy snacks added to meals that were delivered by schools to low income students. In Charlotte, North Carolina we saw that we were able to get two tones of fresh fruits and vegetables delivered in communities via food bank partnership. In Mississippi, we worked with universities to help establish food pantries for students. In Memphis, we partnered with another non-profit to build an aquaponics center to grow enough food to feed 50 families in a low income neighborhood.

You know these are just a few examples of how the American Heart Association has done our work in the many communities we serve and really around the country. So, Bruce let me turn it back over to you to talk about how our participants can get in and ask their questions.

Bruce Inverso-Moderator:

Thank you very much Jeremy, and Dr. Sanchez, great information already. Just so everyone knows we have over 3,000 people on the line listening to this throughout the Southeast. We are simulcasting this telephone call in Spanish. So our Spanish speaking friends can hear this important information as well. So thank you all for joining. As a reminder and we've had many question come in, to ask a question press zero now and we have people from the American Heart Association right now available to take your question to be read on this call.

I promise we'll do our very best to get your question. I'm seeing some very good questions come through. So again please press zero to ask a question. Jeremy I'll turn it back over to you with our second high level guest.

☒ Jeremy Beauchamp, EVP, AHA, SE:

Thanks so much Bruce and I look forward to getting the questions real soon. Let's first go to a registered dietician that we have with us tonight, Molly Kimball and Molly is the founder of Ochsner Eat Fit New Orleans. She's a leading volunteer to the American Heart Association and actually serves as the

President of our Board of Directors in New Orleans. You know Molly as a registered dietician how are you counseling people who are trying to eat healthy and manage the stress of life during these days?

☐ Molly Kimball, Registered Dietitian. Founder of:

Yeah so Dr. Sanchez discussed you know we know that all of us of course are at risk for corona virus. But there is that population that is most at risk and there's a lot of nutritionally that can be done about those disease states anyway take COVID aside. But the reality is that you know there's always that, I use the air quotes, should. A lot of us know what we should be doing.

People know that they should be eating, more vegetables, less sugar, less animal fats, less fried foods, but there's a barrier there, there's a disconnect. So, there's three main things that I'm going to touch on very quickly with our group, that kind of lead up nutrition. While we might have the knowing food wise what to do, there's a lot more that goes into the emotional reasons we eat, the psychology reasons we eat that have nothing to do with simply knowing what we should eat.

So, I'll talk a bit about the power of patience. I'll talk a bit about staying positive, and then we'll talk about physical wellness and nutrition and what to do there. So what I mean by the power of patience is during something like corona virus, during a crisis like this, well all handle stress in very, very different ways and it can be really challenging and really frustrating, when people around us, handle these in such different ways than we do.

So, we might think that they're overreacting extremely or they're under reacting, but the most important thing to remember is that stress and our reactions to stress it is all relative. Remembering that helps us to not be frustrated, helps us to not self sabotage out of frustration. What I would encourage all of us is remembering to keep in mind the differences, think outside of ourselves and that this is bigger than us and so reach out to those around you, ask how they're doing. Reach outside of ourselves and when they start to answer you, be quiet and listen and really listen to them. So, be patient, be loving and be forgiving, with others and with ourselves.

So, that I would say first and foremost, if we can get that under control, our stress is going to greatly reduce and that is going to help the next two things we're going to talk about. When we talk about staying positive and seeking positivity, there's positive things that happen all around us, there's funny anecdotes, there's acts of kindness that happen between strangers right in front of us. There's things that we see all that time that are these little positive moments in what might be otherwise stressful situations. So, I'd encourage everybody on this call to actively seek these out.

They're there, we just don't always allow ourselves to see them, and the more that we can take in these elements of positivity, it's going to help edge out that stress that we're feeling. So, finally when we talk about physical wellness, there's four main things that I look here, one is nutrition, the foods we're putting into your body. While there's a plethora of things that we can do, I would say the most common thing that I see people turn to in times of stress are sugars and processed carbs, white carbs. So, you know whether it's fast foods, sweet things like this.

So this is not good, these foods are proinflammatory, they cause inflammation in our body, they cause a whole host of negative adverse effects directly linked to all those disease states that Dr. Sanchez mentioned earlier. So, as much as possible trying to limit these foods. Then doing all the things we know that we "should do" eat as many vegetables as possible, fresh fruits, whole grains. The plant based fats, olive oil.

When it comes to nutrition that's kind of a giant box that we need to check. But three other things I would look at, alcohol, if you're drinking more than the [inaudible 00:23:24] moderate one that

you drink today, take a close look at why. If you're drinking more than usually, especially take a close look at your relationship and does this need to be reevaluated, that relationship with alcohol.

Physical activity, any kind of movement counts, that's going to be a huge stress reducer as well. Aiming for at least 30 minutes a day, but even 5 or 10 is enough to help boost that mood. Then finally sleep. This is the huge element we think about diet and exercise but sleep is really critical for our whole body health. Aiming for at least seven hours a night for optimal immune function.

Skimping on sleep, also makes it more likely that we're going to overeat on those sugars and white carbs, so it is the sick cycle. So if we can try to get these things in place even starting with one of these that you heard me talk about that you feel might be your weakest link, that's going to be a step to start to repair these patterns and end up these small steps become giant lifestyle changes.

Bruce Inverso-Moderator:

Thank you so much Molly, great information that we could all benefit from, I know I was taking notes myself on what you were saying. We have thousands of people on the line. Many great questions coming in and I'm going to get to those questions now for our expert panelists. As a reminder for everyone on the call to ask a question press zero now. People from the American Heart Association are doing a fantastic job, they're available right now to take your questions and we'll do everything we can to get your question read on this call so our expert panelists can answer.

Our first question is from [Sheryl 00:25:00] in Winter Park, Florida right down the road from me in Saint Pete. What are the risks for someone who has had COVID-19 of getting it again especially when being with family members from out-of-state who many not know that they have the corona virus? Maybe Dr. Sanchez you want to start with that answer? But what are the risks of getting COVID-19 of getting it again?

🗣️ Dr. Eduardo Sanchez, CMO, Prevention, AHA:

That's such a great question. The unfortunate thing is that we still don't know the answer, the collective we. So usually or in many instances with viral illness in particular you get it and you're not going to get it again. Things like measles are a good examples, influenza not so much, but we have vaccine. Corona virus we think and think is the operative word, that if you've had it, you probably are protected. What we don't know is for how long and we don't know what degree that protection is.

So, my advice to you is to do all the things we're telling other people to do, to protect themselves. Make sure you maintain some distance, those relatives that coming to visit and you should be wearing face masks and everyone should be washing their hands very regularly. So great question. Unfortunately the answer is not yet known, everyone is trying to better understand. There isn't enough knowledge at about how well protected those people are who have antibodies. Those proteins that your body develops to sometimes to protect, but would say practice the three Ws. Wash your hands, watch your distance and wear a mask.

Bruce Inverso-Moderator:

Thank you Dr. Sanchez, great advices absolutely great advice and a great question. I have a question maybe Molly you might be the best one to answer this one. It's from [Julie 00:27:12] in Baton Rouge. How does Nutrition factor into immunity?

🗣️ Molly Kimball, Registered Dietitian. Founder of:

So, I think that that's a great question. There's a lot of different facets. So, when we look at foods that are pro inflammatory, the sugars, the white carbs that I mentioned also trans fats, saturated fats things that would be also in deep fried foods, proinflammatory foods causes cascade reactions in our body that ultimately can hinder our immune system function.

There's a lot of other things there that play into your immunity, I mentioned sleep earlier and I can't emphasize that enough. I think it is one of the most underrated benefits that we can do for ourselves. For a lot of people it might be the easiest thing, for some people sleep might be the hardest thing. But, I would say that seven hours of sleep is really key as much as it can for boosting immunity.

Then when it comes back to nutrition, things like Probiotics, so we're learning a lot more about how our gut health affects our whole body immune system. We think probiotics we think yogurt but high fiber foods. So, those vegetables, those fruits, those whole grains, those high fiber foods are full of prebiotics which is the food for the good bacteria.

So having a diet rich in these fiber foods is going to be key for establishing that environment for these good bacteria. Then while yogurt is good, all types of cultured or fermented foods are good as well that we can add in. The one thing I would caution with yogurt a lot of people go gung ho with that, but it ends up a lot of sugar, or a lot of artificial additives so making sure you're checking that label closely as you're looking for your probiotics.

If someone is going to supplement with probiotics I do prefer food versus supplements because we don't know how long something's been sitting on a shelf. So when we're looking for those live active cultures the supplement really isn't typically going to be the best bet.

Bruce Inverso-Moderator:

Thank you so much Molly. Dr. Sanchez this might be best for you. I have a question from [Sheila 00:29:18] in South Carolina. Are you more prone to the virus if you have AFib or a stent?

🔗 Dr. Eduardo Sanchez, CMO, Prevention, AHA:

So, such great questions. In my opinion, AFib and having a stent, first of all you have stent because you have underlying, a person with a stent had underlying cardiovascular disease. So, absolutely that person is absolutely no doubt about it, at higher risk of not getting COVID-19, of having a severe or failed COVID-19. I want to stress that there are a few things that we know for sure that put one at a higher risk, if you had 10 people all exposed exactly the same way, we still don't completely understand what might put somebody at higher risk or not.

But we know for sure that if among those 10 people there are people with cardiovascular disease, having a stent absolutely, having a AFib, in my opinion I would air on the side of atrial fibrillation as a high risk category and protect yourself and have others protect you more than you might if you don't. Again, I think it's, let me say one more thing. It's critical important to remind all of us that while there are people with certain factors, age, underlying medical conditions who are at higher risk of having bad things happen if they get COVID-19. There is no guarantee among anyone else that they won't have bad or fatal COVID-19.

We hear of cases of young people of children, of persons with no risk factors whatsoever, you have higher risk if these factors, you still have some risk. So the better part of valor is to do the things that I've been talking about. If you are in one of those high risk categories, be extra careful, stay even more away from people and quite frankly, avoid crowds as much as possible.

I'm going to add one thing to what Molly was saying, I think Molly would completely agree, sleep is important, the foods you eat is important and physical activity is the trifecta. I know she

mentioned it earlier, but even in answering the question about inflammation, regular physical activity. Those three things are the things you can do in addition to the three Ws to protect yourself as much as possible during this time of COVID.

Bruce Inverso-Moderator:

Outstanding information, thank you so much Dr. Sanchez and Molly and to everyone listening. Please press zero now to ask your questions, we have some great questions right now and we want to try to get to your question as well, we have people standing by, please press zero to answer your question. Jeremy I'll turn it back over to you.

🗣️ Jeremy Beauchamp, EVP, AHA, SE:

Thanks so much Bruce. You know one of the things that we've been seeing is a significant drop in the number of people going to the emergency room because of fear of COVID-19. Dr. Sanchez, we at the American Heart Association have a very simple but powerful message regarding this outcome that we're seeing. Do you want to share a little bit about that?

🗣️ Dr. Eduardo Sanchez, CMO, Prevention, AHA:

Absolutely that is such an important question. So, in this time of COVID-19 it's really important for people to know other disease are still happening and if you have high blood pressure or you have type 2 diabetes please, please take your medicine. So, I failed you because I didn't say eat healthy, be physically active, sleep right as Molly is saying, practice the three Ws and take your medicine. But what Jeremy is talking about is if people have gotten the message so effectively about COVID-19 that they are not calling 911 when they have symptoms that could be heart attack, could be stroke, could be heart failure. It is so important to call 911.

Ladies and gentlemen, right now emergency departments and hospitals are safer places to be, to be protected from COVID-19 than anywhere else you could be except maybe your own home. If you're going to the supermarket, you're going to a place that's risky, you're going to the store, you're going to a place that is risk. If you have symptoms call 911. We are launching and are in the midst on the early stages of relaunching a campaign, Don't Die of Doubt.

If you think you're having a heart attack or you are watching somebody who you think is having a heart attack, stroke or is really struggling with catching their breath, call 911 the hospital is the place to get evaluated in a very safe environment. You will not be getting COVID-19 in an emergency department. But you will be getting life saving therapy. Ladies and gentlemen, minutes matter, minute matter. If it sounds what we have told you, pressure in your chest or any of the fast signs that you have some weakness in a part of your body, or you have other parts of your body that are drooping or you're having difficulty with your speech call 911 immediately, minutes matter.

Bruce Inverso-Moderator:

Very critical, critical, life saving message from the American Heart Association's Chief Medical Office of Prevention Dr. Eduardo Sanchez thank you so much Dr Sanchez for that very important information. We will continue to get some more questions, it's time now for another poll. Remember, we will not share individual answers we are just taking a poll so that we have information about what is on your mind, these days.

Here's the question, if you were faced with a medical emergency, would you feel comfortable calling 911 and going to the hospital? Press one for yes, press two for no. Here's the question again, if

you were faced with a medical emergency, would you feel comfortable calling 911 and going to the hospital? Press one for yes, press two for no.

Dr. Sanchez your words are convincing because an overwhelming 85%, hundreds of people have said, they feel would feel comfortable calling 911 and going to the hospital in a medical emergency. So, the people are listening on this call and it's very critical life saving information so, thank you for that. Jeremy, I'll turn it back over to you to ask your registered dietician and President of the American Heart Association New Orleans' board and the founder of Ochsner Eat Fit, Molly Kimball, a question.

☒ Jeremy Beauchamp, EVP, AHA, SE:

Thanks Bruce I think that's great to hear that, those poll results and maybe what I'll ask everyone on this call to do then is be that advocate for information that you're learning tonight and certainly share that with others, it's such important news that hospitals are the safest place to be and we should be using them as always.

You know one the things we've seen along those lines is an increased number of tele health visits for lots of different doctors, lots of different disease states, specialists is tele health is happening everyone. Molly I understand you've been using Tele health to counsel your patients as well, how has your experience been with that?

☒ Molly Kimball, Registered Dietitian. Founder of:

Yeah so it's actually been a very new thing for us. I manage our nutrition department with Ochsner Health and we actually outpatient registered dietitians that are actually at a wellness center not a hospital or a normal clinic but a wellness center type of environment that see, we usually call them clients, because they come in versus, patients, they all hear me use that term.

For more than two decades we've seen people one on one and you know couples. We were actually in the process of incorporating virtual visits through tele medicine. We were lucky that we had started that process so we were able to flip that switch and start it immediately when the quarantine really started. So for us, we had a really great response, we had a high level of interest in people who were looking to take care of their health and be as pro active as possible.

Our dieticians were actually as busy if not even a slight bit more with those clients virtually. So some of the pros that we found is you know and we're continuing to do tele medicine now, so even though [inaudible 00:38:41] people come in and meet in person a lot of people still choose to do virtual visits for a variety of reasons. So, it allows us to be able to meet the person where they are.

We're still, we find that through tele medicine we are able to still communicate with that client as we would normally in person as far as getting the information there, you know confirming that they understand they ask questions. Having video versus just audio it does help to stay more connected because you're able to see people's expression and body language.

It also allowed us to see people or allows us to see people, not just right here in the New Orleans area but throughout the state where we have the capacity to see clients and go through insurance. We're limited to the state but it allows us to stretch it to all boarder of the state.

The other benefit there is people can do it during their lunch break, they don't have to take off time from work to come in for a nutrition consult they can do it, during their break at work and if they're still quarantining at home or just working from home I should say, they can easily grab whatever product they might be talking about, hold it up to the camera and the dietician and the client can kind of talk through it. So, it allows a lot of flexibility there.

There's some draw backs though, sometimes it's staticky, sometimes the connection isn't great, it might be hard to hear or see each other. Sometimes the video visits, people might not take them as seriously as in person. One of our dietician says that she had a tele medicine client who basically took her on her errand run with her. So, she started at her gym and drove to Trader Joe's and went shopping and she said, "I don't know how much she got out of it because she was so pre occupied but she was able to answer her questions as she was going through the store." So it was just one of the most bizarre appointments.

One guy told us that he was in his closet at work because it was the only space that was private and he felt like he could really talk freely so he might have kind of a cubical workspace. So there's been interesting things that we've had to work around. But largely I would say it's been a really positive response from our team of dieticians and also from the clients who are participating in it. It's opened it up to so many people who otherwise might not have that access.

Bruce Inverso-Moderator:

Thank you so much Molly for that helpful information, tele health Services and actually that's going to be the topic of our next poll, which is, have you or a family member used tele health services? Press one for yes, press two for no. Again the question, have you or a family member used tele health services? Press one for yes, press two for no. Right now it's about 45% have and 55 have not. So but as I think it gets more and more, the people are still able to use and more and more get used to it, I think that we'll see those numbers go up even more.

But 40% today use tele health and they were 45% and three months ago that number would have been a lot less. So it is time for more questions and the questions are rolling in and they're excellent questions. This question Dr. Sanchez is mostly likely for you, it's from [Barbara 00:41:57] in Canton, Georgia. People are talking about high blood pressure being one of the high risks for COVID-19. Are they talking about people with uncontrolled high blood pressure, or people who are taking medicine for high blood pressure?

📧 Dr. Eduardo Sanchez, CMO, Prevention, AHA:

So, that's an excellent question. One of the things I would say, I think that Jeremy earlier on was talking about some of the things that the American Heart Association has been doing to better understand with much more detail, what the answer to your question is. So, right now we're not sure. My hunch is that, if you have controlled blood pressure and your weight is good and you eat healthy and you're physically active, you're better off than if you are, if you have uncontrolled blood pressure, have obesity and don't move around. But we honestly don't know.

As I said before with the question about atrial fibrillation and having a stent the better part of valor is to just exercise, extreme citation so the three Ws wear your mask, wash your hands, watch your distance. The three lifestyle at least three, eat healthy, be physically active, get plenty of sleep and then take your medicine. So with the blood pressure question, take your medicine.

If your blood pressure is not under control, this is a reminder to all of you, that given what Molly said and given what we're talking about, if you have not had any contact with your doctor in the last two to three months, I would say just given the circumstances, it is very appropriate to reach out. It maybe a tele visit, it maybe a drive by step in and step out. But now would be a really good time to reconnect with your doc if you have blood pressure controlled, really well not so well controlled. Great question, sorry I don't have the exact answer for you.

Bruce Inverso-Moderator:

Still, very helpful information Dr. Sanchez, thank you for your insights. We have another question from David in Winter Garden, Florida. If someone tested positive for COVID-19 is there a need for them to wear a mask once they recover?

🗨️ Dr. Eduardo Sanchez, CMO, Prevention, AHA:

So, that is a really, really good question. The answer is I think the answer is yes. I think the answer is yes, I can't tell you for how long they might be shedding virus but we're not positive of when people quit shedding in other words, where they have viruses that they can actually spread to someone else. It is probably the case and so much is that the word probably is used over and over again because we still you know you think about it six months ago, we were just learning about what we now call COVID-19.

The amount that we know is pretty amazing, but the amount that we have yet to know is even bigger and more and so I think that one should wear a mask. The other part of that is I believe that right now the custom, the practice, we ought to have a culture of wearing a mask. It is my opinion and the way I try to talk about this is that wearing a mask is saying to someone else I care about you, I love you my neighbor, so much that I'm wearing a mask to protect you from a virus that I may have but I'm not aware of.

Bruce Inverso-Moderator:

Thank you Dr. Sanchez, we have a question from Ted in Chapel Hill, North Carolina. We know that African-Americans and the brown population are suffering more from COVID-19 than others, giving this information, what if anything can the American Heart Association and others do to mitigate these risks?

🗨️ Dr. Eduardo Sanchez, CMO, Prevention, AHA:

That is such-

Bruce Inverso-Moderator:

Perhaps Dr. Sanchez you're like to ... Yeah go ahead.

🗨️ Dr. Eduardo Sanchez, CMO, Prevention, AHA:

That is such a great question and one that the American Heart Association has had in its sights for a while. So, the things that we are doing include advocating for everyone to have access to health insurance. The Southeast and Texas is just one state away from you all, and we are much like most of the states in the Southeast who's state government has chosen in general not to expand Medicaid, there's a handful that have.

The truth is, it makes a difference to know that you can go see a doctor and not have to worry about a bill that you will not be able to pay is a green light go get care when you need it. We have been advocating for making sure that any COVID related expenses are covered for anybody, period. So, we are advocating for those things. We are also, as an organization, recognizing that the socio economic conditions that sometimes are borne disproportionately by Latinos, African-Americans, American-Indians, Alaskan natives, put them in situation where they are doing high risk work in essential work categories.

One of that we are advocating for in different places, some of it at the government level and some of it with public private partnerships, is to make sure that places where people work in essential services are providing those individuals all of the protective measures that are going to keep them as safe as possible.

The list is quite long and I will say I imagine others have already said this, heart.org is our website. There is a bunch of, that's the fancy word for plethora of information that will answer many of the questions that won't get answered tonight. Even more information on some of the question that have been asked tonight.

Bruce Inverso-Moderator:

I'm glad you said that because actually we do have a site, a very specific site, to help answer some of the questions broadly that have come on this call so far. Some more information including a recap of this call and other very important resource from the American Heart Association when it comes to COVID. That web address, please write it down if you can, that web address with more information is www.heart.org/southeast. That's www.heart.org/southeast. Hopefully the callers, the participants on this call can go there and ask find some answers as well as some additional resources and a recap of this call.

I'm going to ask another question, this is from [Gerald 00:49:47] in West Boca, Florida. Gerald says I've been checked for the virus and I am okay at this point. But my understanding is, that this may become worse in perhaps the next month. Is it a good idea to be tested again at some point?

☒ Dr. Eduardo Sanchez, CMO, Prevention, AHA:

So, that is a question loaded with some great stuff. One thing is that I was going to share earlier is that the activity of the virus is migrating from the Northeast where we all watched what happened in New York and New Jersey and in Massachusetts and in Pennsylvania. Now those things are ... That the infection is moving in a slightly different way, but with increased activity week after week in many states of the Southeast.

So one, there is good evidence or maybe we could call it bad evidence because it's not a good thing, that virus activity, COVID activity is on the rise. More positive cases, more hospitalization and in some communities and in some states, hospitals are beginning to see an influx of cases. So should you test yourself again? You should test yourself again if you believe that you've been exposed and then you're having symptoms. I think that would be how I would decide whether I would get retested.

Have I been exposed? Or am I having symptoms and maybe was exposed unknowingly? But if you're asymptomatic for the moment I would not, but let me just repeat, even if you're asymptomatic, it doesn't mean you don't have virus. If you have virus, you could be spreading it, please ladies and gentlemen, please wear masks when you're out in public=, maintain distance from others, six feet, and wash your hands a bunch. Because even though the virus is not primarily spread by surfaces, you can get it if you just touch something that someone else who has the virus might touched, sneezed on, coughed on, breathed on. The three Ws, please, please practice the three Ws.

Bruce Inverso-Moderator:

Thank you for that. Another question this is from [Lorie 00:52:23], in Ludowici, Georgia, I don't know if I pronounced that correctly. But Lorie in Georgia wants to know, they keep saying to wear a mask, what is it for? Is it to protect me from others, or others from me and how reliable are cloth masks?

☒ Dr. Eduardo Sanchez, CMO, Prevention, AHA:

So, that's a really, really good important question. The cloth masks that we are wearing and the masks that are generally available to the general public right now, are masks that protect others from the wearer. So, when you are wearing a mask you are protecting others from you. The mask has little

protective effect for the person who's wearing it. In other words that mask is not providing you a high degree of protection. Some? Yes. Enough? No.

N95 masks which used to be available for the general public but are not because they're in such high demand for hospitals are the only kind of masks that will protect the wearer from the virus. So, when you're wearing a mask you are protecting others, back to what I said before, you are loving your neighbor by wearing a mask, you are not loving yourself by wearing a mask, except for the fact, that when you love your neighbor out love yourself.

When and if N95 masks become available I believe that until COVID-19 is able to be combated with an effective vaccine, N95 masks will be the thing that we would aspire to have everybody wearing, because it would protect you, the wearer and others who are around you. But right now, what we have are the kinds of masks that protect others from the wearer not the other way around.

Bruce Inverso-Moderator:

Great advice and great insights Dr. Sanchez. Molly do you have any final comments around tele health or around any of the things that we talked about tonight or any of the questions people ask that from your perspective that you see in your practice?

🗨 Molly Kimball, Registered Dietitian. Founder of:

Yeah so I think the key elements of wellness that Dr. Sanchez and I have kind of it keeps coming back to for all these reasons, if one reason isn't enough to motivate you then maybe another. So, while some of these things may have been your list for years, I know I could improve my exercise and my diet because I wanted to lose a few pounds. Well now there can be extra incentive, extra motivation to say, okay it's not just about aesthetics now, it's not just about vanity, there's other reasons that are truly life impacting that can benefit from making these changes.

The other thing I would say is to cut yourself a little bit of slack and not necessarily seek perfection because there's inevitably the paralysis of perfection. So, if you hear what we're saying and you go, oh my gosh, I'm not doing any of this well, I'm not sleeping well, I'm not moving on a regular basis, you know my diet is a disaster, I'm stressed all these things, it can be overwhelming and almost feel impossible to almost get started when you feel like gosh, there's so far for me to go.

So what I would say is as you've heard us talking and you hear, okay, what's my biggest weakness? What's my biggest room for improvement? If that's where you narrow your focus and that's what you start working towards, I would encourage you to at least take that step. So not hearing everything we say and going oh my gosh it's just, there's so much to do, it's impossible to get it all in, take one thing, break it down.

As I mentioned earlier for a lot of people that's sugar, for a lot of people it might just be getting moving, taking that evening walk, instead of coming straight home and sitting on the sofa or whatever else we're doing. So, what is that, like one little micro step that we're going to start making that change in our day and we can really see that lasting impact.

Bruce Inverso-Moderator:

Molly Kimball great advice. Simple steps and don't try to be a perfectionist just get going. I'm going to ask one final poll question which is actually a question I asked earlier, but so many people have joined the line, and I want to ask it again. If you would like to be an advocate and have your voice heard for the American Heart Association as we advocate for the health of our communities. If you would like to be an advocate for the American Heart Association, press one now for yes.

We had hundreds of people press one before, and we're having many, many more press one now for yes. We have so many people on this call who care so much about their neighbors, their friends, their family and the health of their communities, as does the American Heart Association and so we need you to be our voice. So, thank you again for joining the You're the Cure network to be an advocate.

I would love to thank our three very special guests and expert panelists, Jeremy Beauchamp, Executive Vice President of the American Heart Association, Southeast, Dr. Eduardo Sanchez, Chief Medical Officer of Prevention for the American Heart Association, and Molly Kimball a Registered Dietician and founder of Ochsner Eat Fit and President of the American Heart Association, New Orleans Board, thank you all three of you for being on this call and sharing great information.

I'll repeat that website I gave earlier for a recap of information shared on this call and for more answers on the AHA and COVID. Please visit us at www.heart.org\southeast, www.heart.org\southeast. If you would like to leave a voicemail for us with a question or to share a personal story, press one at the end of this call. Be sure to leave your contact information. Again to leave a voice mail, press one at the end of this call.

To our panelists and to all of you listening and participating on the phone and on behalf of the American Heart Association, I'm Bruce Inverso, thank you. This concludes, our Telephone Town Hall on COVID, have a great night.