

Know your numbers: blood pressure

Your blood pressure (BP) is probably taken each time you go to the doctor. It's a very important number, but many don't know why. BP can have a big impact on your health.

Blood pressure basics

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BP can be controlled through medicine. Making healthy lifestyle changes can help too. Here's how to get your BP on target and stay on track yourself:

- Eat a balanced diet that is low in salt (less than 1500 mg of sodium per day).
- Stay active and at a healthy weight. Ask your doctor about exercise plans.
- Limit how much alcohol you drink.
- Quit smoking (you can ask your program nurse for help).
- Ensure you get good sleep.

Next steps: track your own blood pressure

You can ask your doctor or nurse to teach you how and when to take BP readings. Also ask how to get your own BP monitor. Then write it all down on a chart or notebook. Go to www.heart.org and search "Home Blood Pressure Monitoring" for help getting started.

Know your numbers: cholesterol

Cholesterol is another important marker tied to heart health. But what is cholesterol? And what does it do?

Cholesterol basics

Cholesterol is a fat-like substance in your blood. It is needed for good health. But too much of the bad kind of cholesterol can put you at higher risk for heart issues. Two important types of cholesterol are low-density lipoprotein (LDL), known as the bad kind, and high-density lipoprotein (HDL), the good kind. Too much LDL, or not enough HDL, increases the risk that cholesterol will slowly build up in your blood vessels. This can form a thick, hard substance known as plaque in the walls of arteries that feed the heart and brain. This may lead to heart disease and stroke.

Triglycerides are the most common type of fat in your body. A high triglyceride level can add to cholesterol build up. People with high triglycerides often have high cholesterol.

Where does cholesterol come from? There are two sources:

1. Your liver can make all the cholesterol your body needs.
2. The rest comes from eating animal foods like meat, poultry, and full-fat dairy products. Animal foods and some oils like palm and coconut are high in saturated fats. In some people, this can cause the liver to make more cholesterol than it normally would, leading to levels that are too high.

Next steps: have your numbers checked

It is good to check your cholesterol and triglyceride levels regularly. How often this test should be done will depend on certain factors. This includes your age, sex, and family history. Also, if you have diabetes or high blood pressure, if you smoke, and if you take cholesterol medicine. Talk with your doctor about making a plan that is best for you.

Managing high cholesterol

Healthy lifestyle habits help you manage high cholesterol. Eat a balanced diet, exercise, manage your weight, limit alcohol, and don't use tobacco products. If you have high LDL, your doctor will look at your risk factors to decide what your LDL goal should be. These factors will affect how your cholesterol is managed and if medicines are right for you. To learn more go to www.heart.org and search "Cholesterol."

Know your numbers: blood sugar

Do you have questions about your blood sugar? If you have diabetes or might be at risk, you may know a lot about blood sugar. Or this may be new to you. That's okay! Let's start with the basics.

What is blood sugar and why is it important?

Glucose, a sugar, is used by the cells in your body for energy. It is delivered to your cells through your blood. It is controlled by a hormone called insulin. If your body has trouble making insulin, or your cells become resistant to it, you could be at risk for diabetes and other health problems.

How is blood sugar measured?

People with diabetes often check blood sugar with:

- A blood glucose meter or continuous glucose monitor (CGM) for current levels.
- An A1C test for average blood sugar over 2-3 months.

Most adults should have an A1C test every three years starting at age 35. If you have diabetes or are at risk, your doctor will check your A1C more often.

What is a normal A1C reading?

A1C goals can be different for each person.

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How can you manage your own blood sugar?

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Treating ALS

Amyotrophic lateral sclerosis (ALS) is a long-term illness that can impact your quality of life. But luckily, medicine can help slow ALS progress and control your symptoms.

Staying informed about your treatment is an important part of managing ALS. If you are unsure of your options or have questions, now is a great time to talk with your doctor and learn more. The more you know, the easier it is to stick with your treatment plan and stay healthy.

Goals of treatment:

- Change or slow the progression of your ALS
- Manage symptoms to try to improve your quality of life

How ALS is treated:

- **Slow disease progression:** there are three medicines that treat ALS. Tiglutik® (riluzole, generic) helps to slow the progression of ALS and prolong life. Radicava® (edaravone) has been shown to slow the decline in daily functioning. Qalsody™ (tofersen) is for adults with a SOD1 gene mutation. SOD1 is a protein that appears to be involved in the ALS disease. Testing for the SOD1 gene is needed to use this medicine.
- **Treat ALS symptoms:** this can help your quality of life day-to-day. Physical therapy (PT) improves your movement and range of motion. Occupational therapy (OT) can help you to maintain skills for daily tasks. Speech therapy can help when you have trouble speaking or swallowing. Feeding tubes can keep you from choking and stay nourished. Likewise, breathing aids can help you get the air you need. There are also medicines to help with other symptoms, like pain, muscle cramps, or urinary problems.

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How can you manage your own blood sugar?

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Treating Crohn's disease

Crohn's disease is a long-term illness that can impact your quality of life. Luckily, medicine can help control your symptoms and manage your condition.

Staying informed about your treatment is an important part of managing Crohn's. If you are unsure of your options or have questions, now is a great time to talk with your doctor and learn more. The more you know, the easier it is to stick with your treatment plan and stay healthy.

Goals of treatment:

- Find the best medicine to control your symptoms
- Prevent other problems and medicine side effects
- Help you enjoy life and keep up with daily activities

How Crohn's is treated:

- **Manage inflammation (swelling).** These medicines lower swelling. This reduces your Crohn's symptoms and the problems that happen during flares.
 - **Aminosalicylates** reduce swelling of the gut. Examples: balsalazide, mesalamine, olsalazine, and sulfasalazine.
 - **Steroids** stop a flare quickly. They are only used in the short-term. They can cause side effects over time, like bone loss or high blood sugar. Examples: budesonide, methylprednisolone, and prednisone.
- **Change your immune system with immunomodulators.** These change how your immune system sends signals through your body. They are strong and are typically used when other medicines do not work. Examples: 6-mercaptopurine, azathioprine, cyclosporine, methotrexate, and tacrolimus.
- **Block signals for swelling with biologics.** These medicines stop signals from the immune system that cause swelling. Examples: adalimumab (e.g., Humira®), certolizumab (Cimzia®), infliximab (e.g., Remicade®), natalizumab (Tysabri®), risankizumab (Skyrizi®), vedolizumab (Entyvio®), and ustekinumab (Stelara®).
- **Antibiotics** are medicines that treat infections, like bacteria in the intestines. Examples: metronidazole or ciprofloxacin.

Next Steps:

Review your treatment goals with your doctor. Don't be afraid to ask which treatment is the best option for you. Your program nurse is also here to help you reach your treatment goals. Reach out at any time!

Track your treatment

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How can you manage your own blood sugar?

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Treating CF

Cystic fibrosis (CF) is a long-term illness that can impact your quality of life. But luckily, medicine can help control your symptoms and manage your condition.

Staying informed about your treatment is an important part of managing CF. If you are unsure of your options or have questions, now is a great time to talk with your doctor and learn more. The more you know, the easier it is to stick with your treatment plan and stay healthy.

Goals of treatment:

- Find the best medicine to control your symptoms
- Prevent other problems (like infection)
- Prevent medicine side effects
- Help you enjoy life and keep up with daily activities

How CF is treated:

- **CFTR modulators:** In CF, there are problems with the CFTR protein. This can make mucus sticky and hard to clear. These medicines fix problems with the CFTR protein. This helps thin the mucus to improve lung function and other symptoms. This type of treatment is not for everyone. Talk to your doctor about your type of CF and if this medicine is right for you.
- **Antibiotics:** these medicines are used to fight infection. Lung infections are common for those with CF. **Take antibiotics exactly as your doctor has prescribed**, for as long as you have been told. If you stop the medicine too soon, the infection could become harder to treat.
- **Bronchodilators:** these are medicines that you breathe in. They relax and open the airways. It can help other inhaled medicines get to the lungs better.
- **Mucus thinners:** these are medicines that you breathe in. They thin mucus in the lungs. This can help airway clearance techniques (ACTs) work better.
- **Antifungal medicine:** The Aspergillus fungus often lives in the airways of people with CF. Steroids and antifungal medicines are used to treat an allergic response to this fungus.

Next Steps:

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Treating CIDP

Chronic inflammatory demyelinating polyneuropathy (CIDP) is a long-term health condition that can impact your quality of life. Luckily, medicines and other treatments can help control your symptoms. It's important to stay informed about your options. The more you know, the easier it is to stick with your treatment plan and stay healthy.

Goals of treatment:

- Find the best treatment(s) to control your symptoms and prevent flares
- Prevent other problems (e.g., broken bones from falls) and medicine side effects
- Help you enjoy life and keep up with daily activities

CIDP is treated with medicines that work in different ways:

- **Calm or suppress the immune system.**
 - **Steroids** reduce inflammation to help protect the myelin sheath and nerve fibers. These can be taken by mouth or through infusion into a vein. But long-term use of steroids can cause side effects. Ask your doctor about exams or labs you may need if you take steroids. Examples: dexamethasone, hydrocortisone, prednisolone.
- **Prevent the immune system from attacking the myelin sheath and nerves.**
 - **Immunoglobulins** can help reduce nerve damage. These can be given into a vein (IVIG) or under the skin (SCIG). Examples of IVIG: Gamunex®-C, Gammaplex®. Examples of SCIG: Hizentra® and Vyvgart Hytrulo®.
- **Stop or change how the immune system works.**
 - **Immunosuppressants** can slow the attack on nerves and prevent damage. Examples: azathioprine (Imuran®), cyclosporine (Sandimmune®), cyclophosphamide (Cytoxan®), methotrexate (Trexall®), mycophenolate mofetil (CellCept®), and tacrolimus (Prograf®).
- **Other options:**
 - **Plasma exchange** (plasmapheresis). The liquid part of your blood (plasma) is separated to remove harmful antibodies. This process requires a port inserted into the chest, so there is a risk for infection and bleeding.

Next Steps:

Review your treatment goals with your doctor. Don't be afraid to ask which treatment is the best option for you. Your program nurse is also here to help you reach your treatment goals. Reach out at any time!

Track your treatment

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MC1400_NALC

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BP can be controlled through medicine. Making healthy lifestyle changes can help too. Here's how to get your BP on target and stay on track yourself:

- Eat a balanced diet that is low in salt (less than 1500 mg of sodium per day).
- Stay active and at a healthy weight. Ask your doctor about exercise plans.
- Limit how much alcohol you drink.
- Quit smoking (you can ask your program nurse for help).
- Ensure you get good sleep.

Next steps: track your own blood pressure

You can ask your doctor or nurse to teach you how and when to take BP readings. Also ask how to get your own BP monitor. Then write it all down on a chart or notebook. Go to www.heart.org and search "Home Blood Pressure Monitoring" for help getting started.

Know your numbers: cholesterol

Cholesterol is another important marker tied to heart health. But what is cholesterol? And what does it do?

Cholesterol basics

Cholesterol is a fat-like substance in your blood. It is needed for good health. But too much of the bad kind of cholesterol can put you at higher risk for heart issues. Two important types of cholesterol are low-density lipoprotein (LDL), known as the bad kind, and high-density lipoprotein (HDL), the good kind. Too much LDL, or not enough HDL, increases the risk that cholesterol will slowly build up in your blood vessels. This can form a thick, hard substance known as plaque in the walls of arteries that feed the heart and brain. This may lead to heart disease and stroke.

Triglycerides are the most common type of fat in your body. A high triglyceride level can add to cholesterol build up. People with high triglycerides often have high cholesterol.

Where does cholesterol come from? There are two sources:

1. Your liver can make all the cholesterol your body needs.
2. The rest comes from eating animal foods like meat, poultry, and full-fat dairy products. Animal foods and some oils like palm and coconut are high in saturated fats. In some people, this can cause the liver to make more cholesterol than it normally would, leading to levels that are too high.

Next steps: have your numbers checked

It is good to check your cholesterol and triglyceride levels regularly. How often this test should be done will depend on certain factors. This includes your age, sex, and family history. Also, if you have diabetes or high blood pressure, if you smoke, and if you take cholesterol medicine. Talk with your doctor about making a plan that is best for you.

Managing high cholesterol

Healthy lifestyle habits help you manage high cholesterol. Eat a balanced diet, exercise, manage your weight, limit alcohol, and don't use tobacco products. If you have high LDL, your doctor will look at your risk factors to decide what your LDL goal should be. These factors will affect how your cholesterol is managed and if medicines are right for you. To learn more go to www.heart.org and search "Cholesterol."

Know your numbers: blood sugar

Do you have questions about your blood sugar? If you have diabetes or might be at risk, you may know a lot about blood sugar. Or this may be new to you. That's okay! Let's start with the basics.

What is blood sugar and why is it important?

Glucose, a sugar, is used by the cells in your body for energy. It is delivered to your cells through your blood. It is controlled by a hormone called insulin. If your body has trouble making insulin, or your cells become resistant to it, you could be at risk for diabetes and other health problems.

How is blood sugar measured?

People with diabetes often check blood sugar with:

- A blood glucose meter or continuous glucose monitor (CGM) for current levels.
- An A1C test for average blood sugar over 2-3 months.

Most adults should have an A1C test every three years starting at age 35. If you have diabetes or are at risk, your doctor will check your A1C more often.

What is a normal A1C reading?

A1C goals can be different for each person.

- For most people: less than 5.7%.
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Talk with your doctor about the right range for you.

When and why should you track your blood sugar?

Not all people need to closely track their blood sugar. Those at risk for diabetes, who take insulin, or have trouble with their blood sugar levels, do. Those who are pregnant will also be tested at least once. Pregnancy can make you more resistant to insulin. Ask your doctor about your risk. They can tell you if you should track your blood sugar, and how often.

How can you manage your own blood sugar?

If you have diabetes, you and your doctor can come up with the right treatment plan. This can include a plan for diet and exercise. This can also help keep your blood sugar at a healthy level.

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Treating Gaucher

Gaucher disease is a long-term illness that can impact your quality of life. Luckily, medicine and other treatments can help control symptoms of Gaucher. It's important to stay informed about your treatment options. The more you know, the easier it is to stick with your treatment plan and stay healthy.

Goals of treatment:

- Find the best medicine to control your symptoms
- Prevent other problems and medicine side effects
- Help you enjoy life and keep up with daily activities

Two main types of medicines are used for treatment of Gaucher disease:

- **Enzyme replacement therapy (ERT)**. Involves replacing low or absent levels of enzymes in the body. ERT is given through infusions (a needle or tube into a vein or a port implanted under the skin). Three ERT medicines are used to treat Gaucher: imiglucerase (Cerezyme®), velaglucerase alfa (VPRIV®), and taliglucerase alfa (Elelyso®).
- **Substrate reduction therapy (SRT)**. SRT is an oral treatment. It lowers the amount of the specific fatty substance that can build up in your cells when you have Gaucher and cause problems. Two SRT medicines are used to treat Gaucher: miglustat (Zavesca®, Yargesa™) and eliglustat (Cerdelga®).

Your medicine dose could change over time. Once your Gaucher is stable, you might be able to take a lower dose. You and your doctor can set goals around this.

Other treatments for symptoms of Gaucher may include:

- Blood transfusions for anemia
- Medicine for bone pain
- Surgery

Next Steps:

Ask your doctor which treatments are the best options for you. Your program nurse can also help you reach your goals. Reach out at any time!

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Next steps: have your numbers checked

It is good to check your cholesterol and triglyceride levels regularly. How often this test should be done will depend on certain factors. This includes your age, sex, and family history. Also, if you have diabetes or high blood pressure, if you smoke, and if you take cholesterol medicine. Talk with your doctor about making a plan that is best for you.

Managing high cholesterol

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What is blood sugar and why is it important?

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How is blood sugar measured?

People with diabetes often check blood sugar with:

- A blood glucose meter or continuous glucose monitor (CGM) for current levels.
- An A1C test for average blood sugar over 2-3 months.

Most adults should have an A1C test every three years starting at age 35. If you have diabetes or are at risk, your doctor will check your A1C more often.

What is a normal A1C reading?

A1C goals can be different for each person.

- For most people: less than 5.7%.
- For people with diabetes: under 7%.

Talk with your doctor about the right range for you.

When and why should you track your blood sugar?

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How can you manage your own blood sugar?

If you have diabetes, you and your doctor can come up with the right treatment plan. This can include a plan for diet and exercise. This can also help keep your blood sugar at a healthy level.

Have more questions? Give your program nurse a call.

Treating HAE

Hereditary angioedema (HAE) is a long-term illness that can impact your quality of life. But luckily, medicine can help control your symptoms and manage your condition.

Staying informed about your treatment is an important part of managing HAE. If you are unsure of your options or have questions, now is a great time to talk with your doctor and learn more. The more you know, the easier it is to stick with your treatment plan and stay healthy.

Goals of treatment:

- Find the best medicine to control your symptoms
- Prevent other problems
- Prevent medicine side effects
- Help you enjoy life and keep up with daily activities

How HAE is treated:

- **On-demand treatments:** used to treat an HAE attack right away. This is taken when you start to feel symptoms of an HAE attack. You should take on-demand treatment even if you have just a few symptoms. This stops the attack and keeps it from getting worse. You should always keep on-demand medicine with you.
- **Prophylactic treatments:** taken regularly to prevent or lessen symptoms of an HAE attack. These may need to be taken on a schedule. Or, you may only take them when a trigger event is planned. This could be surgery or dental work.
- HAE medicine may cause side effects. Most are mild. Tell your doctor as soon as you see signs of serious problems. These include signs of blood clots, infections, allergic reactions (like rash or trouble breathing), or change in heart rhythm.

Next Steps:

Review your treatment goals with your doctor. Don't be afraid to ask if your treatment is the best option for you. And remember, your program nurse is also here to help you reach your treatment goals. Reach out at any time!

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It is good to check your cholesterol and triglyceride levels regularly. How often this test should be done will depend on certain factors. This includes your age, sex, and family history. Also, if you have diabetes or high blood pressure, if you smoke, and if you take cholesterol medicine. Talk with your doctor about making a plan that is best for you.

Managing high cholesterol

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Treating HIV

Human immunodeficiency virus (HIV) is a long-term illness that can impact your quality of life. But luckily, medicine can help control your symptoms and manage your condition.

Staying informed about your treatment is an important part of managing HIV. If you are unsure of your options or have questions, now is a great time to talk with your doctor and learn more. The more you know, the easier it is to stick with your treatment plan and stay healthy.

Goals of treatment:

- Find the best medicine to your control symptoms
- Prevent other problems
- Prevent medicine side effects
- Help you enjoy life and keep up with daily activities

How HIV is treated:

- **Antiretroviral therapies (ARTs):** medicines that suppress HIV in your body. ARTs are now easier to take with fewer pills and less side effects than before. Talk to your care team if you feel your ART is not working. Talk with them also if you take an older regimen. There may be a newer treatment for you. Be honest about how you feel. Your doctor can find an ART that works better for you.
- Take your medicines on schedule, as the doctor says. This helps keep levels of HIV in your body (viral load) low or undetectable. When viral load is low, your medicines can work better and help improve your health. There is also less chance that you spread HIV to someone else through sex when you have an undetectable viral load.
- Side effects can occur with all ART. Each person may react to ART differently. If you have side effects, do not cut down on, skip, or stop taking your HIV medicines. This may cause you to become resistant to your medicine. Call your doctor to talk about side effects and make a plan.

Next Steps:

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Healthy lifestyle habits help you manage high cholesterol. Eat a balanced diet, exercise, manage your weight, limit alcohol, and don't use tobacco products. If you have high LDL, your doctor will look at your risk factors to decide what your LDL goal should be. These factors will affect how your cholesterol is managed and if medicines are right for you. To learn more go to www.heart.org and search "Cholesterol."

Know your numbers: blood sugar

Do you have questions about your blood sugar? If you have diabetes or might be at risk, you may know a lot about blood sugar. Or this may be new to you. That's okay! Let's start with the basics.

What is blood sugar and why is it important?

Glucose, a sugar, is used by the cells in your body for energy. It is delivered to your cells through your blood. It is controlled by a hormone called insulin. If your body has trouble making insulin, or your cells become resistant to it, you could be at risk for diabetes and other health problems.

How is blood sugar measured?

People with diabetes often check blood sugar with:

- A blood glucose meter or continuous glucose monitor (CGM) for current levels.
- An A1C test for average blood sugar over 2-3 months.

Most adults should have an A1C test every three years starting at age 35. If you have diabetes or are at risk, your doctor will check your A1C more often.

What is a normal A1C reading?

A1C goals can be different for each person.

- For most people: less than 5.7%.
- For people with diabetes: under 7%.

Talk with your doctor about the right range for you.

When and why should you track your blood sugar?

Not all people need to closely track their blood sugar. Those at risk for diabetes, who take insulin, or have trouble with their blood sugar levels, do. Those who are pregnant will also be tested at least once. Pregnancy can make you more resistant to insulin. Ask your doctor about your risk. They can tell you if you should track your blood sugar, and how often.

How can you manage your own blood sugar?

If you have diabetes, you and your doctor can come up with the right treatment plan. This can include a plan for diet and exercise. This can also help keep your blood sugar at a healthy level.

Have more questions? Give your program nurse a call.

Treating hemophilia

Hemophilia is a long-term illness that can impact your quality of life. But luckily, medicine can help control your symptoms and manage your condition.

Staying informed about your treatment is an important part of managing hemophilia. If you are unsure of your options or have questions, now is a great time to talk with your doctor and learn more. The more you know, the easier it is to stick with your treatment plan and stay healthy.

Goals of treatment:

- Prevent bleeds and joint damage
- Prevent medicine side effects
- Help you enjoy life and keep up with daily activities

How hemophilia is treated:

- **Prophylactic treatment:** these treatments are used to stop your hemophilia symptoms before they start. This means infusing blood-clotting factor to avoid bleeds in a target joint or other places. Each person with hemophilia has different clotting factor levels. So how often a dose is given depends on your level of factor. There are many treatments. Hemlibra® stops bleeds in hemophilia A. Alhemo®, Hympavzi™, and Qfitlia™ stop bleeds in hemophilia A and B.
- **Gene therapy:** this is a one-time infusion for some males aged 18 years and older with severe hemophilia. Gene therapy is done at a treatment center. The goal is to put a working gene into your cells. The working gene gives your body the instructions it has been missing. This helps to reduce bleeding events. There are two approved gene therapies. Roctavian™ for hemophilia A, and Hemgenix® for hemophilia B.

Next Steps:

Review your treatment goals with your doctor. Don't be afraid to ask if your treatment is the best option for you. And remember, your program nurse is also here to help you reach your treatment goals. Reach out at any time!

Track your treatment

Do you keep track of your treatments? Do you keep a list of all your medicines? Do you use a calendar to track when you take them? Do you track side effects or other issues?

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Need help getting started? First, ask your doctor for a record of your medicines. You can also ask your pharmacist. Then share your up-to-date list with your whole care team. This includes your doctors, program nurse, and loved ones involved in your care.

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BP can be controlled through medicine. Making healthy lifestyle changes can help too. Here's how to get your BP on target and stay on track yourself:

- Eat a balanced diet that is low in salt (less than 1500 mg of sodium per day).
- Stay active and at a healthy weight. Ask your doctor about exercise plans.
- Limit how much alcohol you drink.
- Quit smoking (you can ask your program nurse for help).
- Ensure you get good sleep.

Next steps: track your own blood pressure

You can ask your doctor or nurse to teach you how and when to take BP readings. Also ask how to get your own BP monitor. Then write it all down on a chart or notebook. Go to www.heart.org and search "Home Blood Pressure Monitoring" for help getting started.

Know your numbers: cholesterol

Cholesterol is another important marker tied to heart health. But what is cholesterol? And what does it do?

Cholesterol basics

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Triglycerides are the most common type of fat in your body. A high triglyceride level can add to cholesterol build up. People with high triglycerides often have high cholesterol.

Where does cholesterol come from? There are two sources:

1. Your liver can make all the cholesterol your body needs.
2. The rest comes from eating animal foods like meat, poultry, and full-fat dairy products. Animal foods and some oils like palm and coconut are high in saturated fats. In some people, this can cause the liver to make more cholesterol than it normally would, leading to levels that are too high.

Next steps: have your numbers checked

It is good to check your cholesterol and triglyceride levels regularly. How often this test should be done will depend on certain factors. This includes your age, sex, and family history. Also, if you have diabetes or high blood pressure, if you smoke, and if you take cholesterol medicine. Talk with your doctor about making a plan that is best for you.

Managing high cholesterol

Healthy lifestyle habits help you manage high cholesterol. Eat a balanced diet, exercise, manage your weight, limit alcohol, and don't use tobacco products. If you have high LDL, your doctor will look at your risk factors to decide what your LDL goal should be. These factors will affect how your cholesterol is managed and if medicines are right for you. To learn more go to www.heart.org and search "Cholesterol."

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What is blood sugar and why is it important?

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How is blood sugar measured?

People with diabetes often check blood sugar with:

- A blood glucose meter or continuous glucose monitor (CGM) for current levels.
- An A1C test for average blood sugar over 2-3 months.

Most adults should have an A1C test every three years starting at age 35. If you have diabetes or are at risk, your doctor will check your A1C more often.

What is a normal A1C reading?

A1C goals can be different for each person.

- For most people: less than 5.7%.
- For people with diabetes: under 7%.

Talk with your doctor about the right range for you.

When and why should you track your blood sugar?

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How can you manage your own blood sugar?

If you have diabetes, you and your doctor can come up with the right treatment plan. This can include a plan for diet and exercise. This can also help keep your blood sugar at a healthy level.

Have more questions? Give your program nurse a call.

Treating myasthenia gravis

Myasthenia gravis (MG) is a long-term illness that can impact your quality of life. Luckily, there are many effective ways to treat MG that can help control symptoms. It's important to stay informed about your treatment options. The more you know, the easier it is to stick with your treatment plan and stay healthy.

Goals of treatment:

- Find the best medicine(s) to control your symptoms and improve muscle strength
- Prevent other problems and medicine side effects
- Help you enjoy life and keep up with daily activities

How MG is treated:

- **Acetylcholinesterase inhibitors.** These block the action of a specific enzyme called acetylcholine. This blocking helps strengthen signals between nerves and muscles so they can work better.
- **Steroids** can help calm the immune system. This also makes it easier for nerves and muscles to work together.
- **Nonsteroidal immunosuppressants.** These medicines have a similar effect as steroids to calm the action of the immune system.
- **Intravenous immune globulin (IVIg).** Given through a needle or tube into the vein. This provides healthy antibodies to lower weakness and help fight infection.
- **Complement inhibitors.** Medicines given by injection that help prevent the immune system from attacking muscles. These have special safety risks for meningitis. A vaccine is required when taking these medicines.
- **Neonatal Fc receptor antagonists.** Another class of medicines that help reduce abnormal antibodies. These are given by injection into a vein or under the skin.
- **Plasmapheresis** (plasma exchange, or PLEX) works by removing blood and treating it to remove certain antibodies. The liquid part of the blood (plasma) is then returned to the body via an injection into a vein.
- **Thymectomy** (surgical removal of the thymus gland.) Taking out the thymus lowers antibodies that cause muscles to be weak.

Next Steps:

Review your treatment goals with your doctor. Certain medicines may cause your MG to get worse. Keep a list on hand of medicines you should avoid. You can share this list with health care providers in case of an emergency. Ask your program nurse for details.

Track your treatment

Do you keep track of your treatments? Do you keep a list of all your medicines? Do you use a calendar to track when you take them? Do you track side effects or other issues?

If you answered “No” or “I am not sure” to any of the questions above, you may want to check your treatment plan. Keeping a record of this information helps you and your care team better manage your care. This will give you more control over your own health.

Need help getting started? First, ask your doctor for a record of your medicines. You can also ask your pharmacist. Then share your up-to-date list with your whole care team. This includes your doctors, program nurse, and loved ones involved in your care.

Start your Medicine List

Write down all your prescription and over-the-counter medicines. Also add herbal remedies, vitamins, and food supplements. Keep this list with you at all times. Update your list when you start, stop, or change a medicine. You can also take a picture of your medicine labels to keep on your smart phone.

Use this sample list below as a template to get started.

Name and dose of medicine	How much to take each time	When to take this medicine	Reason I take this medicine	Side effects or other issues?
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Know your numbers: blood pressure

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Blood pressure basics

BP is the force of blood pushing against the walls of the arteries. It is measured with two numbers, a top number (systolic) and a bottom number (diastolic). For most, a goal BP is less than 120/80, or 120 "over" 80. High BP (hypertension) makes your heart work harder. This can lead to health issues like stroke, heart failure, and kidney damage. High BP cannot be "felt," however. So, you may be at risk without feeling bad or knowing something is wrong.

BP can be controlled through medicine. Making healthy lifestyle changes can help too. Here's how to get your BP on target and stay on track yourself:

- Eat a balanced diet that is low in salt (less than 1500 mg of sodium per day).
- Stay active and at a healthy weight. Ask your doctor about exercise plans.
- Limit how much alcohol you drink.
- Quit smoking (you can ask your program nurse for help).
- Ensure you get good sleep.

Next steps: track your own blood pressure

You can ask your doctor or nurse to teach you how and when to take BP readings. Also ask how to get your own BP monitor. Then write it all down on a chart or notebook. Go to www.heart.org and search "Home Blood Pressure Monitoring" for help getting started.

Know your numbers: cholesterol

Cholesterol is another important marker tied to heart health. But what is cholesterol? And what does it do?

Cholesterol basics

Cholesterol is a fat-like substance in your blood. It is needed for good health. But too much of the bad kind of cholesterol can put you at higher risk for heart issues. Two important types of cholesterol are low-density lipoprotein (LDL), known as the bad kind, and high-density lipoprotein (HDL), the good kind. Too much LDL, or not enough HDL, increases the risk that cholesterol will slowly build up in your blood vessels. This can form a thick, hard substance known as plaque in the walls of arteries that feed the heart and brain. This may lead to heart disease and stroke.

Triglycerides are the most common type of fat in your body. A high triglyceride level can add to cholesterol build up. People with high triglycerides often have high cholesterol.

Where does cholesterol come from? There are two sources:

1. Your liver can make all the cholesterol your body needs.
2. The rest comes from eating animal foods like meat, poultry, and full-fat dairy products. Animal foods and some oils like palm and coconut are high in saturated fats. In some people, this can cause the liver to make more cholesterol than it normally would, leading to levels that are too high.

Next steps: have your numbers checked

It is good to check your cholesterol and triglyceride levels regularly. How often this test should be done will depend on certain factors. This includes your age, sex, and family history. Also, if you have diabetes or high blood pressure, if you smoke, and if you take cholesterol medicine. Talk with your doctor about making a plan that is best for you.

Managing high cholesterol

Healthy lifestyle habits help you manage high cholesterol. Eat a balanced diet, exercise, manage your weight, limit alcohol, and don't use tobacco products. If you have high LDL, your doctor will look at your risk factors to decide what your LDL goal should be. These factors will affect how your cholesterol is managed and if medicines are right for you. To learn more go to www.heart.org and search "Cholesterol."

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What is blood sugar and why is it important?

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How is blood sugar measured?

People with diabetes often check blood sugar with:

- A blood glucose meter or continuous glucose monitor (CGM) for current levels.
- An A1C test for average blood sugar over 2-3 months.

Most adults should have an A1C test every three years starting at age 35. If you have diabetes or are at risk, your doctor will check your A1C more often.

What is a normal A1C reading?

A1C goals can be different for each person.

- For most people: less than 5.7%.
- For people with diabetes: under 7%.

Talk with your doctor about the right range for you.

When and why should you track your blood sugar?

Not all people need to closely track their blood sugar. Those at risk for diabetes, who take insulin, or have trouble with their blood sugar levels, do. Those who are pregnant will also be tested at least once. Pregnancy can make you more resistant to insulin. Ask your doctor about your risk. They can tell you if you should track your blood sugar, and how often.

How can you manage your own blood sugar?

If you have diabetes, you and your doctor can come up with the right treatment plan. This can include a plan for diet and exercise. This can also help keep your blood sugar at a healthy level.

Have more questions? Give your program nurse a call.

Treating multiple sclerosis

Multiple sclerosis (MS) is a long-term illness that can impact your quality of life. Luckily, there are many medicines that can help control symptoms and manage the condition. It's important to stay informed about your treatment options. The more you know, the easier it is to stick with your treatment plan and stay healthy.

Goals of treatment:

- Find the best medicine(s) to control your symptoms and reduce flares
- Prevent other problems and medicine side effects
- Help you enjoy life and keep up with daily activities

How MS is treated:

- **Disease-modifying therapies (DMTs)** are the main treatments for MS. These can reduce the progression of MS. In those with MS, the cover or “myelin sheath” that surrounds nerves is damaged. This blocks the flow of electrical impulses from the nerves to body parts. Proper treatment is needed to prevent more damage. There are many DMT options. Some examples are:
 - **Oral**—teriflunomide (Aubagio®), cladribine (Mavenclad®), dimethyl fumarate (Tecfidera®), diroximel fumarate (Vumerity®), fingolimod hydrochloride (Gilenya®), monomethyl fumarate (Bafiertam®), ozanimod hydrochloride (Zeposia®), ponesimod (Ponvory®), siponimod (Mayzent®).
 - **Injectable** (into the muscle or under the skin)—interferon beta-1b (Betaseron®), glatiramer acetate (Copaxone®, Glatopa®), interferon beta-1a (Rebif®), erythema, ocrelizumab and hyaluronidase-ocsq (Ocrevus Zunovo®), ofatumumab (Arzerra®, Kesimpta®), peginterferon beta-1a (Plegridy®).
 - **Infusion** (through a needle placed into a vein)—alemtuzumab (Lemtrada®), mitoxantrone (Novatrone®), natalizumab (Tysabri®), natalizumab-sztn (Tyruko®), ocrelizumab (Ocrevus®), ublituximab-xiiy (Briumvi®).

Other classes of medicines, in addition to DMTs, may be needed to treat certain MS symptoms. These can help with bladder problems, mobility issues, or muscle spasms.

Next Steps:

Ask your doctor about your best treatment options for your symptoms. Your program nurse is also here to help you reach your treatment goals. Reach out at any time!

Track your treatment

Do you keep track of your treatments? Do you keep a list of all your medicines? Do you use a calendar to track when you take them? Do you track side effects or other issues?

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How can you manage your own blood sugar?

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Have more questions? Give your program nurse a call.

Treating myositis

Polymyositis and dermatomyositis (PM-DM) are long-term issues that can impact your quality of life. Luckily, medicine can help control symptoms and manage PM-DM. It's important to stay informed about your treatment options. The more you know, the easier it is to stick with your treatment plan and stay healthy.

Goals of treatment:

- Find the best medicine to control your symptoms
- Prevent other problems and medicine side effects
- Help you enjoy life and keep up with daily activities

How PM-DM is treated:

PM-DM can affect many body parts. PM commonly causes muscle weakness. Common symptoms of DM are skin rash as well as muscle weakness. There can be additional symptoms. PM-DM is not the same for everyone. Many medicines are used to manage PM-DM. They work in different ways.

- **Steroids**—These slow your immune system. Can be taken by mouth or infusion (into a vein).
Examples: prednisone, methylprednisolone, dexamethasone.
- **Immunoglobulins**—Given by a needle into a vein (IVIG) or under the skin (SCIG). Examples: Gamunex®, Gammalex®, Cuvitru®.
- **Immunosuppressants**—Also help slow down the immune system. Examples: methotrexate, azathioprine, cyclosporine, tacrolimus.
- **Biologic disease-modifying antirheumatic drugs (DMARDs)**. These modify the immune system. Injectable forms: adalimumab (Humira®), infliximab (Remicade®), rituximab (Rituxan®), and tocilizumab (Actemra®).
- **Antimalarials**—Example: hydroxychloroquine (Plaquenil®)
- **Plasma exchange**—(also called plasmapheresis). The liquid part of the blood (plasma) is separated from the blood to remove harmful antibodies. This process requires a tube inserted into a vein so there is a risk for infection and bleeding.

Next Steps:

Review your treatment goals with your doctor. Don't be afraid to ask which treatment is the best option for you. Your program nurse is also here to help you reach your treatment goals. Reach out at any time!

Track your treatment

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Name and dose of medicine	How much to take each time	When to take this medicine	Reason I take this medicine	Side effects or other issues?
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MC1400_NALC

Know your numbers: blood pressure

Your blood pressure (BP) is probably taken each time you go to the doctor. It's a very important number, but many don't know why. BP can have a big impact on your health.

Blood pressure basics

BP is the force of blood pushing against the walls of the arteries. It is measured with two numbers, a top number (systolic) and a bottom number (diastolic). For most, a goal BP is less than 120/80, or 120 "over" 80. High BP (hypertension) makes your heart work harder. This can lead to health issues like stroke, heart failure, and kidney damage. High BP cannot be "felt," however. So, you may be at risk without feeling bad or knowing something is wrong.

BP can be controlled through medicine. Making healthy lifestyle changes can help too. Here's how to get your BP on target and stay on track yourself:

- Eat a balanced diet that is low in salt (less than 1500 mg of sodium per day).
- Stay active and at a healthy weight. Ask your doctor about exercise plans.
- Limit how much alcohol you drink.
- Quit smoking (you can ask your program nurse for help).
- Ensure you get good sleep.

Next steps: track your own blood pressure

You can ask your doctor or nurse to teach you how and when to take BP readings. Also ask how to get your own BP monitor. Then write it all down on a chart or notebook. Go to www.heart.org and search "Home Blood Pressure Monitoring" for help getting started.

Know your numbers: cholesterol

Cholesterol is another important marker tied to heart health. But what is cholesterol? And what does it do?

Cholesterol basics

Cholesterol is a fat-like substance in your blood. It is needed for good health. But too much of the bad kind of cholesterol can put you at higher risk for heart issues. Two important types of cholesterol are low-density lipoprotein (LDL), known as the bad kind, and high-density lipoprotein (HDL), the good kind. Too much LDL, or not enough HDL, increases the risk that cholesterol will slowly build up in your blood vessels. This can form a thick, hard substance known as plaque in the walls of arteries that feed the heart and brain. This may lead to heart disease and stroke.

Triglycerides are the most common type of fat in your body. A high triglyceride level can add to cholesterol build up. People with high triglycerides often have high cholesterol.

Where does cholesterol come from? There are two sources:

1. Your liver can make all the cholesterol your body needs.
2. The rest comes from eating animal foods like meat, poultry, and full-fat dairy products. Animal foods and some oils like palm and coconut are high in saturated fats. In some people, this can cause the liver to make more cholesterol than it normally would, leading to levels that are too high.

Next steps: have your numbers checked

It is good to check your cholesterol and triglyceride levels regularly. How often this test should be done will depend on certain factors. This includes your age, sex, and family history. Also, if you have diabetes or high blood pressure, if you smoke, and if you take cholesterol medicine. Talk with your doctor about making a plan that is best for you.

Managing high cholesterol

Healthy lifestyle habits help you manage high cholesterol. Eat a balanced diet, exercise, manage your weight, limit alcohol, and don't use tobacco products. If you have high LDL, your doctor will look at your risk factors to decide what your LDL goal should be. These factors will affect how your cholesterol is managed and if medicines are right for you. To learn more go to www.heart.org and search "Cholesterol."

Know your numbers: blood sugar

Do you have questions about your blood sugar? If you have diabetes or might be at risk, you may know a lot about blood sugar. Or this may be new to you. That's okay! Let's start with the basics.

What is blood sugar and why is it important?

Glucose, a sugar, is used by the cells in your body for energy. It is delivered to your cells through your blood. It is controlled by a hormone called insulin. If your body has trouble making insulin, or your cells become resistant to it, you could be at risk for diabetes and other health problems.

How is blood sugar measured?

People with diabetes often check blood sugar with:

- A blood glucose meter or continuous glucose monitor (CGM) for current levels.
- An A1C test for average blood sugar over 2-3 months.

Most adults should have an A1C test every three years starting at age 35. If you have diabetes or are at risk, your doctor will check your A1C more often.

What is a normal A1C reading?

A1C goals can be different for each person.

- For most people: less than 5.7%.
- For people with diabetes: under 7%.

Talk with your doctor about the right range for you.

When and why should you track your blood sugar?

Not all people need to closely track their blood sugar. Those at risk for diabetes, who take insulin, or have trouble with their blood sugar levels, do. Those who are pregnant will also be tested at least once. Pregnancy can make you more resistant to insulin. Ask your doctor about your risk. They can tell you if you should track your blood sugar, and how often.

How can you manage your own blood sugar?

If you have diabetes, you and your doctor can come up with the right treatment plan. This can include a plan for diet and exercise. This can also help keep your blood sugar at a healthy level.

Have more questions? Give your program nurse a call.

Treating Parkinson's disease

Parkinson's disease (PD) is a long-term illness that can impact your quality of life. Luckily, medicine can help control symptoms and manage your condition.

It's important to stay informed about your treatment options. The more you know, the easier it is to stick with your treatment plan and stay healthy.

Goals of treatment:

- Find the best medicine to control your symptoms
- Prevent other problems and medicine side effects
- Help you enjoy life and keep up with daily activities

Many medicines are used to control PD symptoms.

These medicines work by:

- **Replacing or boosting dopamine** (the substance that helps the brain transmit messages to nerves). Examples: levodopa, L-dopa, levodopa inhalation powder. Others are carbidopa (keeps L-dopa from breaking down too soon in the bloodstream), carbidopa-levodopa, and foscarnidopa/foslevodopa.
- **Slowing the breakdown or reuptake of dopamine in the brain.** Examples: rasagiline, selegiline, safinamide. Other medicines used when taken with those listed above: entacapone, L-dopa-carbidopa-entacapone, opicapone, tolcapone.
- **Acting like dopamine.** Examples: apomorphine, pramipexole, ropinirole, rotigotine.
- **Blocking other chemicals in the body.** Examples: benztropine, trihexyphenidyl, istradefylline.
- **Treating tremors and twisting movements.** Example: amantadine.

Next Steps:

Review your treatment goals with your doctor. Don't be afraid to ask which treatment is the best option for you. There are certain medicines that can make symptoms of PD worse. Make sure you know what medicines to avoid. Your program nurse can help you with a list of medicines to avoid. Reach out at any time!

Track your treatment

Do you keep track of your treatments? Do you keep a list of all your medicines? Do you use a calendar to track when you take them? Do you track side effects or other issues?

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Need help getting started? First, ask your doctor for a record of your medicines. You can also ask your pharmacist. Then share your up-to-date list with your whole care team. This includes your doctors, program nurse, and loved ones involved in your care.

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Cholesterol basics

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Next steps: have your numbers checked

It is good to check your cholesterol and triglyceride levels regularly. How often this test should be done will depend on certain factors. This includes your age, sex, and family history. Also, if you have diabetes or high blood pressure, if you smoke, and if you take cholesterol medicine. Talk with your doctor about making a plan that is best for you.

Managing high cholesterol

Healthy lifestyle habits help you manage high cholesterol. Eat a balanced diet, exercise, manage your weight, limit alcohol, and don't use tobacco products. If you have high LDL, your doctor will look at your risk factors to decide what your LDL goal should be. These factors will affect how your cholesterol is managed and if medicines are right for you. To learn more go to www.heart.org and search "Cholesterol."

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What is blood sugar and why is it important?

Glucose, a sugar, is used by the cells in your body for energy. It is delivered to your cells through your blood. It is controlled by a hormone called insulin. If your body has trouble making insulin, or your cells become resistant to it, you could be at risk for diabetes and other health problems.

How is blood sugar measured?

People with diabetes often check blood sugar with:

- A blood glucose meter or continuous glucose monitor (CGM) for current levels.
- An A1C test for average blood sugar over 2-3 months.

Most adults should have an A1C test every three years starting at age 35. If you have diabetes or are at risk, your doctor will check your A1C more often.

What is a normal A1C reading?

A1C goals can be different for each person.

- For most people: less than 5.7%.
- For people with diabetes: under 7%.

Talk with your doctor about the right range for you.

When and why should you track your blood sugar?

Not all people need to closely track their blood sugar. Those at risk for diabetes, who take insulin, or have trouble with their blood sugar levels, do. Those who are pregnant will also be tested at least once. Pregnancy can make you more resistant to insulin. Ask your doctor about your risk. They can tell you if you should track your blood sugar, and how often.

How can you manage your own blood sugar?

If you have diabetes, you and your doctor can come up with the right treatment plan. This can include a plan for diet and exercise. This can also help keep your blood sugar at a healthy level.

Have more questions? Give your program nurse a call.

Treating rheumatoid arthritis (RA)

There are many treatment options for rheumatoid arthritis (RA). Luckily, medicine can help slow the progress of RA and control symptoms. It's important to stay informed about your treatment options. The more you know, the easier it is to stick with your treatment plan and stay healthy.

Goals of treatment:

- Find the best medicine to control your symptoms and prevent flares
- Prevent other problems and medicine side effects
- Help you enjoy life and keep up with daily activities

How RA is treated:

- **Disease-modifying antirheumatic drugs (DMARDs)**. These are an important class of drugs used to treat RA. These modify the immune system, which helps slow or prevent joint damage. DMARDs are taken long term (months to years).
- **There are different types of DMARDs:**
 - **Conventional**—These come in oral and injectable forms. Examples: methotrexate, cyclosporine, sulfasalazine (numerous brand-name versions).
 - **Biologics**—these target a specific part of the immune system. They are given by injection into a vein or under the skin. Examples: adalimumab (Humira®), etanercept (Enbrel®), infliximab (Remicade®). There are many others.
 - **Biosimilars**—are newer biologics that are nearly identical to brand-name biologic medicines. They produce the same response and cost less.
- **Other medicines used short term** to treat RA pain symptoms may include:
 - **Nonsteroidal anti-inflammatory drugs (NSAIDs)**. Examples: ibuprofen (Advil®), naproxen (Aleve®).
 - **Steroids**. These are not meant for long-term use, as they can cause side effects over time such as high blood sugar or increase risk of infections. Examples: prednisone, budesonide, hydrocortisone, triamcinolone.

Next Steps:

Review your treatment goals with your doctor. Don't be afraid to ask which treatment is the best option for you. Your program nurse is also here to help you reach your treatment goals. Reach out at any time!

Track your treatment

Do you keep track of your treatments? Do you keep a list of all your medicines? Do you use a calendar to track when you take them? Do you track side effects or other issues?

If you answered "No" or "I am not sure" to any of the questions above, you may want to check your treatment plan. Keeping a record of this information helps you and your care team better manage your care. This will give you more control over your own health.

Need help getting started? First, ask your doctor for a record of your medicines. You can also ask your pharmacist. Then share your up-to-date list with your whole care team. This includes your doctors, program nurse, and loved ones involved in your care.

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BP can be controlled through medicine. Making healthy lifestyle changes can help too. Here's how to get your BP on target and stay on track yourself:

- Eat a balanced diet that is low in salt (less than 1500 mg of sodium per day).
- Stay active and at a healthy weight. Ask your doctor about exercise plans.
- Limit how much alcohol you drink.
- Quit smoking (you can ask your program nurse for help).
- Ensure you get good sleep.

Next steps: track your own blood pressure

You can ask your doctor or nurse to teach you how and when to take BP readings. Also ask how to get your own BP monitor. Then write it all down on a chart or notebook. Go to www.heart.org and search "Home Blood Pressure Monitoring" for help getting started.

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Cholesterol is another important marker tied to heart health. But what is cholesterol? And what does it do?

Cholesterol basics

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Next steps: have your numbers checked

It is good to check your cholesterol and triglyceride levels regularly. How often this test should be done will depend on certain factors. This includes your age, sex, and family history. Also, if you have diabetes or high blood pressure, if you smoke, and if you take cholesterol medicine. Talk with your doctor about making a plan that is best for you.

Managing high cholesterol

Healthy lifestyle habits help you manage high cholesterol. Eat a balanced diet, exercise, manage your weight, limit alcohol, and don't use tobacco products. If you have high LDL, your doctor will look at your risk factors to decide what your LDL goal should be. These factors will affect how your cholesterol is managed and if medicines are right for you. To learn more go to www.heart.org and search "Cholesterol."

Know your numbers: blood sugar

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What is blood sugar and why is it important?

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How is blood sugar measured?

People with diabetes often check blood sugar with:

- A blood glucose meter or continuous glucose monitor (CGM) for current levels.
- An A1C test for average blood sugar over 2-3 months.

Most adults should have an A1C test every three years starting at age 35. If you have diabetes or are at risk, your doctor will check your A1C more often.

What is a normal A1C reading?

A1C goals can be different for each person.

- For most people: less than 5.7%.
- For people with diabetes: under 7%.

Talk with your doctor about the right range for you.

When and why should you track your blood sugar?

Not all people need to closely track their blood sugar. Those at risk for diabetes, who take insulin, or have trouble with their blood sugar levels, do. Those who are pregnant will also be tested at least once. Pregnancy can make you more resistant to insulin. Ask your doctor about your risk. They can tell you if you should track your blood sugar, and how often.

How can you manage your own blood sugar?

If you have diabetes, you and your doctor can come up with the right treatment plan. This can include a plan for diet and exercise. This can also help keep your blood sugar at a healthy level.

Have more questions? Give your program nurse a call.

Treating sickle cell

Sickle cell disease is a long-term illness that can impact your quality of life. But luckily, medicine can help control your symptoms and manage your condition.

Staying informed about your treatment is an important part of managing sickle cell. If you are unsure of your options or have questions, now is a great time to talk with your doctor and learn more. The more you know, the easier it is to stick with your treatment plan and stay healthy.

Goals of treatment:

- Keep your sickle cell symptoms from getting worse
- Prevent medicine side effects
- Help you enjoy life and keep up with daily activities

How sickle cell is treated:

- **Hydroxyurea:** this medicine reduces the number of pain crises, the need for blood transfusions, and other problems related to sickle cell. Hydroxyurea takes time to work. You start at a low dose and increase it over time. It can take up to six months for you to find the right dose.
- **Adakveo® (crizanlizumab):** used to reduce the number of pain crises for those 16 years of age and older. It can be taken with or without hydroxyurea.
- **Endari® (L-glutamine):** an oral powder for people 5 years of age and older to reduce the number of pain crises. It can be taken with or without hydroxyurea.
- **Gene therapy:** a treatment that fixes a gene that is not working well. A gene gives your body instructions to make the things it needs. In sickle cell disease, genes that affect your red blood cells don't work correctly. The goal of gene therapy is to help your body make healthy blood cells that don't sickle. Two treatments have been approved for sickle cell. They are Casgevy® (exagamglogene autotemcel) and Lyfgenia™ (lovotibeglogene autotemcel).

Next Steps:

Review your treatment goals with your doctor. Don't be afraid to ask if your treatment is the best option for you. And remember, your program nurse is also here to help you reach your treatment goals. Reach out at any time!

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Not all people need to closely track their blood sugar. Those at risk for diabetes, who take insulin, or have trouble with their blood sugar levels, do. Those who are pregnant will also be tested at least once. Pregnancy can make you more resistant to insulin. Ask your doctor about your risk. They can tell you if you should track your blood sugar, and how often.

How can you manage your own blood sugar?

If you have diabetes, you and your doctor can come up with the right treatment plan. This can include a plan for diet and exercise. This can also help keep your blood sugar at a healthy level.

Have more questions? Give your program nurse a call.

Treating scleroderma

Scleroderma is a long-term illness that can impact your quality of life. Luckily, medicine can help control symptoms. It's important to stay informed about your treatment options. The more you know, the easier it is to stick with your treatment plan and stay healthy.

Goals of treatment:

- Find the best medicine to control your symptoms
- Prevent other problems and medicine side effects
- Help you enjoy life and keep up with daily activities

There are many options for treating scleroderma

Scleroderma can lead to damage in many body parts. Signs of scleroderma often change over time. It is not the same for everyone. Areas affected may include:

- **Skin:** Raynaud's (a blood vessel disorder affecting fingers and toes) can be treated with calcium channel blockers, PDE5 inhibitors, or prostanoids to relax blood vessels and promote healing of skin ulcers.
- **Stomach:** antibiotics can help lower bacteria in the bowels if this is a problem. Examples: ciprofloxacin (Cipro®), metronidazole (Flagyl®). Medicines for heartburn or acid reflux may also be needed. Examples: famotidine (Pepcid®), pantoprazole (Protonix®).
- **Joints:** Nonsteroidal anti-inflammatory drugs (NSAIDs) can lower inflammation in joints and relieve pain. Examples: aspirin, ibuprofen (Advil®), naproxen (Aleve®). Other options are COX-2 inhibitors (example: Celebrex®) or opioids (in rare cases for very bad pain).
- **Lungs:** Immune suppressants may be used to help prevent scarring of lungs. Examples: rituximab (Rituxan®), cyclophosphamide (Cytoxan®), mycophenolate mofetil (CellCept®).
- **Heart:** ACE inhibitors and angiotensin receptor blockers can help to keep blood vessels from getting narrow and blood pressure from getting too high.
- **Dry mouth or eyes (Sjogren's):** Examples: pilocarpine (Salagen®) and cevimeline (Evxac®).

Next Steps:

Review your treatment goals with your doctor. Your program nurse is also here to help you reach your treatment goals. Reach out at any time!

Track your treatment

Do you keep track of your treatments? Do you keep a list of all your medicines? Do you use a calendar to track when you take them? Do you track side effects or other issues?

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Need help getting started? First, ask your doctor for a record of your medicines. You can also ask your pharmacist. Then share your up-to-date list with your whole care team. This includes your doctors, program nurse, and loved ones involved in your care.

Start your Medicine List

Write down all your prescription and over-the-counter medicines. Also add herbal remedies, vitamins, and food supplements. Keep this list with you at all times. Update your list when you start, stop, or change a medicine. You can also take a picture of your medicine labels to keep on your smart phone.

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MC1400_NALC

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BP can be controlled through medicine. Making healthy lifestyle changes can help too. Here's how to get your BP on target and stay on track yourself:

- Eat a balanced diet that is low in salt (less than 1500 mg of sodium per day).
- Stay active and at a healthy weight. Ask your doctor about exercise plans.
- Limit how much alcohol you drink.
- Quit smoking (you can ask your program nurse for help).
- Ensure you get good sleep.

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You can ask your doctor or nurse to teach you how and when to take BP readings. Also ask how to get your own BP monitor. Then write it all down on a chart or notebook. Go to www.heart.org and search "Home Blood Pressure Monitoring" for help getting started.

Know your numbers: cholesterol

Cholesterol is another important marker tied to heart health. But what is cholesterol? And what does it do?

Cholesterol basics

Cholesterol is a fat-like substance in your blood. It is needed for good health. But too much of the bad kind of cholesterol can put you at higher risk for heart issues. Two important types of cholesterol are low-density lipoprotein (LDL), known as the bad kind, and high-density lipoprotein (HDL), the good kind. Too much LDL, or not enough HDL, increases the risk that cholesterol will slowly build up in your blood vessels. This can form a thick, hard substance known as plaque in the walls of arteries that feed the heart and brain. This may lead to heart disease and stroke.

Triglycerides are the most common type of fat in your body. A high triglyceride level can add to cholesterol build up. People with high triglycerides often have high cholesterol.

Where does cholesterol come from? There are two sources:

1. Your liver can make all the cholesterol your body needs.
2. The rest comes from eating animal foods like meat, poultry, and full-fat dairy products. Animal foods and some oils like palm and coconut are high in saturated fats. In some people, this can cause the liver to make more cholesterol than it normally would, leading to levels that are too high.

Next steps: have your numbers checked

It is good to check your cholesterol and triglyceride levels regularly. How often this test should be done will depend on certain factors. This includes your age, sex, and family history. Also, if you have diabetes or high blood pressure, if you smoke, and if you take cholesterol medicine. Talk with your doctor about making a plan that is best for you.

Managing high cholesterol

Healthy lifestyle habits help you manage high cholesterol. Eat a balanced diet, exercise, manage your weight, limit alcohol, and don't use tobacco products. If you have high LDL, your doctor will look at your risk factors to decide what your LDL goal should be. These factors will affect how your cholesterol is managed and if medicines are right for you. To learn more go to www.heart.org and search "Cholesterol."

Know your numbers: blood sugar

Do you have questions about your blood sugar? If you have diabetes or might be at risk, you may know a lot about blood sugar. Or this may be new to you. That's okay! Let's start with the basics.

What is blood sugar and why is it important?

Glucose, a sugar, is used by the cells in your body for energy. It is delivered to your cells through your blood. It is controlled by a hormone called insulin. If your body has trouble making insulin, or your cells become resistant to it, you could be at risk for diabetes and other health problems.

How is blood sugar measured?

People with diabetes often check blood sugar with:

- A blood glucose meter or continuous glucose monitor (CGM) for current levels.
- An A1C test for average blood sugar over 2-3 months.

Most adults should have an A1C test every three years starting at age 35. If you have diabetes or are at risk, your doctor will check your A1C more often.

What is a normal A1C reading?

A1C goals can be different for each person.

- For most people: less than 5.7%.
- For people with diabetes: under 7%.

Talk with your doctor about the right range for you.

When and why should you track your blood sugar?

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How can you manage your own blood sugar?

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Treating lupus

Systemic lupus erythematosus (lupus) is a long-term illness that can impact your quality of life. Luckily, medicine can help control symptoms of lupus.

It's important to stay informed about your treatment options. The more you know, the easier it is to stick with your treatment plan and stay healthy.

Goals of treatment:

- Find the best medicine to control your symptoms and to help prevent flares
- Prevent heart, kidney, blood and other problems and medicine side effects
- Help you enjoy life and keep up with daily activities

How lupus is treated:

Lupus can affect many body parts. Signs of lupus often change over time—it is not the same for everyone. Many medicines are used to manage lupus. They work in different ways. Some have side effects such as bleeding or higher risk of infections. Tell all your doctors about any medicines you take, including vitamins and supplements.

- **Nonsteroidal anti-inflammatory drugs (NSAIDs).** Help to lower inflammation in joints and relieve pain. Examples: aspirin, ibuprofen (Advil®), naproxen (Aleve®).
- **Antimalarials.** Help calm the immune system and reduce flares. Hydroxychloroquine (Plaquenil®) is the preferred one. It should be used for all patients with lupus, including pregnant women, unless contraindicated. It may be used along with other medicines.
- **Steroids.** Control immune system activity and decrease inflammation. Can be oral or injectable. Examples: dexamethasone, prednisone, hydrocortisone.
- **Immunosuppressives.** Control inflammation and lower immune system activity. Examples: azathioprine (Imuran®), cyclophosphamide (Cytoxan®), cyclosporine (Gengraf®), mycophenolate mofetil (CellCept®).
- **Biologics.** Help the immune system to work properly. Monoclonal antibodies are given either by IV injection or under the skin. Examples: belimumab (Benlysta®), anifrolumab (Saphnelo®).
- **Anticoagulants.** Prevent blood clots and/or treat existing blood clots. Examples heparin, warfarin (Jantoven®).

Next Steps:

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Track your treatment

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Blood pressure basics

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BP can be controlled through medicine. Making healthy lifestyle changes can help too. Here's how to get your BP on target and stay on track yourself:

- Eat a balanced diet that is low in salt (less than 1500 mg of sodium per day).
- Stay active and at a healthy weight. Ask your doctor about exercise plans.
- Limit how much alcohol you drink.
- Quit smoking (you can ask your program nurse for help).
- Ensure you get good sleep.

Next steps: track your own blood pressure

You can ask your doctor or nurse to teach you how and when to take BP readings. Also ask how to get your own BP monitor. Then write it all down on a chart or notebook. Go to www.heart.org and search "Home Blood Pressure Monitoring" for help getting started.

Know your numbers: cholesterol

Cholesterol is another important marker tied to heart health. But what is cholesterol? And what does it do?

Cholesterol basics

Cholesterol is a fat-like substance in your blood. It is needed for good health. But too much of the bad kind of cholesterol can put you at higher risk for heart issues. Two important types of cholesterol are low-density lipoprotein (LDL), known as the bad kind, and high-density lipoprotein (HDL), the good kind. Too much LDL, or not enough HDL, increases the risk that cholesterol will slowly build up in your blood vessels. This can form a thick, hard substance known as plaque in the walls of arteries that feed the heart and brain. This may lead to heart disease and stroke.

Triglycerides are the most common type of fat in your body. A high triglyceride level can add to cholesterol build up. People with high triglycerides often have high cholesterol.

Where does cholesterol come from? There are two sources:

1. Your liver can make all the cholesterol your body needs.
2. The rest comes from eating animal foods like meat, poultry, and full-fat dairy products. Animal foods and some oils like palm and coconut are high in saturated fats. In some people, this can cause the liver to make more cholesterol than it normally would, leading to levels that are too high.

Next steps: have your numbers checked

It is good to check your cholesterol and triglyceride levels regularly. How often this test should be done will depend on certain factors. This includes your age, sex, and family history. Also, if you have diabetes or high blood pressure, if you smoke, and if you take cholesterol medicine. Talk with your doctor about making a plan that is best for you.

Managing high cholesterol

Healthy lifestyle habits help you manage high cholesterol. Eat a balanced diet, exercise, manage your weight, limit alcohol, and don't use tobacco products. If you have high LDL, your doctor will look at your risk factors to decide what your LDL goal should be. These factors will affect how your cholesterol is managed and if medicines are right for you. To learn more go to www.heart.org and search "Cholesterol."

Know your numbers: blood sugar

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What is blood sugar and why is it important?

Glucose, a sugar, is used by the cells in your body for energy. It is delivered to your cells through your blood. It is controlled by a hormone called insulin. If your body has trouble making insulin, or your cells become resistant to it, you could be at risk for diabetes and other health problems.

How is blood sugar measured?

People with diabetes often check blood sugar with:

- A blood glucose meter or continuous glucose monitor (CGM) for current levels.
- An A1C test for average blood sugar over 2-3 months.

Most adults should have an A1C test every three years starting at age 35. If you have diabetes or are at risk, your doctor will check your A1C more often.

What is a normal A1C reading?

A1C goals can be different for each person.

- For most people: less than 5.7%.
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Talk with your doctor about the right range for you.

When and why should you track your blood sugar?

Not all people need to closely track their blood sugar. Those at risk for diabetes, who take insulin, or have trouble with their blood sugar levels, do. Those who are pregnant will also be tested at least once. Pregnancy can make you more resistant to insulin. Ask your doctor about your risk. They can tell you if you should track your blood sugar, and how often.

How can you manage your own blood sugar?

If you have diabetes, you and your doctor can come up with the right treatment plan. This can include a plan for diet and exercise. This can also help keep your blood sugar at a healthy level.

Have more questions? Give your program nurse a call.

Treating epilepsy

Epilepsy is a long-term illness that can impact your quality of life. But luckily, medicine can help control your symptoms and manage your condition.

Staying informed about your treatment is an important part of managing epilepsy. If you are unsure of your options or have questions, now is a great time to talk with your doctor and learn more. The more you know, the easier it is to stick with your treatment plan and stay healthy.

Goals of treatment:

- Find the best medicine to control your seizures
- Prevent other problems (like broken bones from falls)
- Prevent medicine side effects
- Help you enjoy life and keep up with daily activities

How epilepsy is treated:

- **Anti-seizure medicines (ASMs):** these are medicines used to control seizures. The goal of ASMs is to reduce your seizures with the fewest side effects and the fewest medicines. There are many ASMs just like there are many types of seizures. You and your doctor can choose the best ASMs for you.
- When taking a new ASM, tell your doctor about any side effects. Often these will stop in a few days when you get used to the new medicine. Still track your side effects even if your seizures are controlled.
- Take your ASM on a set schedule to get the best effect. This means taking the medicine exactly as the doctor says. It is the best way to control your seizures and stay safe.

Next Steps:

Review your treatment goals with your doctor. Don't be afraid to ask if your treatment is the best option for you. And remember, your program nurse is also here to help you reach your treatment goals. Reach out at any time!

Track your treatment

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How can you manage your own blood sugar?

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Have more questions? Give your program nurse a call.

Treating ulcerative colitis

Ulcerative colitis (UC) is a long-term illness that can impact your quality of life. Luckily, medicine can help control your symptoms and manage your condition.

Staying informed about your treatment is an important part of managing UC. If you are unsure of your options or have questions, now is a great time to talk with your doctor and learn more. The more you know, the easier it is to stick with your treatment plan and stay healthy.

Goals of treatment:

- Find the best medicine to control your symptoms
- Prevent other problems and medicine side effects
- Help you enjoy life and keep up with daily activities

How UC is treated:

- **Manage inflammation (swelling).** These medicines lower swelling. This reduces your UC symptoms and the problems that happen during flares.
 - **Aminosalicylates** reduce swelling of the gut. Examples: balsalazide, mesalamine, olsalazine, and sulfasalazine.
 - **Steroids** stop a flare quickly. They are only used in the short-term. They can cause side effects over time, like bone loss or high blood sugar. Examples: budesonide, methylprednisolone, and prednisone.
- **Change your immune system with immunomodulators.** These change how your immune system sends signals through your body. They are strong and are typically used when other medicines do not work. Examples: 6-mercaptopurine, azathioprine, cyclosporine, methotrexate, and tacrolimus.
- **Block signals for swelling with biologics.** These medicines stop signals from the immune system that cause swelling. Examples: adalimumab (e.g., Humira®), certolizumab (Cimzia®), infliximab (e.g., Remicade®), natalizumab (Tysabri®), risankizumab (Skyrizi®), vedolizumab (Entyvio®), and ustekinumab (Stelara®).
- **Antibiotics** are medicines that treat infections, like bacteria in the intestines. Examples: metronidazole or ciprofloxacin.

Next Steps:

Review your treatment goals with your doctor. Don't be afraid to ask which treatment is the best option for you. Your program nurse is also here to help you reach your treatment goals. Reach out at any time!

Track your treatment

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