average for alternating pairs is also remarkably close to the ratio of the control beat. In other words, one of the paired beats is actually greater than average in its index of performance, and one is less. This observation in dogs, plus the widely recognized effects of potentiation in the postextrasystolic beat, make a strong case for potentiation alternating with deletion as the mechanism of pulsus alternans. This averaging has some clinical consequences. Paired, pulsed stimulation is no longer used for increasing cardiac performance, but it should be apparent from inspection of figures 5 and 6 that the patient does not actually deteriorate from alternation, although alternation is likely to occur in patients with compromised myocardium. The alternation is not a dangerous condition, and a specific intervention is not required to eliminate it, although the clinician may wish to treat the underlying myocardial disorder. Again, the separation between the cause and effect should permit the clinician to consider the long-term health of the patient’s myocardium, rather than rushing to abolish a phenomenon that is not particularly disadvantageous.

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AHA Diet Recommendations

To the Editor:

In a recent American Heart Association (AHA) Committee Report, Grundy et al.1 wrote: “For the first time, the AHA has taken the position that a diet recommendation for the healthy U.S. population is warranted.” I believe this statement is in error. On June 8, 1964, the AHA issued a three-page National Press Release entitled: ‘Heart Association Recommends Reduced Fat Consumption to Lessen Risk of Heart Attacks and Strokes.’

The following are quotations from that release: “The action taken by the Board of Directors broadening the application of the fats statement to the general public should be placed on the record as soon as possible. The Board acted favorably on a proposal to extend to the general public the dietary recommendations of the American Heart Association’s 1961 statement, ‘Dietary Fat and its Relation to Heart Attacks and Strokes.’ It was made clear that a major purpose of the dietary recommendations is to reduce blood levels of cholesterol. Evidence from many countries suggests a relationship between the amount and type of fat consumed, the amount of cholesterol in the blood, and the reported incidence of coronary artery disease. The Association’s recommendations are thus aimed at lowering blood levels of cholesterol in the belief that ‘reduction in blood cholesterol may lessen the development or extension of atherosclerosis and hence the risk of heart attacks and strokes.’”

In 1965, the Los Angeles Heart Association, in response to the above, obtained 1,300,000 educational brochures to dramatize “Reduce the Risk of Heart Attack and Stroke” for distribution “into every home,” which must have included some of the healthy U.S. population.

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AHA diet recommendations.
W J Walker

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