

# THE SILENT JOURNEY NEWSLETTER.©

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"Happy National Minority Health Month!"

## You can control Hypertension!

According to the CDC, 1 in 3 people have high blood pressure. Medication can help control HBP. But HBP is a chronic health condition, so healthy habits are essential. Most doctors suggest you stop smoking, eat a low-fat high fiber diet and exercise. Some medical professionals suggest the DASH Diet.

DASH, which stands for, Dietary Approaches to Stop Hypertension. This includes fruits and vegetables (8-10 servings a day), whole grains, beans, nuts, low-fat dairy, lean meat (poultry, seafood), You should limit red meats, added sugars and unhealthy fats.

Most people still believe their food doesn't taste well until they add, just a little salt. Your daily intake of salt should be no more than 2300mg. Just 2 tablespoons of salad dressing can have a ¼ of your daily allowance. For more information on hypertension, cut and paste the following link.

April is National Minority Health Month (NMHM). It's a time to elevate awareness about the disparities in health that have systematically affected racial and minority populations in the U.S. One of the goals of NMHM is to help educate minority communities about early detection, personal health awareness and control of disease complications.



The 2021 NMHM theme is **#VaccineReady**. We have all read or watched TV news stories about Covid-19 disproportionately impacting minority communities. Health and Human Services Office of Minority Health believes it is very important for these communities to receive the Covid-19 vaccination as soon as they become available. They say Covid-19 vaccinations are the only way for all communities to get back to school, work, visiting family and our neighbors.

We've all heard varying stories about why people of color distrust the governments' Covid-19 vaccine program. The most infamous government vaccine program that is well remembered in the Black community is The Tuskegee Experiment: The Syphilis Study. The experiment began in 1932, at that time there was no known treatment for the disease. I first heard of this study when I was just a kid. No internet, no smartphones and it wasn't written in the encyclopedia's of my day. The Tuskegee Experiment story was handed down by word of mouth in the Black community. Just like other stories our elders' believed was important for our community to remember.

600 Black men in Macon County, Alabama were enrolled in the program. They were promised free health care for participating in the experiment. They were told that they were being treated for bad blood, a commonly used term at the time to refer to a variety of ailments. 299 of these men had previously contracted syphilis and 201 participants were free of the disease. The U.S. Public Health Service wanted to see the full progression of the disease as it worked its way through these men.

Many of the participants were sharecroppers and had never visited a doctor before. Many of the men were monitored by health workers but were only given placebos. In order to track the disease's full progression, researchers provided no effective care as the men died, went blind, insane, or experienced other severe health problems due to their untreated syphilis. -RF-

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I started thinking about the pain and the slow healing process. My first thought was, I can't do another bypass surgery. Plus, I had done everything in my power to never be on that table again. I worked out like my doctor prescribed, ate well, lost weight and exercised.

The day of the Cath, I prayed and claimed everything will be okay. I checked in and was led to a room that looked like a drive through for Caths.

When they wheel me into the procedure room, there is a huge monitor mounted next to a gurney. I know immediately that is where the doctor will see my bypass veins and will know if they are clear or blocked. By the way, you are not sedated for this procedure. They give you a medicine that makes you mellow.

They give me the medicine. I am thinking, I need more drugs. As they proceed, my mind tries to stay positive. I say to myself; I need more drugs. I can hear what the doctor is saying, I feel him pressing the device on my leg. I know it's going up my artery, but I can't feel it internally. Then he's done and leaves right away.

My drug guy... I mean the guy who was giving me the medicine said, your arteries are clear. I said, "what you talking 'bout Willis? My cardiologist said not taking one of my medicines (his advice) before the test, caused the entire episode.

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Not knowing where to start with this story, I'm just going to dive in. If you are squeamish, don't read past this sentence. It started in February, I was in Philly, taking care of my 94-year-old father. I had not been there a week. I woke up Saturday morning and the right side of my face was the size of a golf ball. Like most men, I take a pain tablet and hope it subsides. The next day I look in the mirror and my face is the size of a softball. I sent the picture to my niece who is a physician. She texts me back four words; go to hospital NOW.

Besides scaring the crap out of me, I knew she thought my condition was serious. I spent the next eight hours in the ER waiting for doctors to tell me what I knew. That tooth you didn't get capped, finally got infected. So, they gave me antibiotics and the rest is history. By now you are saying, what's the big deal? The big deal starts when I return home in March. The latter is the setup to a few months of doctor visits.

I already had a stress test setup for the second day of my return. I have never had a stress test. The goal of a stress test is to get your heart rate up to 214 beats per minute on a tread mill. Then you quickly lie on the bed and they perform an echocardiogram (ultrasound) of your heart.

I motivate myself by saying, "I'm in pretty-good shape, this will be a piece of cake". Let me tell you, that cake fell in the oven. We started the stress test, and everything was going well until I get to the four-minute mark. The systolic number (top number) of my blood pressure shot up to 200. I look at the nurse and ask, "should I stop, she says "no". So, I keep going for about 30 seconds and then I tell the nurse, "I need to step off the tread mill", and I do.

I lay on the bed and the technician starts the echocardiogram. My heart rate is normal but shoots up and feels like my heart will jump out of my chest. My heart rate goes down and up again about 10 seconds later. I look at the technician and her eyes look like hockey pucks. I ask the nurse if that is a problem. The nurse goes out to get a cardiologist. He comes in and ask me, "how does your chest feel"? I tell him I feel no pain. He then tells me to go home and relax. Then he said, don't walk, run or anything else. He looks at me sternly and then said, you will probably have a cardiac catheterization (Cath). That's when they put a tiny flexible tube in your leg or wrist artery to squirt dye at the base of your heart. This allows the doctors to see blood flow to your heart and veins.

Most of you know about my 2008 quadruple bypass. So just imagine how quickly my brain started going down memory lane.

(This story continues in the black box to the left.)

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