

How to prevent heart diseases?

Cardiovascular diseases, along with oncologic diseases and diabetes mellitus, firmly hold the first place amongst the most common and dangerous diseases. The amount of patients with cardiovascular diseases is steadily increasing in all countries throughout the world regardless of economic situation. Application of the latest diagnostics methods, as well as of the most recent treatment methods, unfortunately, can not significantly influence the incidence of heart and vessels. And this is understandable, since almost all cardiovascular diseases are progressive in nature, in other words, having once begun, they can not be cured completely.

What causes cardiovascular diseases?

Cardiovascular diseases are large in number, but the ones which affect the humanity are caused by malnutrition, lack or insufficient physical activity, smoking and mental stress. These main factors slowly but steadily result in diseases of heart and vessels.

The disease does not appear at once, most often it develops in a completely insidious for a patient way. Good if the patient gets an instinctive sense of "something being wrong" and sees the doctor. In that case, significant help can be provided. But often, heart attack may be the first manifestation of the disease.

For heart attack survivors, there is an increased risk of recurrent disease (heart attack) and fatal outcome. To reduce the risk, the patient finally starts implementing medical recommendations, regularly takes blood pressure lowering drugs, aspirin and statins to lower cholesterol, diets and even quits smoking. Of course, this will maintain health for some time, but the disease will still be progressing.

Surgical intervention may be required; and not just once. Usually, patients receive percutaneous balloon angioplasty when vessel lumen is restored by stent. Otherwise, patients may be advised to have coronary artery bypass graft, heart valve replacement or valvuloplasty, implantation of an artificial heart and, finally, a cardiac transplant. It is obvious that from the moment of a heart attack onwards a man becomes literally disabled; loses capacity for work, gives up an active way of life, is under constant treatment and in the depths of one's soul realizes that everything is bad and nothing will change for better. And no medicine in the world can really help. And even in the countries with very high health care level, life expectancy can be very low (for example, life expectancy for men in Manchester (UK) is 55 years!)

But wait! According to gerontologists' calculations, human body biological resource amounts to nothing less than 120-150 years! So why the world's best health care systems cannot ensure our longevity?

The point is that modern medicine, based on diseases treatment, in other words, the medicine of “repair”, is almost exhausted, and recently the fact is noted by many authoritative experts. It is by no means possible to make an organ function properly if it has only 10-15% functioning properly cells left. Such organ just needs to be replaced. Treatment makes no sense! And while it is impossible we – at last! – have remembered that, instead of treating a developed disease, we can simply prevent it from developing, or, at least, postpone it for quite a long time! We – at last! – have remembered that medicine has a section called “Preventive medicine”, which aims not at already developed diseases treatment, but at identifying changes in the body that result in diseases development and at adoption of individual measures to prevent a disease from developing.

Preventive medicine includes the following components:

1. Individual assessment of the risks of pathological changes based on complex (molecular, genetic, subcellular, etc) diagnostics.
2. Regular monitoring of biomarkers systems reflecting the current state of tissues, organs and body of the investigated person.
3. Prescribing individual preventive measures that enable ensuring against critical situations (diseases) development.
4. It is important to note that genetic testing enables obtaining information about potentially high individual risk of developing a particular disease, while changes in the biomarkers content reflect not a potentially possible, but materially developing pathological process.

Today ELI-ANCOR-Test is the best tool for cardiovascular diseases monitoring. It enabled objective laboratory detection of imperceptible and, as a rule, visually undetectable (echocardiography, CT scan, MRI scan, etc) molecular level preclinical changes (“molecular symptoms”) indicating initial stages of cardiovascular disease development in the examined.

ELI-ANCOR-Test enables visual monitoring of abnormalities progression when these have just emerged, when there are no symptoms and a patient feels well.

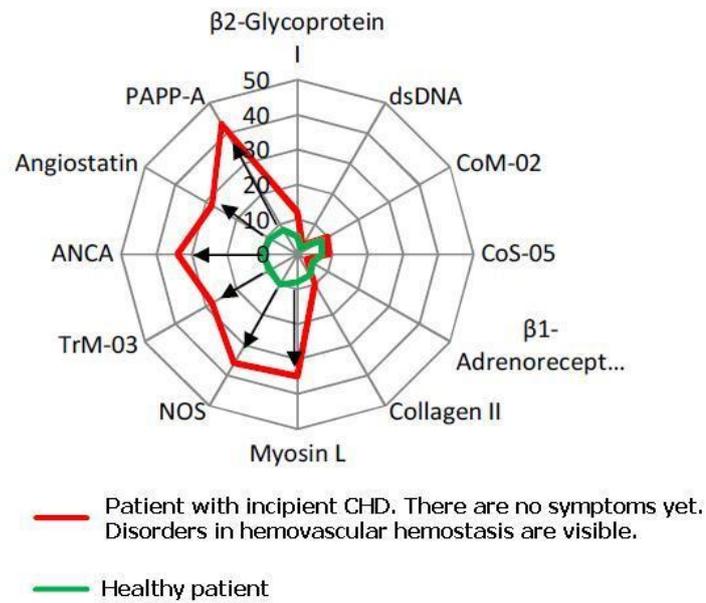


Chart of a patient with developing coronary heart disease (CHD).

Arrows show the increase in biomarkers content from normal values to the values associated with CHD onset.

The possibility of detecting, by ELI-ANCOR-Test, cardiovascular diseases onset at reversible stages implies potential opportunities of prescribing relevant prevention and treatment measures that enable eliminating or reversing unwanted changes, instead of fighting the pathology already formed.

Annual ELI-ANCOR-Test control and adherence to simple preventive measures advised by your doctor will protect your heart and vessels health for long. Probably, this is the pathway to longevity!