Genetics can play a role in cardiovascular health, but so can lifestyle changes. Here are eight factors than can affect the heart and what to do about them:

1. **Cholesterol**

**What to know:** "Bad" LDL cholesterol can clog up the arteries that feed your heart and brain – and increase heart attack and stroke risk. "Good" HDL cholesterol can help eliminate the bad, but only to an extent. The body also takes in additional cholesterol from certain foods – like meat, eggs and dairy.

**What to do:** Get a blood test and know your cholesterol levels. Then, work with your health care provider on what changes might be needed. Switching to a low-fat diet can help lower LDL cholesterol. Getting more regular exercise can elevate levels of good HDL.

2. **Resting heart rate**

**What to know:** Lower is better. For most people, a resting heart rate between 60 and 100 beats per minute is considered normal. It's affected negatively by stress, hormones and medication. Getting into better shape can not only lower your resting heart rate, it could help save your life: Studies have shown a higher rate is associated with higher risk for death, even among people who don't have traditional heart disease risk factors.

**What to do:** Check your heart rate at rest, preferably first thing in the morning, before getting out of bed.

3. **Cardiorespiratory fitness**

**What to know:** Aerobic exercise can get the heart pumping and build endurance. Growing evidence over the past three decades has shown that low levels of cardiorespiratory fitness are associated with an increased risk of cardiovascular diseases and death. High levels are linked to a lower risk of developing dementia, Alzheimer's disease, diabetes and even some types of cancer.

**What to do:** A health care provider can assess your cardiovascular endurance and overall fitness. It is often measured using the VO2 max, the maximum amount of oxygen a person can take in during intense aerobic exercise.
To increase cardiorespiratory fitness, go for a run or hop on a bike. Take a brisk walk or turn up the music and start dancing. Any type of aerobic exercise that increases breathing and heart rate has the ability to build your endurance if done regularly. If you haven't been active for a while, start slowly and gradually build.

4. Blood pressure

**What to know:** High blood pressure, or hypertension, often is called the "silent killer" because it usually lacks obvious symptoms. Nearly half of all U.S. adults have high blood pressure, yet many people are unaware. When left uncontrolled, it is a major risk factor for heart attack, stroke and heart failure.

**What to do:** Learn your numbers and what they mean. High blood pressure is defined as a reading of 130 or higher for the top number, or 80 or higher for the bottom number. Make sure to take measurements regularly to detect patterns and recognize when numbers creep up.

5. Blood glucose level

**What to know:** Blood sugar levels can fluctuate depending on time of day, what you eat and when you ate it. Too high or too low a level can affect your concentration, make you dizzy, and harm vital organs. Diabetes develops when there is too much sugar in the blood because the body either fails to make enough insulin or cannot use it efficiently.

**What to do:** Type 2 diabetes is associated with obesity and physical inactivity. Diet and exercise can lower the odds of developing it or slow its progression. A low-fat diet that cuts back on sweets, added sugars and processed meats can help keep blood sugar levels steady.

6. Waist circumference

**What to know:** Some experts consider the distance around your natural waist a better way to measure body fat than relying on body mass index alone. Someone with a relatively low BMI score may have a large waist, and people who carry fat around their abdomen as opposed to the hips or elsewhere are at greater risk for heart disease and Type 2 diabetes. A high waist circumference also is associated with increased risk for high blood pressure and elevated cholesterol levels.
The AHA recommends adults get both their BMI and waist circumference measured each year. BMI alone may not be enough to diagnose obesity, especially in some minority groups.

**What to do:** Grab an old-fashioned tape measure and wrap it around your waist while standing. Place the tape measure just above your hipbones. Then, exhale and record the measurement. Men should aim for less than 40 inches, while women should shoot for less than 35 inches.

### 7. Heart rhythm

**What to know:** Atrial fibrillation, or AFib as it's often called, is a quivering or irregular heartbeat. Left untreated, it doubles the risk for heart-related death and has a fivefold increased risk for stroke.

**What to do:** If you recognize the common AFib symptoms – including weakness, shortness of breath, dizziness, heart palpitations or an irregular heartbeat – see your doctor. Treatment depends on the underlying medical issue that may be causing the AFib and could include medications and procedures to help restore a normal rhythm.

### 8. Family history

**What to know:** Family history is considered a "risk-enhancing factor," according to recent cholesterol management guidelines. That means if a parent, grandparent or sibling has had a stroke, heart attack or other type of heart disease, the information should be shared with your doctor as soon as possible.

Genetic factors such as race also may be in play. High blood pressure, for example, is a major heart disease risk factor, and its prevalence among black Americans is among the highest in the world.

**What to do:** If you don't know a relative's full medical story, seek out family who do. Details such as how old someone was when heart disease first developed can be critical. Family history can give your health care provider a better perspective on your overall risk for cardiovascular disease in the future.
What About African Americans and High Blood Pressure?

African Americans in the U.S. have a higher prevalence of high blood pressure (HBP) than other racial and ethnic groups. It is also often more severe in blacks, and some medications are less effective in treating HBP in blacks.

High blood pressure usually has no symptoms. That’s why it’s called the “silent killer.” The only way to know if your blood pressure is high is to have your healthcare provider check it regularly.

What is blood pressure?
Blood pressure is the pressure of the blood against the walls of the arteries. Blood pressure results from two forces. One is created by the heart as it pumps blood into the arteries and through the circulatory system. The other is the force on the arteries as the heart rests between beats. Blood pressure is measured in millimeters of mercury (mm Hg).

What should my blood pressure be?
Normal blood pressure is below 120/80 mm Hg. The top number (systolic) is the pressure when the heart beats. The bottom number (diastolic) is the pressure when the heart rests between beats.

If you’re an adult with a systolic blood pressure of 120 to 129 mm Hg, and your diastolic pressure is less than 80 mm Hg, you have elevated blood pressure. High blood pressure is a pressure of 130 systolic or higher, or 80 diastolic or higher, that stays high over time.

How often should I have my blood pressure checked?
Your doctor may take several readings over time before making a judgment about your blood pressure.

For proper diagnosis of HBP, your healthcare provider will use an average based on two or more readings obtained on two or more occasions.

Checking your blood pressure is quick and painless. You can have it done in a doctor’s office, hospital, clinic, nurse’s office, pharmacy, company clinic or health fair. You can also purchase a home blood pressure monitor so you can check it at home. Your doctor will tell you how often you should have it checked.

How can high blood pressure affect me?
Left uncontrolled or undetected, HBP can damage blood vessels in various parts of your body. And the longer it’s left untreated, the more likely organs such as your heart, brain, kidneys or eyes will be damaged. This can lead to heart attack, stroke, heart failure, kidney disease, erectile dysfunction, and loss of vision.

What can I do about my blood pressure?
Making healthy lifestyle changes is the first step.

• Don’t smoke and avoid secondhand smoke.
• Reach and maintain a healthy weight.
• Eat a healthy diet that is low in saturated and trans fats and rich in fruits, vegetables, whole grains, and low-fat dairy products.

• Aim to consume less than 1,500 mg/day of sodium (salt). Even reducing your daily intake by 1000 mg can help.

• Eat foods rich in potassium. Aim for 3,500 – 5,000 mg of dietary potassium per day.

• Limit alcohol to no more than one drink a day if you’re a woman or two drinks a day if you’re a man.

• Be more physically active. Aim for at least 90 to 150 minutes of aerobic and/or dynamic resistance exercise per week and/or three sessions of isometric resistance exercises per week.

What about medications?
Depending on your risk and blood pressure levels, you may be prescribed one or more medications in addition to lifestyle changes.

In African Americans, thiazide-type diuretics (water pills) and/or calcium channel blockers (CCBs) are more effective in lowering blood pressure when given alone or as initial medicines in a multidrug regimen.

Your healthcare provider will determine your level of risk and work with you to choose the best treatment options.