



Cardiac Screening Initiative Officer Wellness

Jonathan Sheinberg, MD, FACC Police Officer – Cedar Park Police Department

Patrolman Jon Sheinberg



Barnstable Massachusetts



1989



Board Certified in Cardiovascular Disease

- Georgetown University School of Medicine
- Internal Medicine Residency
- Cardiology Fellowship
- 14 Years Service in USAF
 - Cardiologist
 - Flight Surgeon
 - Element Leader
 - Far Forward Critical Care Unit (FFCCU)
 - Operation Enduring Freedom



Police

- Sworn Officer
 - City of Cedar Park

- Central Texas Regional SWAT (CTRS)
 - Medical Director

NO FINANCIAL DISCLOSURES





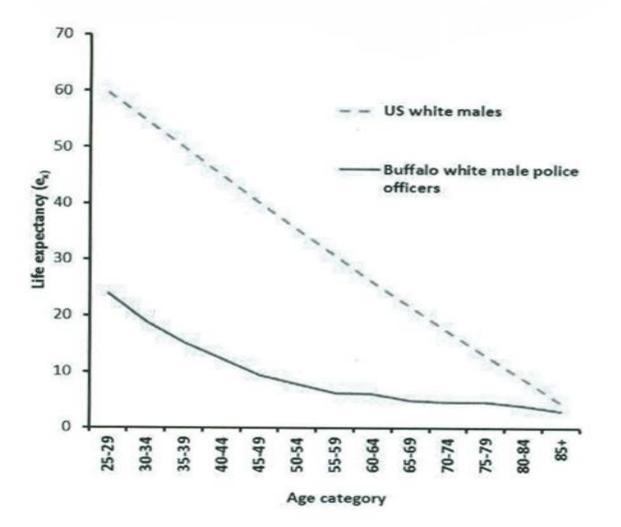




	Law Enforcement	Civilian
Average age of patient with heart attack	49 years	65 years
Heart attacks under age 45	45%	7%
Average Life Expectancy	57 years	79 years

Int J Emerg Ment Health. 2013;15(4):217-28.

Officer Life Expectancy





1. Police officers live an average of 15 years less than the average American.^[1]

2. Nearly 50% of police officers will die from heart disease within five years of retirement.^[2]

3. Statistically, we are 25 times more likely to die from cardiovascular disease (CVD) than from the action of a suspect.^[3]



Officer Down Memorial Page

REMEMBERING ALL OF LAW ENFORCEMENT'S HEROES

<u>2014</u>

Line of Duty Deaths: 127

9/11 related illness: 1 Assault: 2 Automobile accident: 26 Drowned: 2 Duty related illness: 3 Fire: 1 Gunfire: 47 Gunfire (Accidental): 2 Heart attack: 19 Motorcycle accident: 4 Struck by vehicle: 5 Vehicle pursuit: 5 Vehicular assault: 10

<u>2015</u>

Line of Duty Deaths: 32

9/11 related illness: 2 Assault: 1 Automobile accident: 9 Gunfire: 6 Gunfire (Accidental): 1 Heart attack: 9 Motorcycle accident: 1 Struck by vehicle: 2 Vehicle pursuit: 1



Extrapolated over a 24 hour day

2014 – 19 deaths

12h shift -38

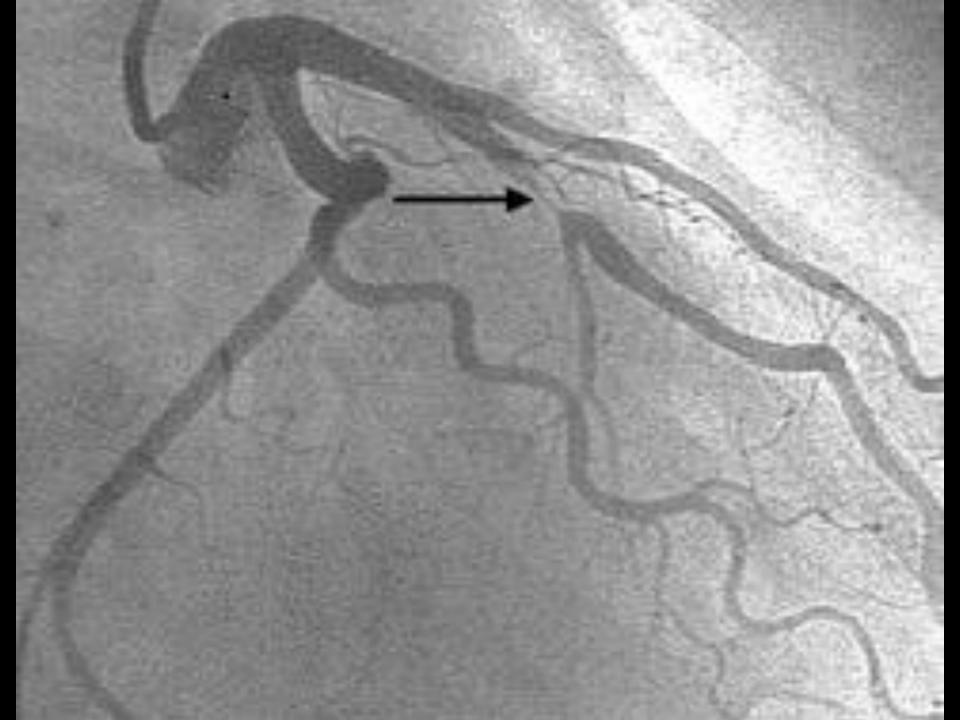
8h shift – 57

<u>2015 – 9 deaths so far</u>

12h shift – 18 8h shift - 27

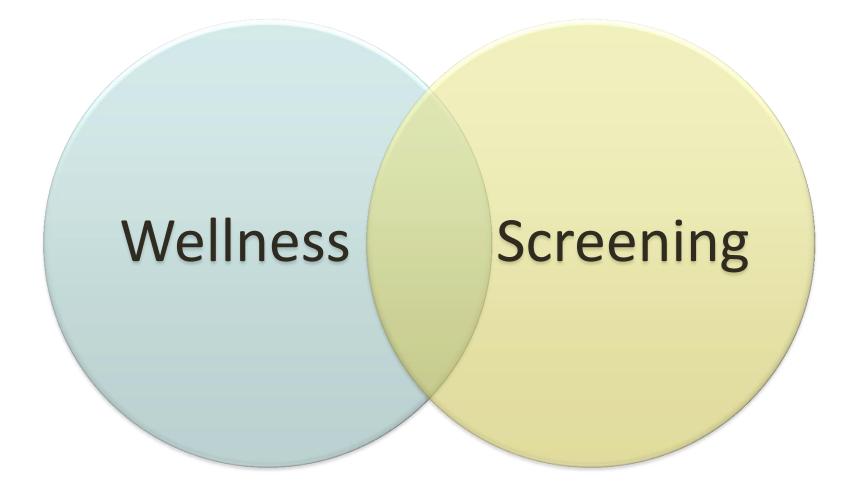


High Risk for heart disease

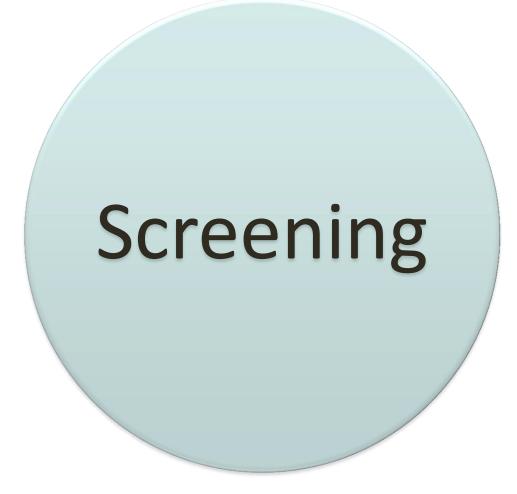


Give me six hours to chop down a tree and I will spend the first four sharpening the axe.

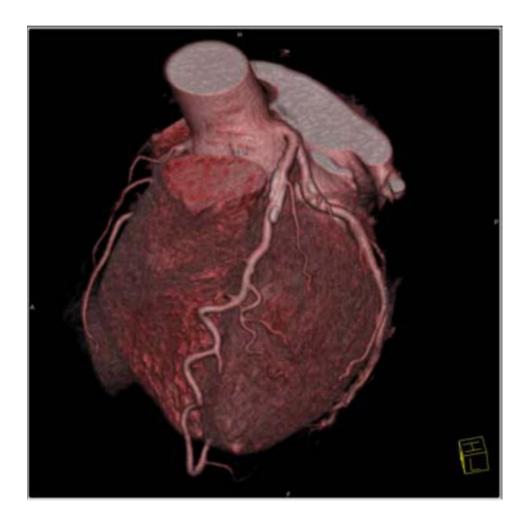
Abraham Lincoln



Examination of a group to separate well persons from those who have an undiagnosed pathologic condition or who are at high risk



Paradigm Shift



Prognostic Paradigm

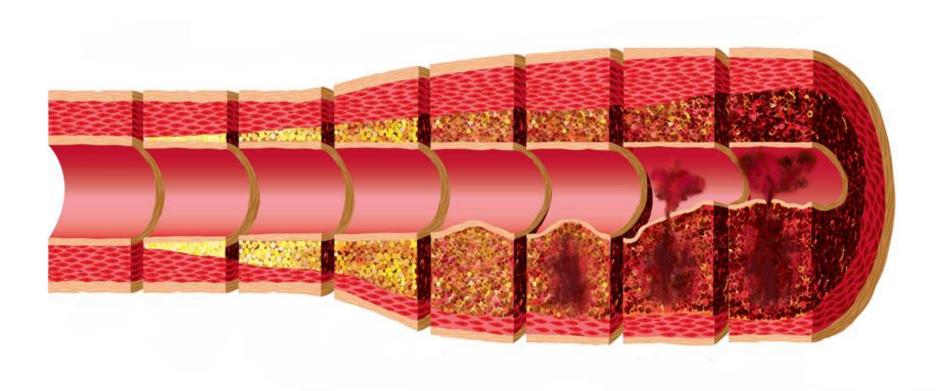
Diagnostic Paradigm

Traditional Framingham Risk

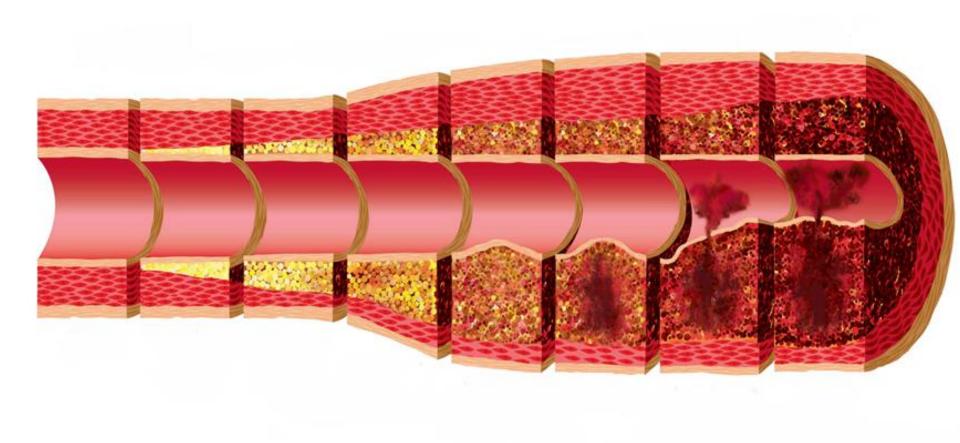
Risk Assessment Tool for Estimating 10-year Risk of Developing Hard CHD

The Framingham Heart Study asks for the following data to estimate 10-year risk for "hard" coronary heart disease outcomes (myocardial infarction and coronary death) in adults aged 20 and older who do not have heart disease or diabetes.

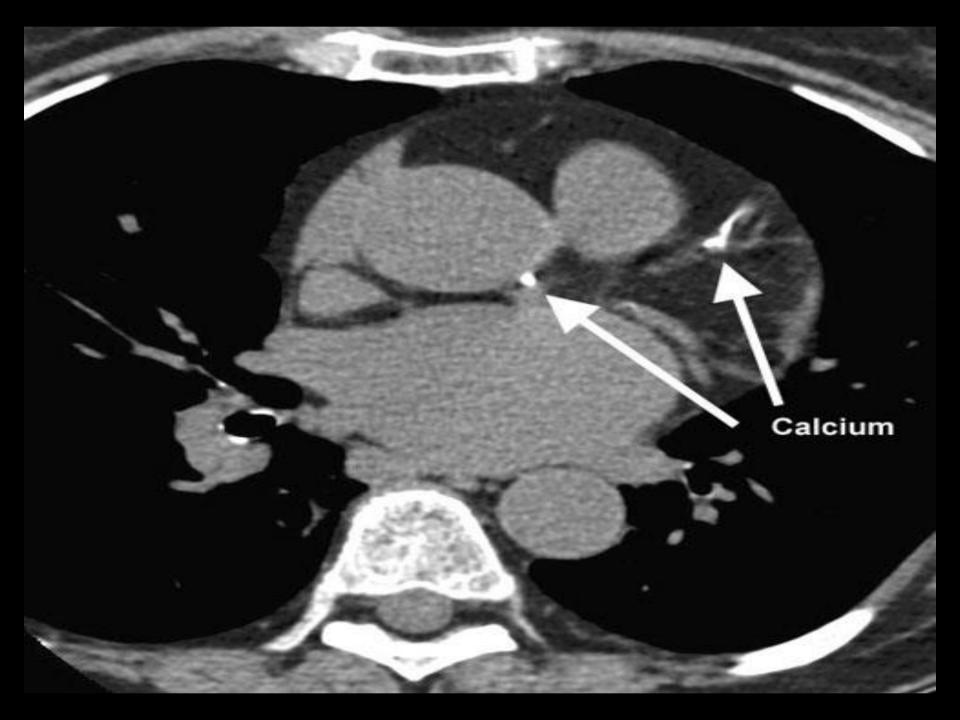
Age:	years		
Gender:	□ Female □	Female Male	
Total Cholesterol:	mg/dL	mg/dL	
HDL Cholesterol:	mg/dL		
Smoker:	□ No □ Yes		
Systolic Blood Press	sure: mm Hg	mm Hg	
Currently on any medi treat high blood press	cation to ure □ No □ Yes		
Calc	ulate 10-Year Risk	Medscape	

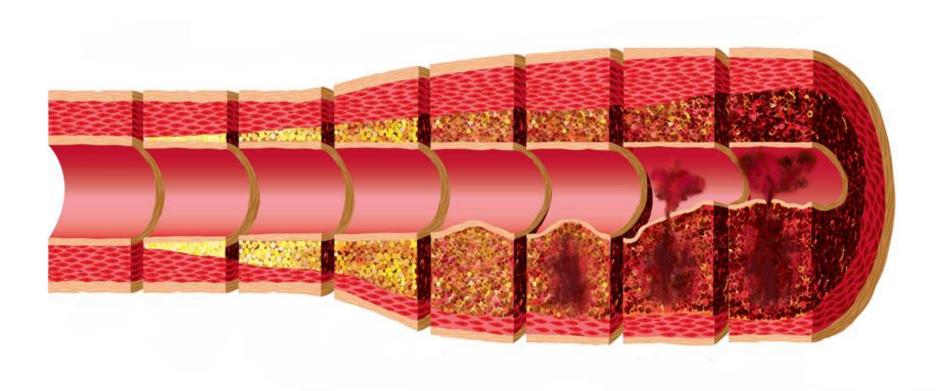








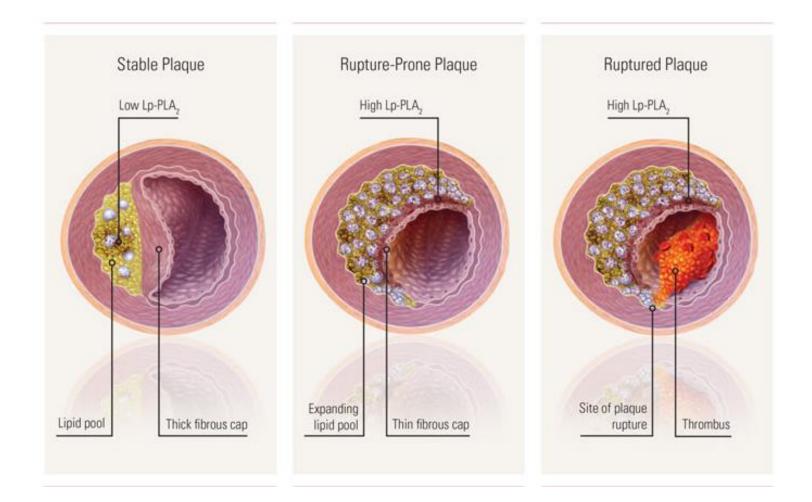


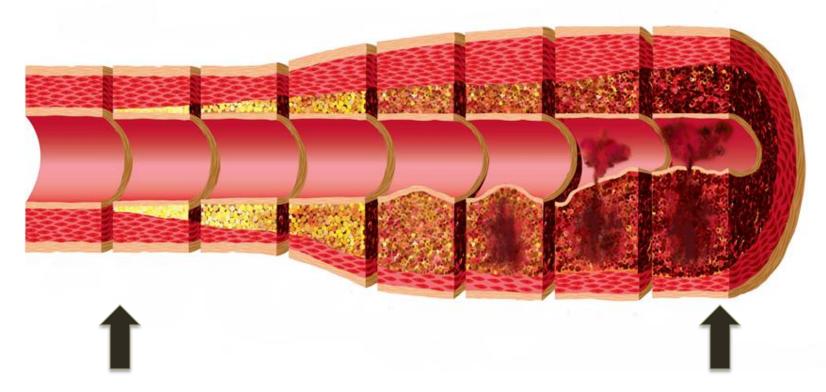






(Lipoprotein-Associated Phospholipase A2)





Coronary Disease

Calcium Score > 0

 $PLA_2 > 200$

Circulation 2007

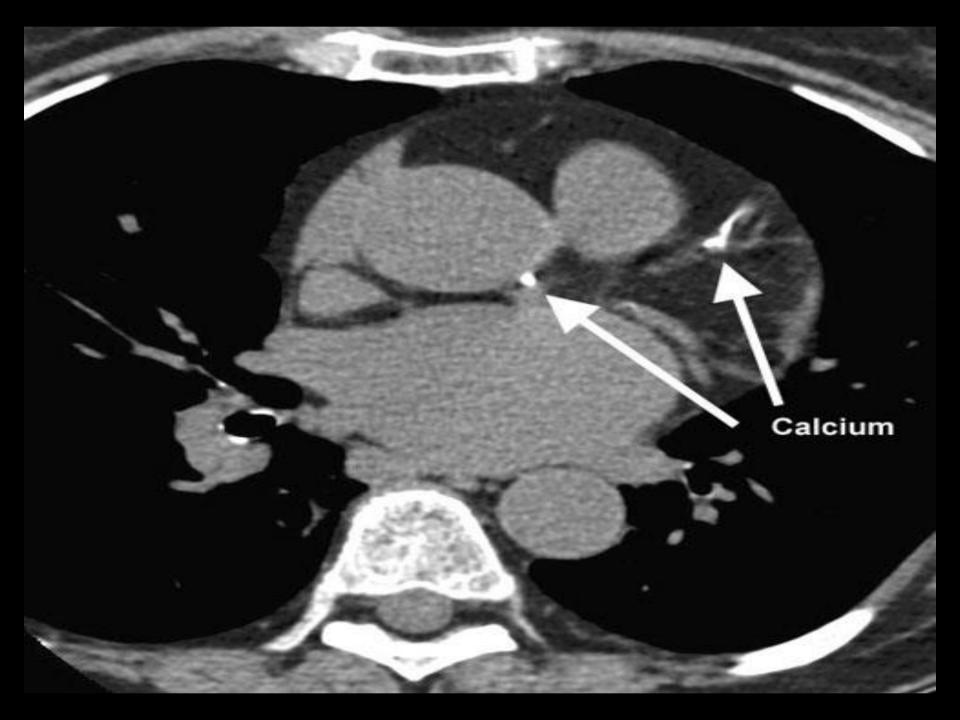


Prevalence of Coronary Artery Disease in New York City Police Officers as Predicted by Coronary Artery Calcium Scoring

Jia Lin See ; Nikolas Wanahita; Nir N Somekh ; Stephen E Nelson ; Albert Barrette ; Kenneth Giedd ; Ste R Bergmann Beth Israel Med Cntr, New York, NY

2068 NYPD Members of the Service (officers)

• Coronary Calcium Score





2007;116:II - 853

 There was NO increased prevalence of coronary disease among members of the NYPD as compared to the general population



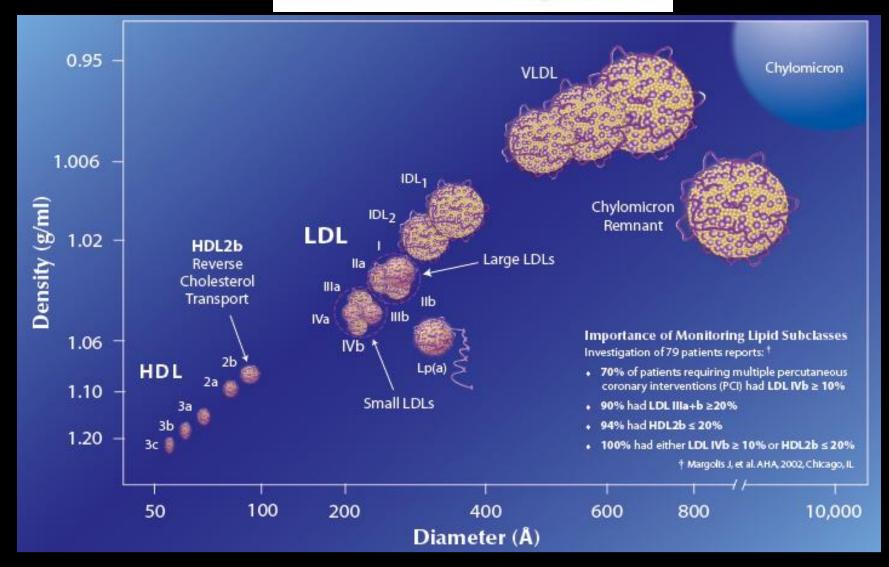
Cardiac Screening Inititative

- 290 Police Volunteers
 - Austin Police
 - Cedar Park Police
 - Treasury Special Agents
 - US Marshall Service



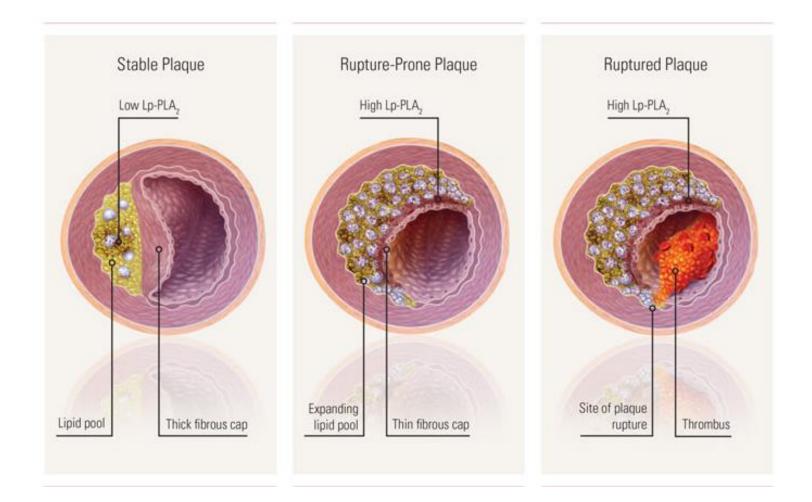


bostonheart diagnostics

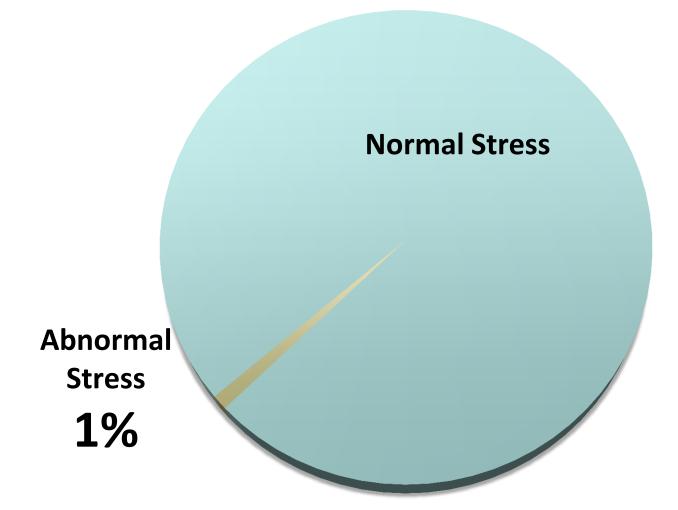




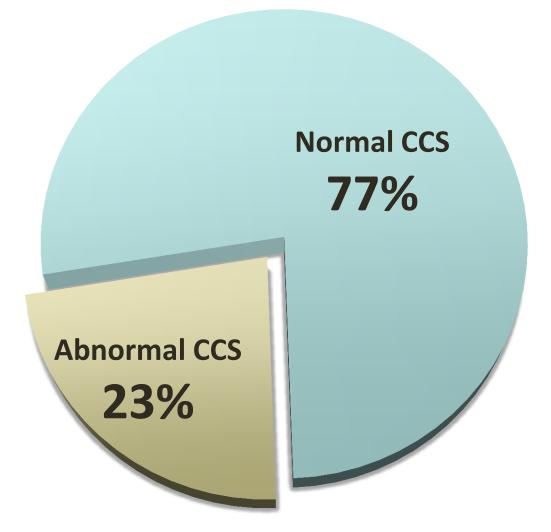
(Lipoprotein-Associated Phospholipase A2)



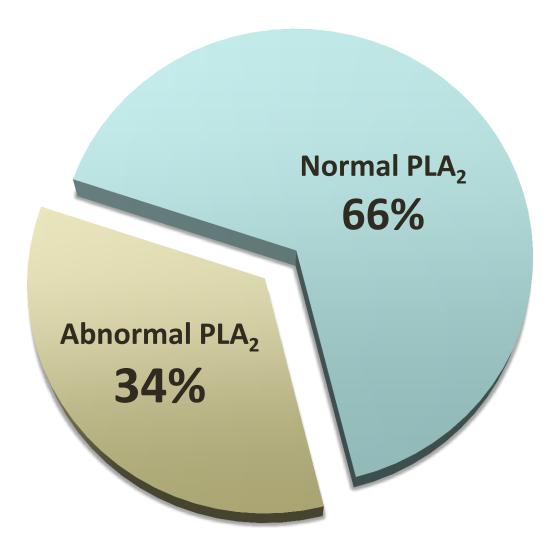
Results of Stress Test

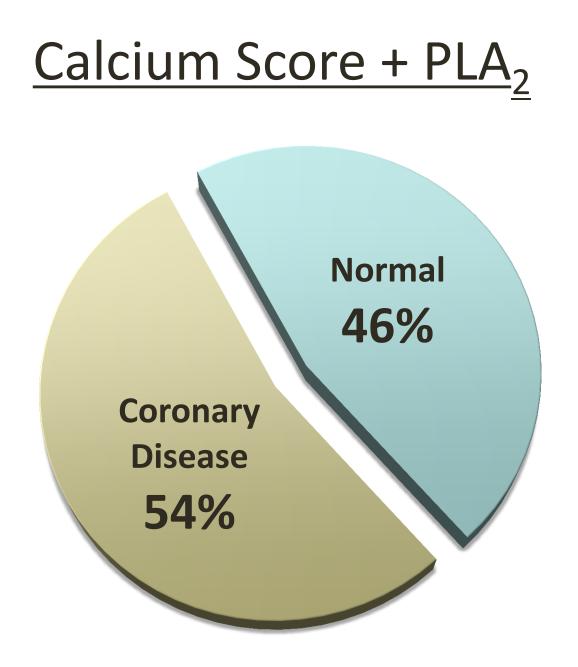


Results of Calcium Score

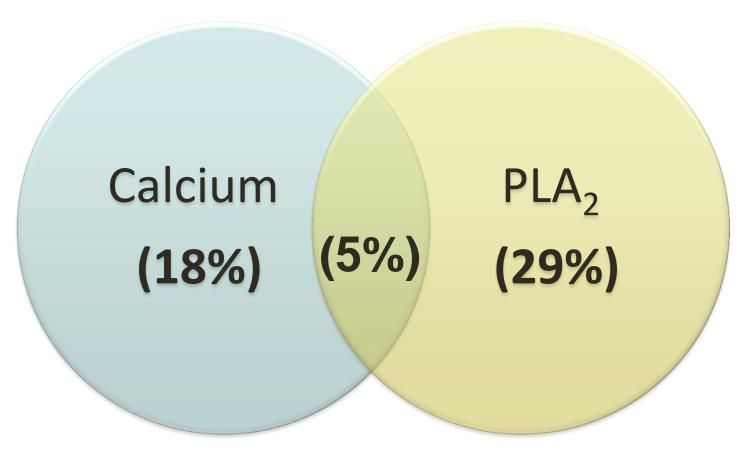


Abnormal PLA₂





Findings



53.8%

Results

		Admin Role	15 (62.5
		Field Role	32 (53.3)
•	NO association of	Investigative Role	29 (46.8)
	Caranary Disaaca with	Female	10 (47.6)
	Coronary Disease with:	Male	67 (53.2)
	– Age	Normal	17 (48.6)
	, , , , , , , , , , , , , , , , , , , ,	Overweight	30 (51.7)
	– Gender	Obese	30 (55.6)
		Hypertensive	32 (55.2)
	 Cholesterol levels 	Normotensive	44 (50.6)
	– Weight	LDL > 130	36 (52.2)
		LDL < 130	41 (52.6)
	 Presence of diabetes 	LDL > 100	64 (51.6)
		LDL < 100	13 (56.5)
	– Unit	sdLDL-c > 20	63 (52.9)
		sdLDL-c < 20	13 (48.2)
		HDL < 50	32 (46.4)
		HDL > 50	45 (57.7)
			10/51
		TG > 150	18 (51.4

	N (%)	N (%)
Characteristic	with disease	without disease
Admin Role	15 (62.5)	9 (37.5)
Field Role	32 (53.3)	28 (46.7)
Investigative Role	29 (46.8)	33 (53.2)
Female	10 (47.6)	11 (52.4)
Male	67 (53.2)	59 (46.8)
Normal	17 (48.6)	18 (51.4)
Overweight	30 (51.7)	28 (48.3)
Obese	30 (55.6)	24 (44.4)
Hypertensive	32 (55.2)	26 (44.8)
Normotensive	44 (50.6)	43 (49.4)
LDL > 130	36 (52.2)	33 (47.8)
LDL < 130	41 (52.6)	37 (47.4)
LDL > 100	64 (51.6)	60 (48.4)
LDL < 100	13 (56.5)	10 (43.5)
sdLDL-c > 20	63 (52.9)	56 (47.1)
sdLDL-c < 20	13 (48.2)	14 (51.8)
HDL < 50	32 (46.4)	37 (53.6)
HDL > 50	45 (57.7)	33 (42.3)
TG > 150	18 (51.4)	17 (47.6)
TG < 150		
10 < 100	59 (52.7)	53 (47.3)

THE Risk Factor...





High Risk for heart disease

Lp-PLA₂ Included in Four Major Guidelines









2010 ACCF/AHA Guideline for Assessment of Cardiovascular Risk in Asymptomatic Adults

Lp-PLA₂ testing may be considered **in intermediate-risk asymptomatic** adults.

2011 AHA/ASA Guidelines for the Primary Prevention of Stroke

Measurement of inflammatory markers such as hs-CRP or Lp-PLA₂ in patients without CVD may be considered to identify patients who may be at **increased risk**.

2012 AACE Guidelines for Management of Dyslipidemia and Prevention of Atherosclerosis.

 Test for Lp-PLA₂, which in some studies has demonstrated more specificity than highly sensitive CRP, when it is necessary to further stratify a patient's CVD risk.

2012 European Guidelines on CVD Prevention in Clinical Practice -European Society of Cardiology

• Lp-PLA₂ may be measured as a part of a refined risk assessment in patients **at high risk** of a recurrent acute atherothrombotic event. Class IIb.



Uncover hidden risk for heart attack and stroke

- The only blood test cleared by the FDA to assess the risk for *both heart attack and ischemic stroke*
- Simple blood test, no fasting required prior to draw
- Lp-PLA₂ CPT Code: 83698; the PLAC Test is reimbursed by Medicare, and many insurance providers. There are more than 150 million covered lives in the US.

The condition of good physical, mental and emotional health, especially when maintained by an appropriate diet, exercise, and other lifestyle modifications



80% of Police Officers are Overweight





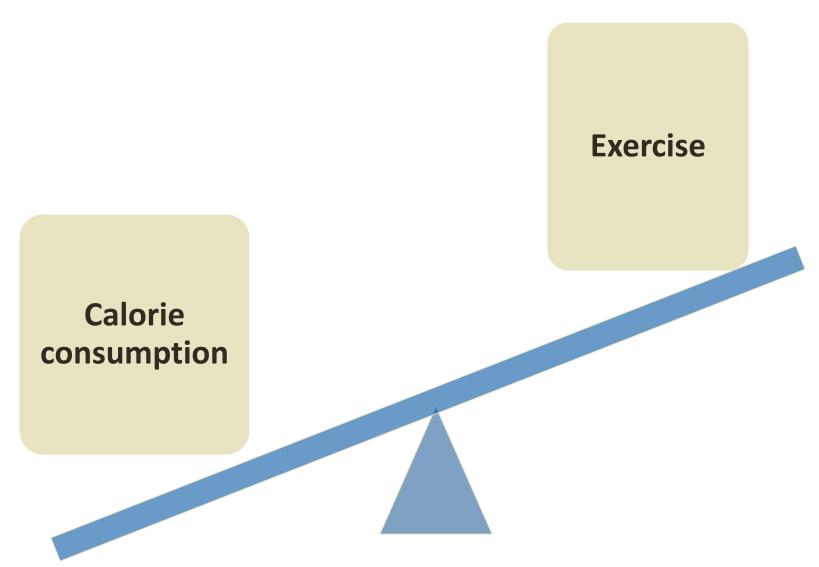
The Police Executive Leadership Program Class Exercise and Nutrition Questionnaire, administered by Daniel E. Shell, Division of Public Safety Leader- ship, Johns Hopkins University

Fact or fiction

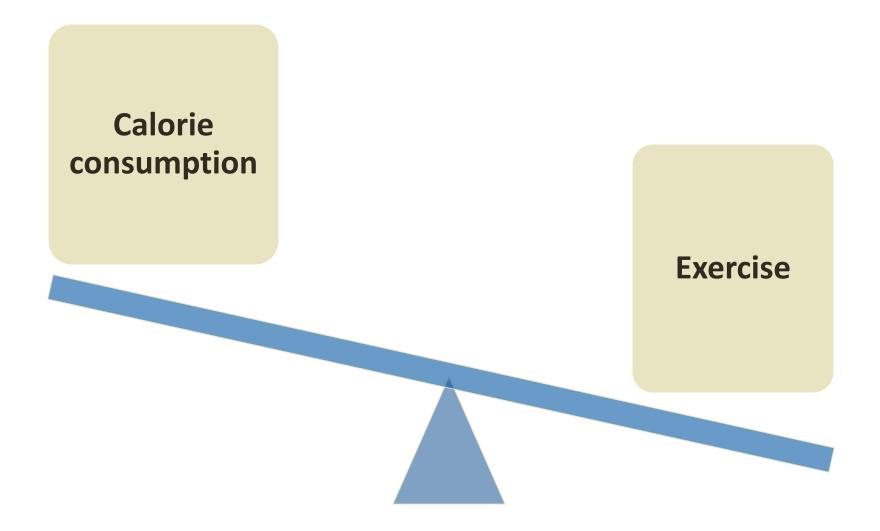
Calorie consumption (gluttony)

Exercise (sloth)

Weight Gain?



Weight Loss?



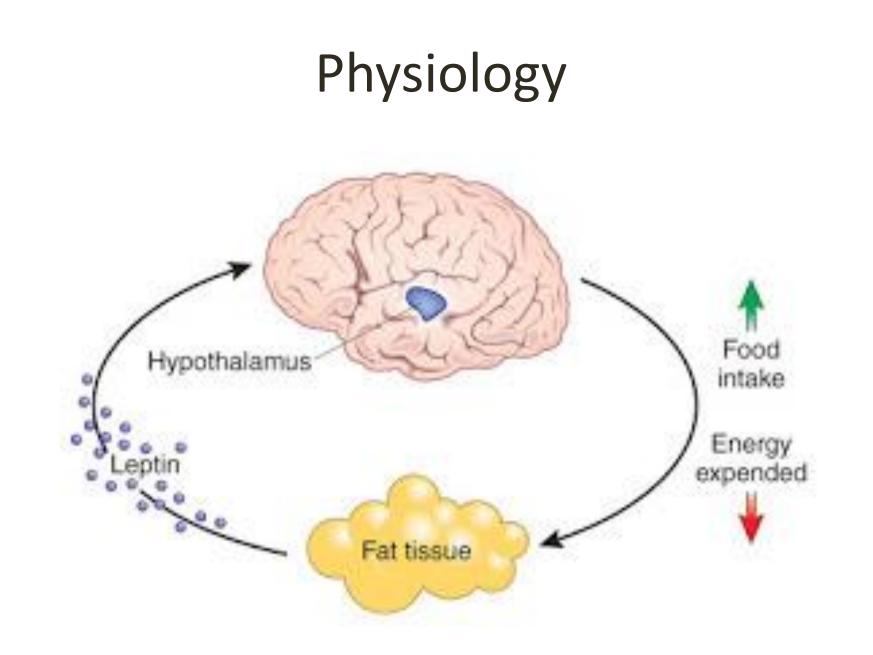
A calorie is not a calorie

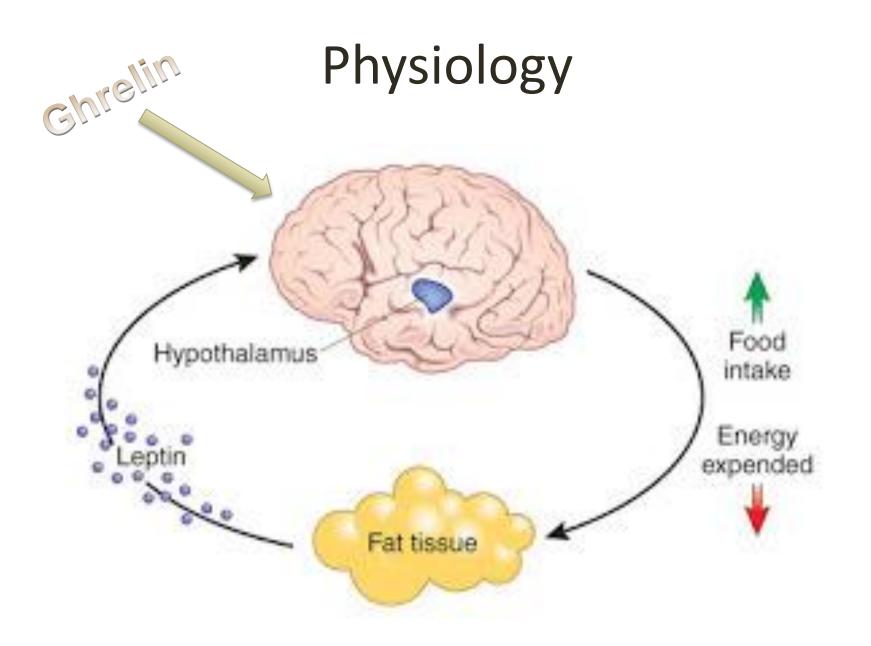


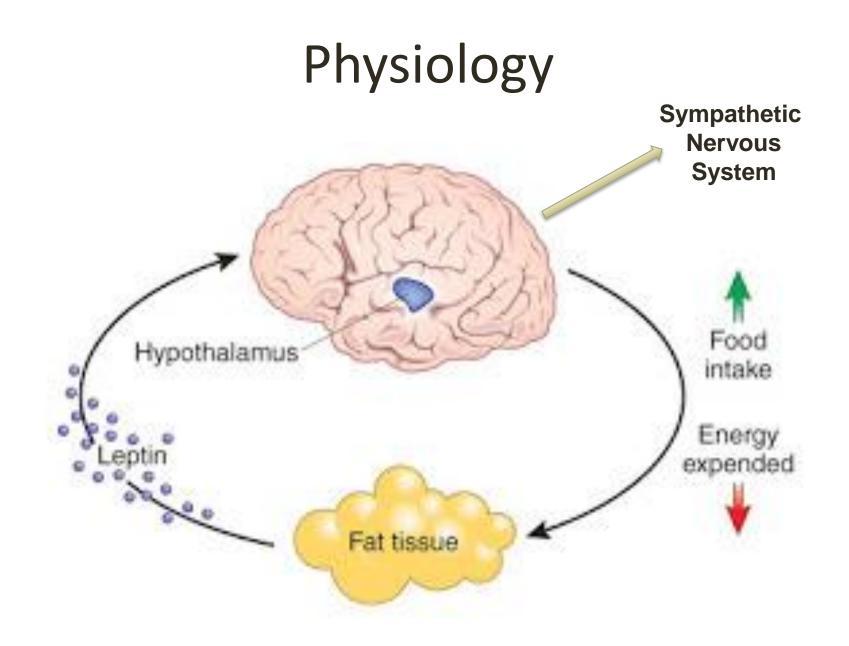
Hungry?

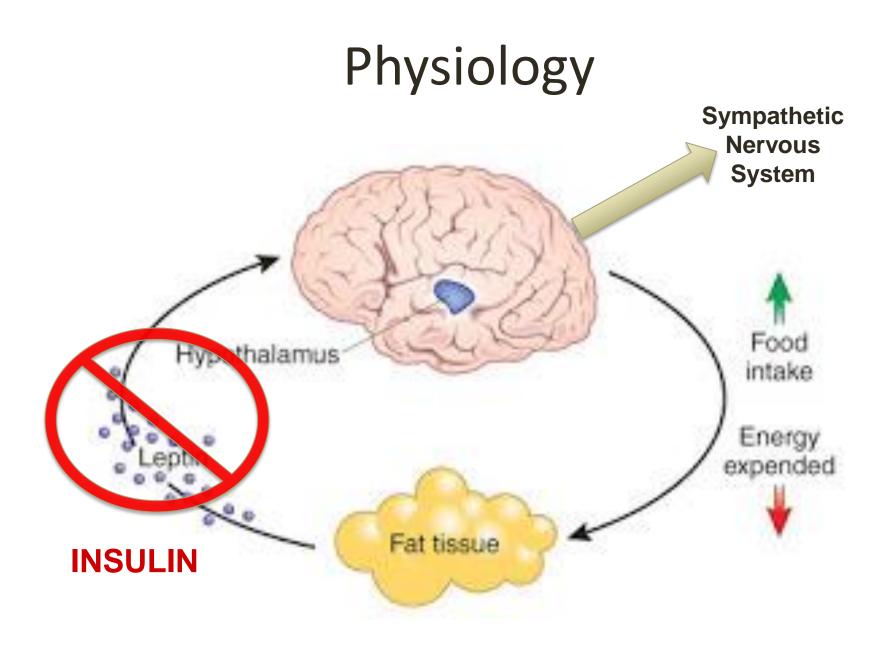
→ Ghrelin

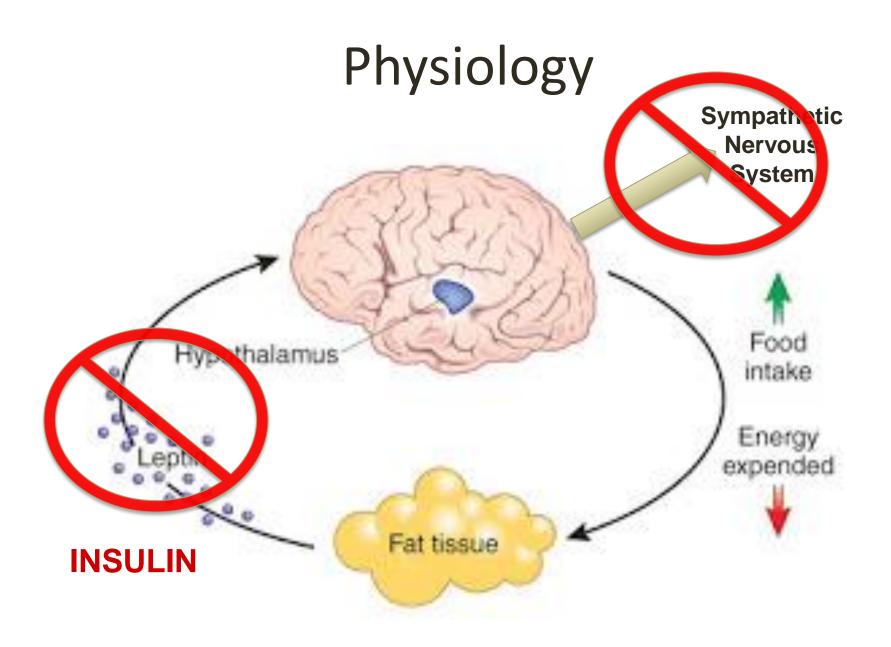
















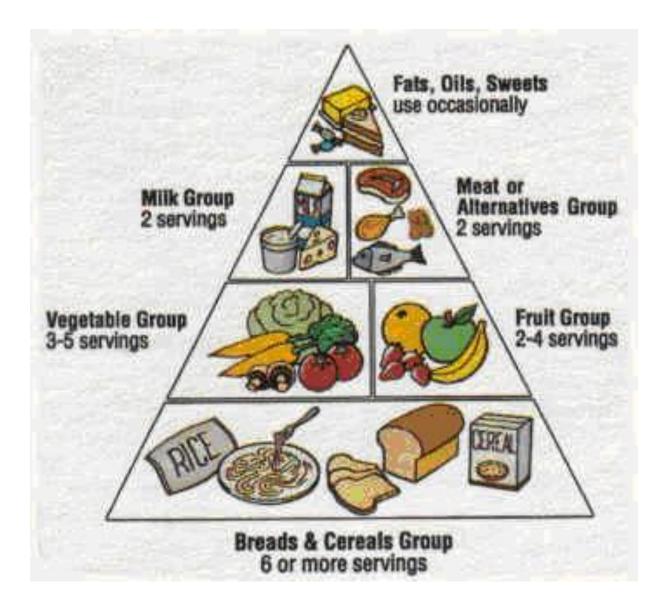
INSULIN





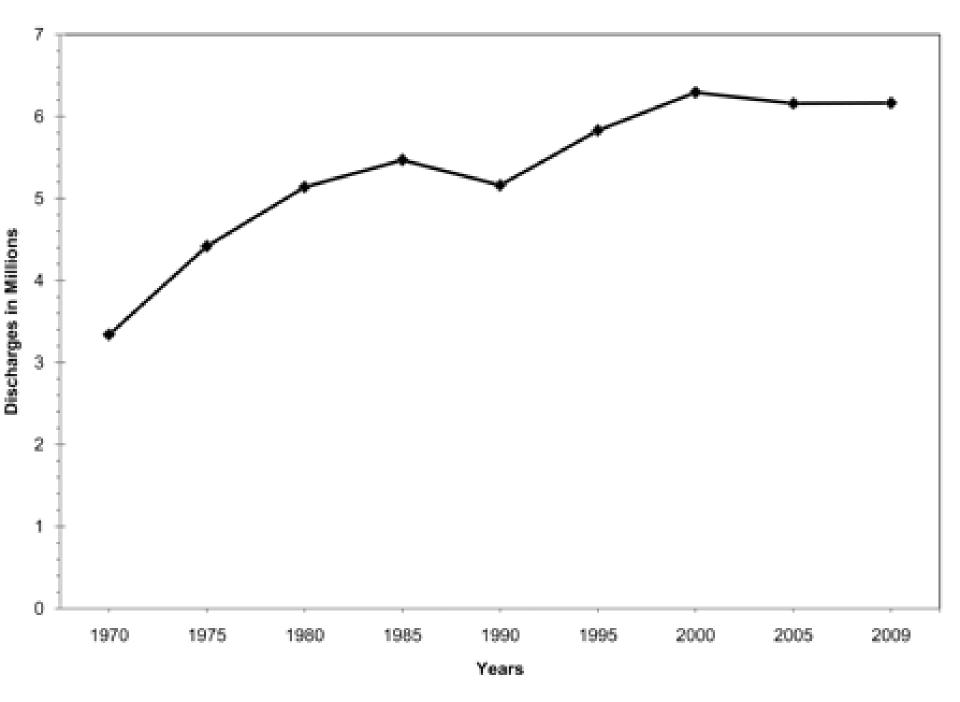






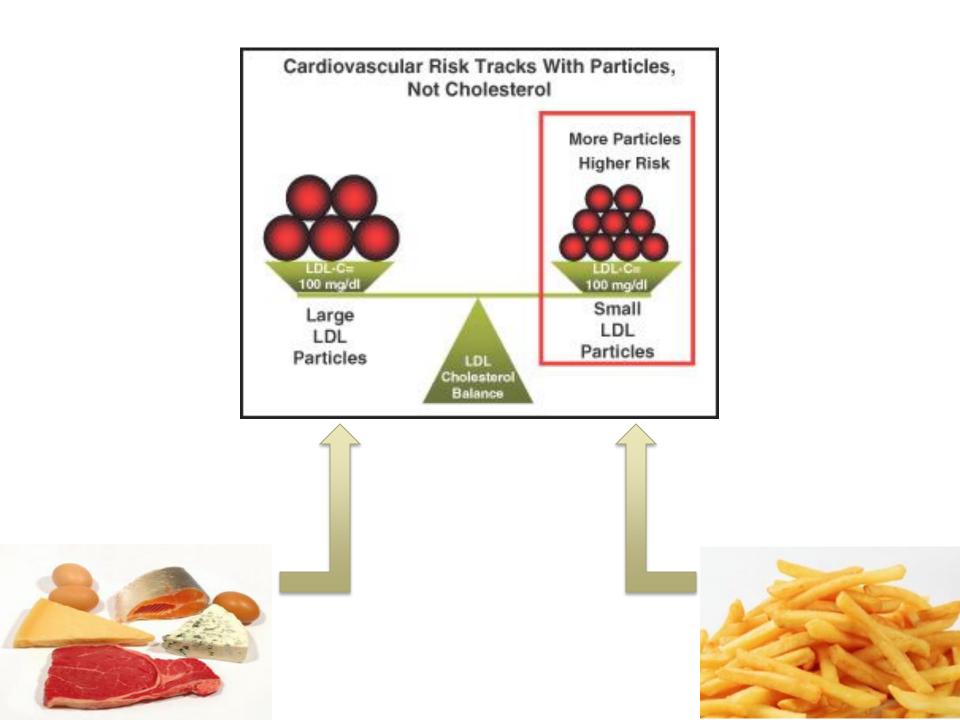




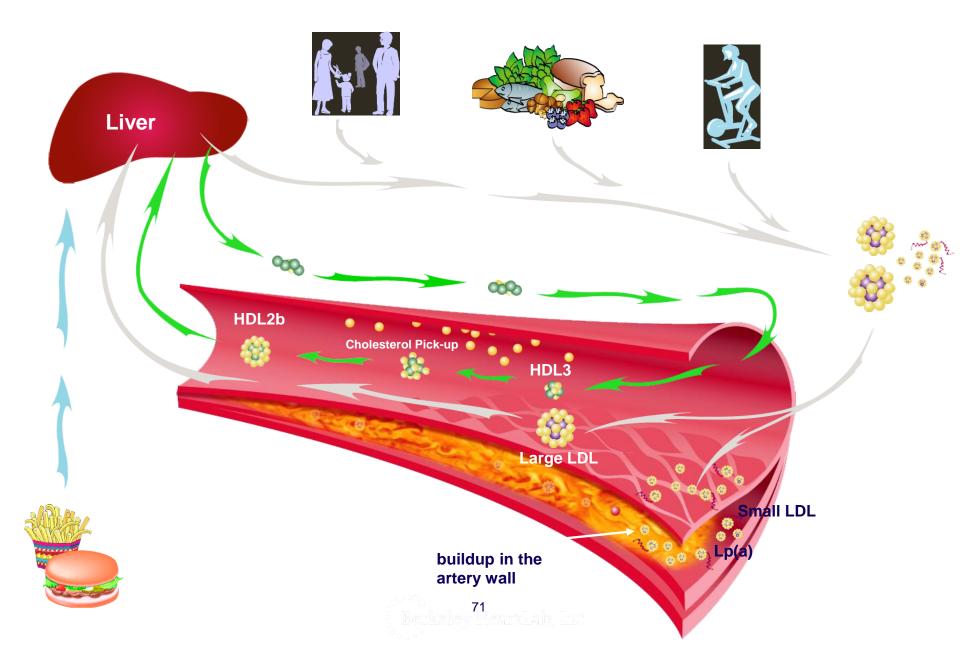


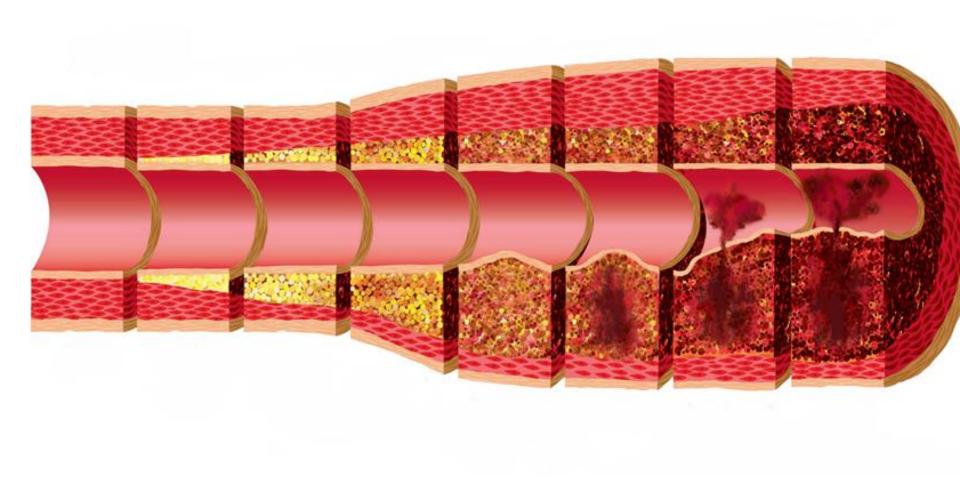


Low fat = High carbohydrate/high sugar



Plaque Formation





The Solution



Three Legged Stool

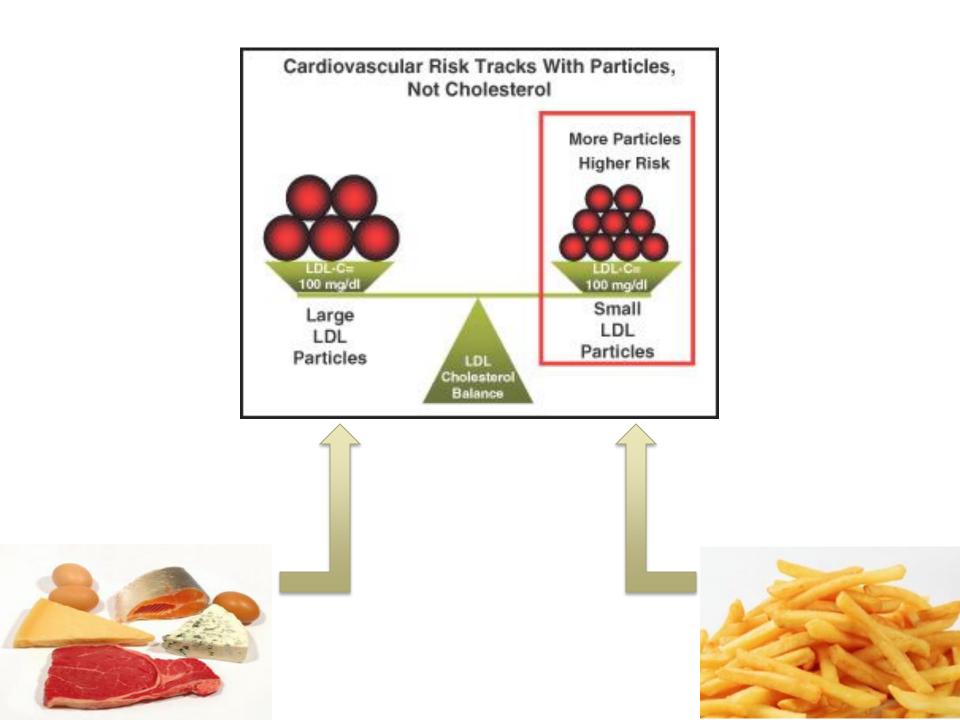


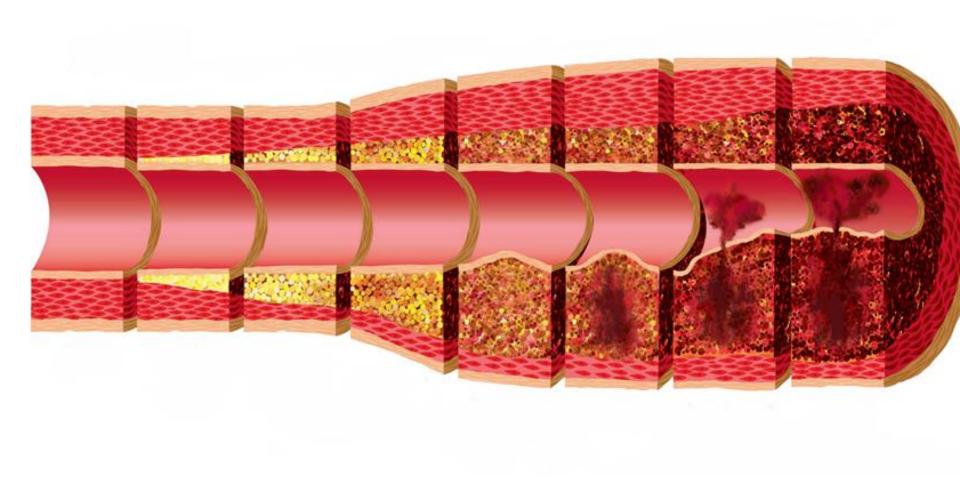
Lifestyle Modification



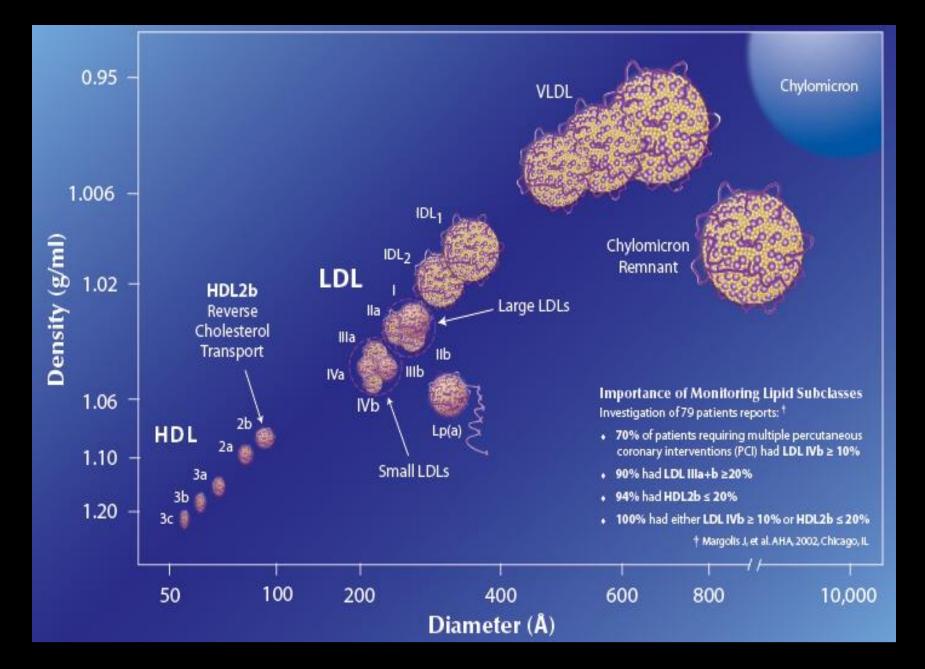








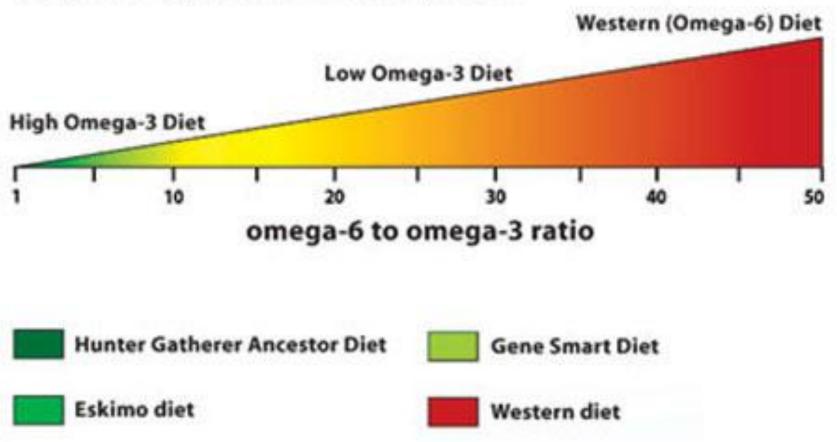




<u>Supplements</u>

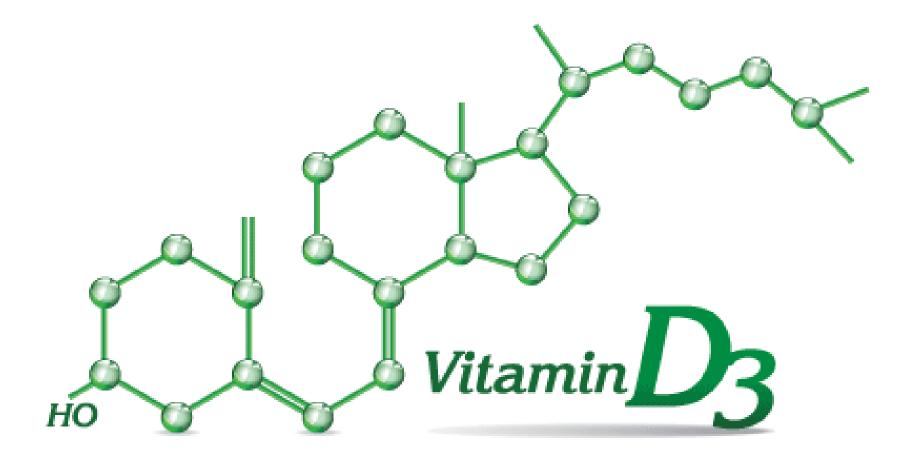


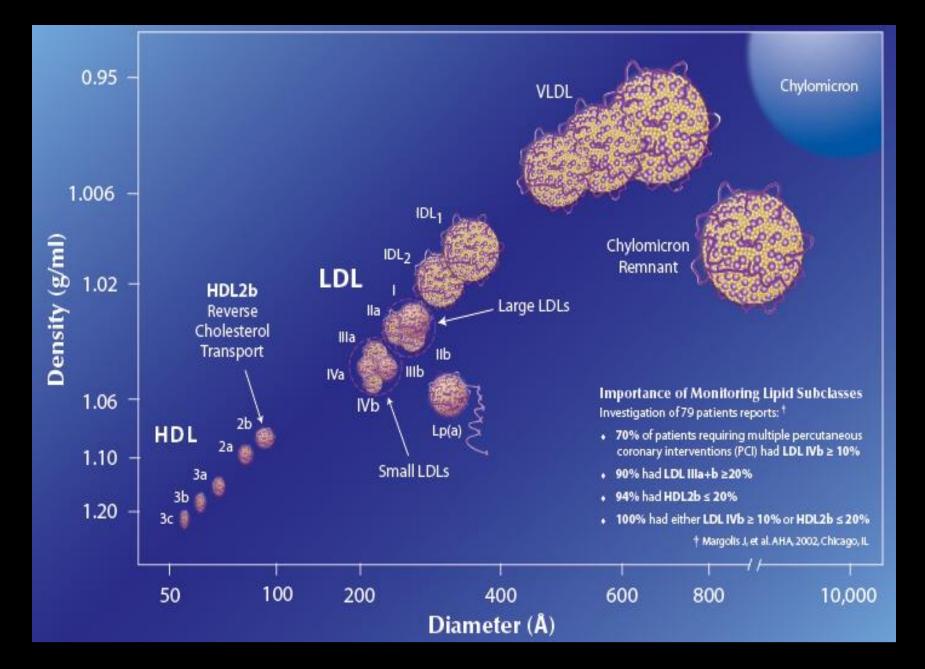




Omega 6 to Omega 3 Ratio in Different Populations



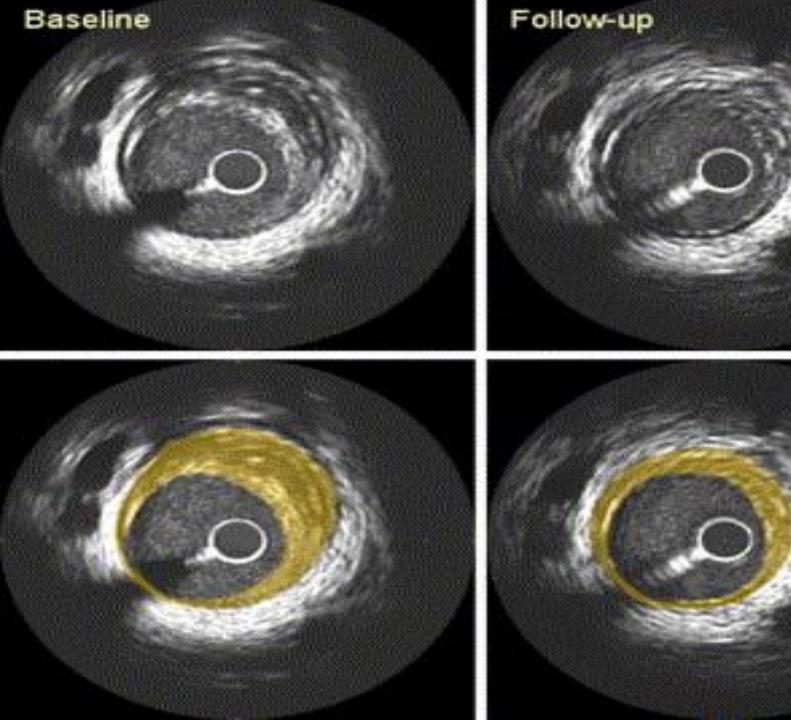


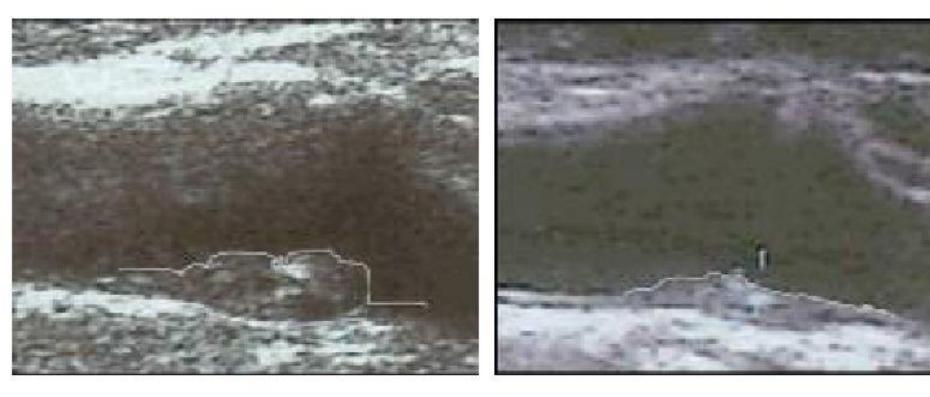


Medication



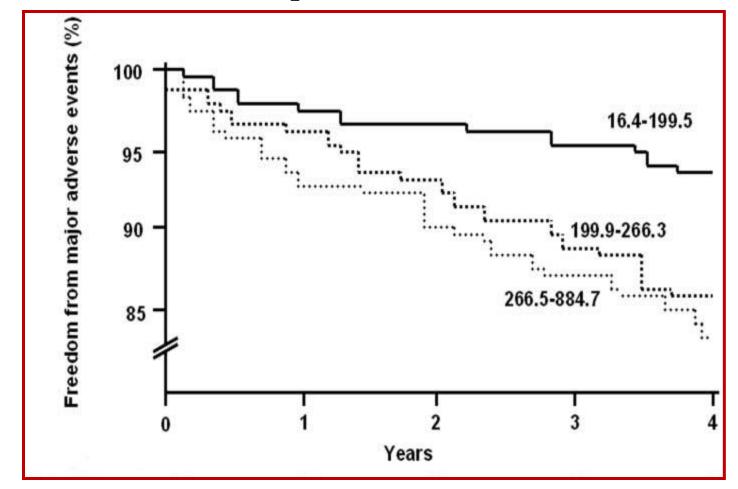






Lp-PLA₂ Predicts Major CV Events in CHD Patients: Mayo Heart Study

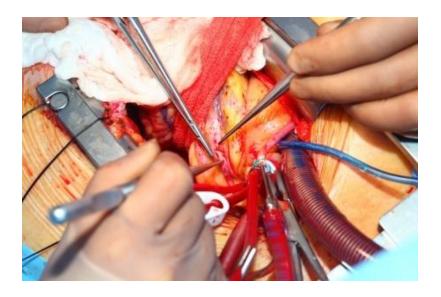
95% of patients with Lp-PLA₂ < 200 ng/ml were Event Free at 4 years





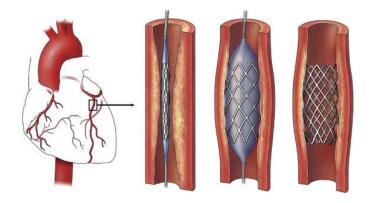
<u>Costs</u>

- Coronary artery bypass grafting (CABG)
 \$39,407
- Coronary Stent (PCI)
 \$20,421
- Heart Attack
 - \$6,569
 - Usually leads to
 - CABG
 - PCI



Costs to Treat

- 1000 officers
 - 25% CABG
 - \$9.8 MM
 - 50% PCI
 - \$10.3 MM
 - 25% Heart attack
 - \$6.6 MM
 - MD visits
 - Rx
 - TOTAL = \$26.7 MM



Costs to Prevent

- 1000
 - CCS \$50,000
 - Advanced Lipid Panel \$1,500,000
 - Treadmill \$151,000
 - Physician visits \$130,000
 - 5 years \$650,000
 - Medication/supplements -
 - - \$6 mil
 - TOTAL = \$ 8.4 MM



Cost Savings

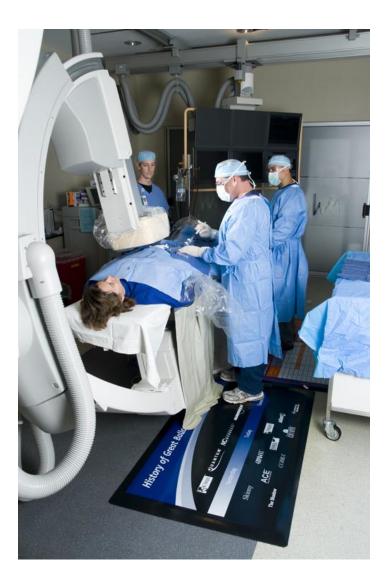
• \$18,000/officer per 5 years

Extrapolated over 1500 officers
 – \$27 MM per 5 years



Days Lost

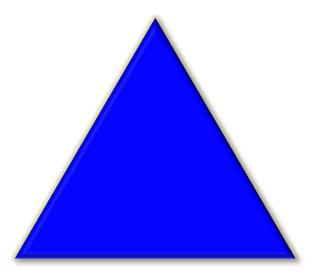
- Bypass Grafting
 - 60-90 days
- Heart attack
 - 7-14 days
- Stent
 - 7-14 days



<u>Recap</u>

- Police Officers have significant increases
 - CV Events
 - CV Mortality
- Essential to identify those at risk
 - Initiate treatment
 - Reduce Mortality
 - Reduce Morbidity
 - Reduce Costs
 - Keep Officers On the Job









Agency Responsibilities

- Develop Wellness Program
 - Fitness
 - NUTRITION
 - Develop Standards
 - Collaboration
 - Executive Staff, Physician, HR manager, Cafeteria staff, Union Leader
 - Training Academy Director, Fitness professionals
- Develop Screening Programs
 - Calcium Score
 - Advanced Lipid Panel/Lp-Pla₂
 - Treadmill test/Fitness Assesment

Agency Responsibilities

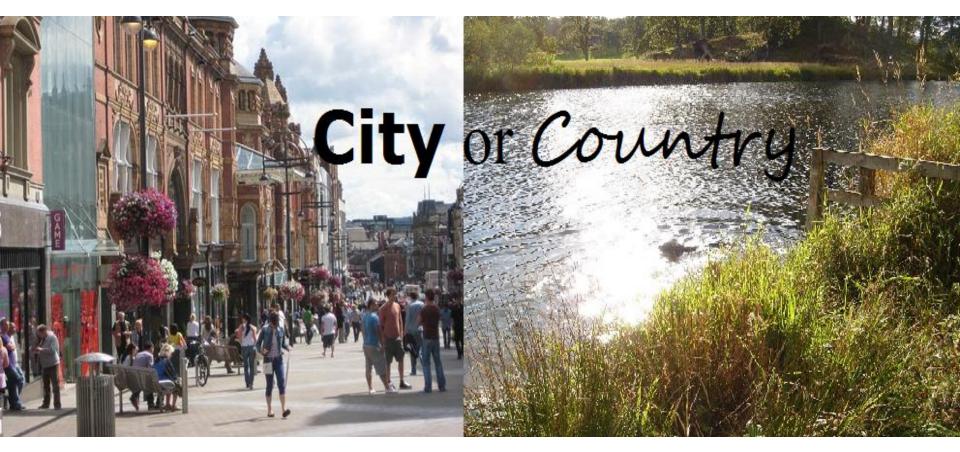
- Effectively plan physical fitness and nutrition program
- Hire qualified trainers
- Conduct internal "Marketing"
- Ensure leadership advocacy
- "Stick vs Carrot"
 - Negative vs positive reinforcement
 - Balance?

Academy Responsibilities

- Set the "tone"
- Aggressive Screening prior to entry
- Education
 - Fitness
 - Nutrition
- Develop a culture that values wellness
- Develop understanding of future requirements

Officer/Agent Responsibilities

- Education
 - Exercise
 - Nutrition
- Accountability
- Responsibility
 - Advanced blood test
 - Lipid panel
 - Inflammatory markers PLA₂
 - Coronary Calcium Score
 - Exercise Treadmill Test







Public Safety Cardiac Foundation 501 (c) (3)





www.LawOfficer.com/Below100



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(512) 626-0512

Incidental Findings Cardiac Screening Initiative

- Hypertension 41%
- Overweight 39%
 - Obese 37%
- Diabetes 10%*
- Low Vitamin $D_3 52\%$
- Other Illness
 - Lymphoma
 - Lung Cancer
 - Stills Disease (Rheumatologic)
 - Inflammatory Lung disease