



# Curing Your Heart Without Surgery



**No**

Hospitalization

Surgery

Pain

Preventing and Reversing  
Heart Disease  
Without Surgery



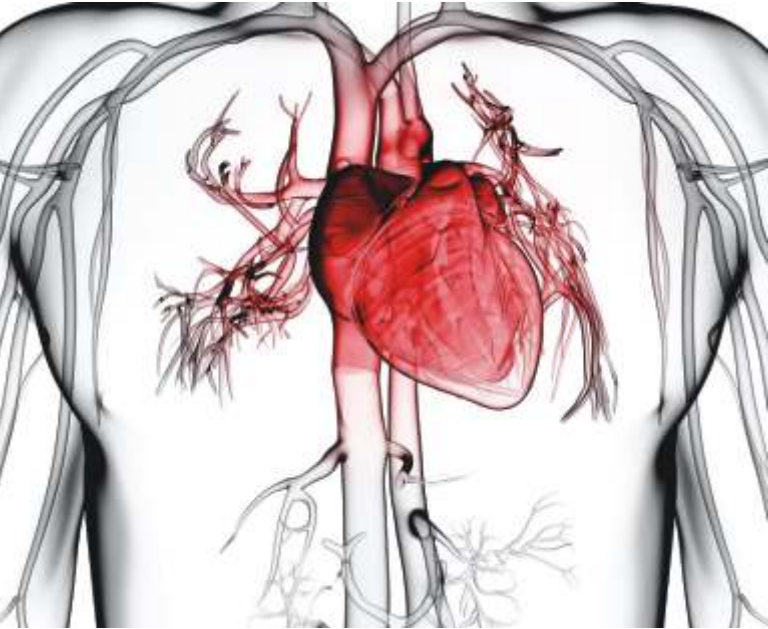
FDA Approved

Safest | Non-Surgical

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# Why your heart is Important?



**The heart** is the body's engine room, responsible for pumping life sustaining blood via a 60,000 mile long (97,000 kilometer long) network of vessels. The organ works ceaselessly, beating 100,000 times a day, 40 million times a year in total clocking up three billion heartbeats over an average lifetime. It keeps the body freshly supplied with oxygen and nutrients, while clearing away harmful waste matter.

About 3 million people die of heart disease every year in India. 30% of all deaths are caused by heart disease. By 2015, India is estimated to have 62 million patients with **coronary heart disease**. Of these, 23 million will be younger than 40 years of age and only 11 million above 60 years of age. One **fifth of the deaths in India are from coronary heart disease**. By the year 2020, it will account for one third of all deaths. Sadly, many of these Indians will be dying young.

## Welcome to 34 Heart Care Centre.

34 Heart Care is dedicated to non-invasive methods focusing on the treatment of heart diseases using proven methodology and technologies. 34 Heart Care treats cardiac disorders using non-invasive and much safer treatments like External Counter Pulsation (ECP) and Bio Chemical Angioplasty (BCA) which are widely accepted abroad and FDA approved by USA government. Patients with a history of heart disease such as blockage in coronary arteries cannot only be treated here but may also be able to reverse their heart condition and prevent future blockage and heart attacks.

The 34 Heart Care clinical team is available to see and treat patients with advanced and unstable heart disease and provide expert care to our patients.

## What shall you know about your heart?

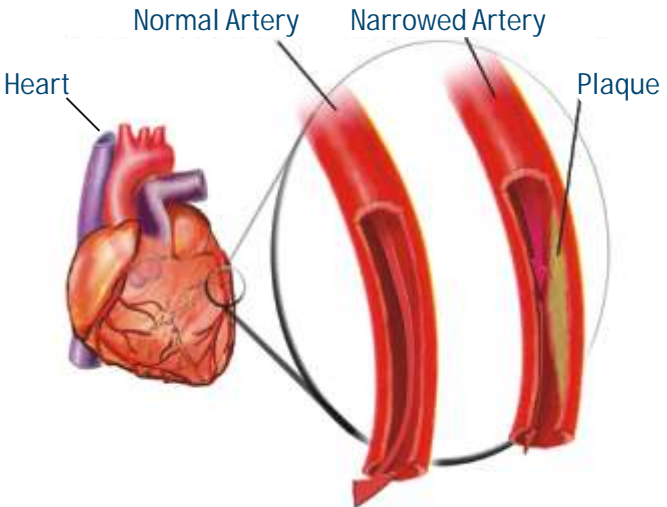
Heart is the muscular four chambered pump that circulates blood to your body. Despite all its four chambers are filled with blood, it cannot use it for itself unless it reaches to its very own vessels, called Coronary Arteries. All three coronaries and its branches supply blood to the heart muscles for its proper functioning but with advancing age, and in many other diseases including hypertension, diabetes, obesity, dyslipidemia (High Cholesterol) and risk factors like high fat diet, smoking, tobacco chewing & alcohol consumption, these coronary vessels loses their elasticity and start narrowing down due to a process called **Atherosclerosis**, which involves accumulation of **lipids** under the endothelial layer of these vessels. This process not only involves the major coronaries, but also their tiny and fine branches providing blood at the tissue level. As a result of poor blood supply, the heart muscles become weaker leading to heart failure. Also due to various involved processes and reasons, any sudden blockage in these narrowed vessels can lead to severe muscle ischemia causing the patient to have **Anginal Pain**, or even myocardial infarction leading to permanent tissue damage and what is commonly known as **Heart Attack**.



## What is Angina?

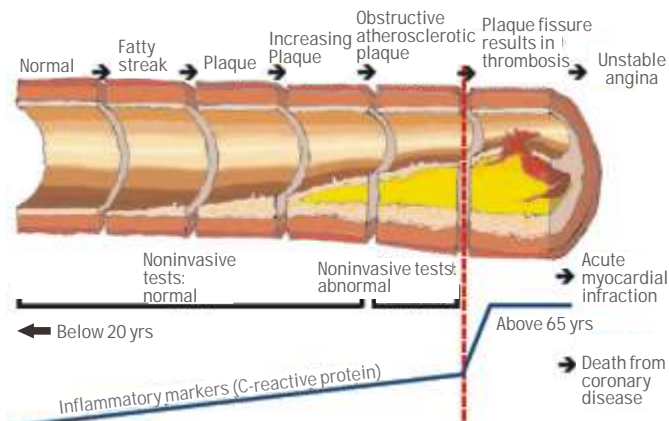


Angina may feel like chest pain or pressure, shortness of breath, pain in the jaw, neck, arms, back, nausea, or generalized fatigue. Each patient experiences angina differently. When occurs during exertion or stress and relieves on rest, it is called **Stable Angina**. One occurring even at rest, is called **Unstable Angina**, and may lead to heart attack. Both angina's are markers of severe coronary narrowing or blockage.



In the process, ECP not only help opening blocked arteries but also develops new pathways around blocked arteries in the heart by expanding networks of tiny blood vessels (Collaterals) that help increase and normalize blood flow to the heart muscles. For this reason, it is often called the **NATURAL BYPASS**.

## Why are we telling you all this?

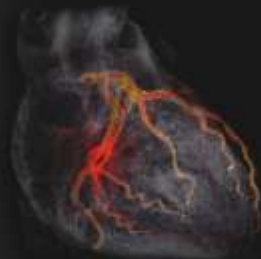


### PROGRESSION OF ATHEROSCLEROSIS IN THE CORONARY ARTERIES.

Well most of us, staying in any part, in any socio-economic level of the country are exposed to obesity, fast food (or so called junk food) and sedentary life style. As per TOI survey, more than 70% population in Delhi is obese. More than 30 lakh individuals in Delhi alone are diabetics with similar picture for Hypertension. This Data is from individuals who were diagnosed in health care facility and are under treatment, which is estimated to be really less than the actual number as many remain undiagnosed, or plan to choose alternative medicine. On the top of that, diabetes and hypertension are not confined to aged anymore, as these are now commonly being encountered in youths. All the three conditions are root cause of heart diseases. Also we should not forget to include tobacco, smoking and alcohol, which are deep rooted truth-in-denial of the society. Stress, exertion, pollution, adulteration all have contributed well to make our heart sicker everyday. Most people never know how sick they are getting, before they show symptoms.

With the new data, young individuals of 25-35 years of age, have increasing number of heart diseases and strokes and as a result number of heart attacks have gone up both among young and aged adults.

Coronary  
Artery  
Blockage



# 34 Heart Care Treatments



## External Counter Pulsation (ECP)



## Artery Chelation Therapy / Bio Chemical Angioplasty (BCA)



1994 FDA (Food and Drug Administration) Certification



CE Certification



1999 American Medicare



2002 ACC/AMA Guidelines AHA  
(American Heart Association)



2006 ACC/AMA Guideline ESC  
(European Society of Cardiology)



2006 CMA Guideline  
CMA (Chinese Medical Association)



ACC (American College of Cardiology)



International ECP Society



NHS Approved

## How 34 Heart Care can help you?

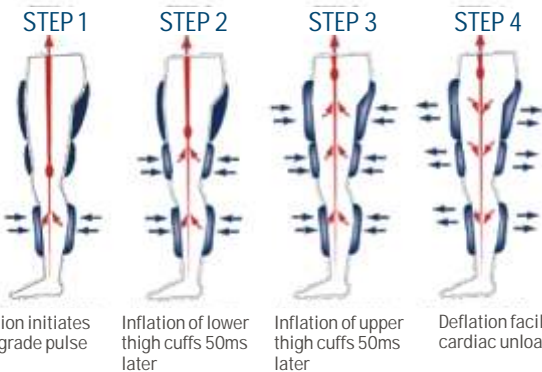
We have taken a step to not only spread awareness, but also to provide a very effective, safe, and quiet recent technology to **Reduce** the risk, **Relieve** the symptoms and **Rescue** your heart of diseases. It will help patients of all ages facing problems of heart and vascular diseases. This simple yet advanced technique is called ECP.

## What is ECP?



ECP or "External Counter Pulsation" is a non-surgical, non-pharmaceutical, treatment for heart disease. During the treatment, blood pressure cuffs are wrapped around your legs, and squeezed and released in sync with your heartbeat, promoting blood flow throughout your body and particularly to your heart and brain.

### Enhanced External Counter Pulsation



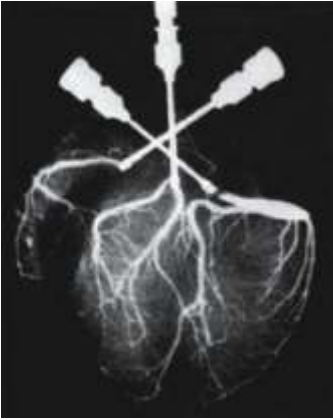


Image is very dark due to reduced blood flow in coronary arteries

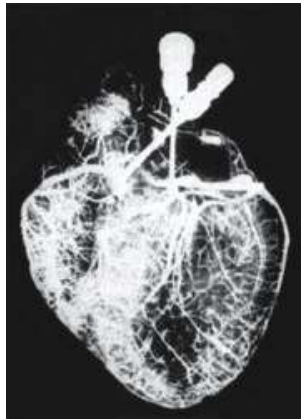


Image is extremely bright due to all of new vessels feeding heart

## What ECP does?

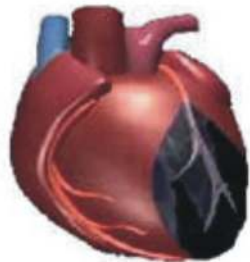
ECP increases blood flow not only to heart, but other vital organs as well :

To heart by **20-42%**

To brain by **22-26%**

To kidneys by **19%**

ECP also increases heart's output (stroke volume) by 12% by reducing afterload. This improves LVEF or Ejection Fraction of the heart.



Decreased  
Blood Flow



Normalized  
Blood Flow



## ECP Benefits in

- Angina (Heart Pain).
- Avoid angioplasty (PTCA) or Bypass surgery (CABG).
- CAD-Coronary Artery Disease.
- PVD-Peripheral Vascular Disease.
- ED- Erectile Dysfunction.
- Congestive heart failure.
- Cardiomyopathy.
- Peripheral neuropathy.
- Cerebral palsy / Stroke
- Intestinal vascular insufficiency.
- Edema or venous insufficiency.
- Chronic fatigue syndrome.

## Other benefits of ECP

- Kidney disease.
- Parkinson's disorders.
- Memory disorders.
- Diabetes and Diabetic Neuropathy.
- High blood pressure.
- Muscular degeneration.
- Other circulatory diseases.
- Hearing loss and tinnitus.
- Vision impairment.
- Autoimmune disease (including Raynaud's phenomenon).
- Restless leg syndrome.
- Lymphatic System insufficiency
- Sports Enhancement.
- Anti-aging.

## Limitations of ECP?

ECP is safe. Occasionally, some patients experience mild skin irritation under the areas of the blood pressure cuffs. Experienced ECP therapists address this irritation by using extra padding to make the patient comfortable.

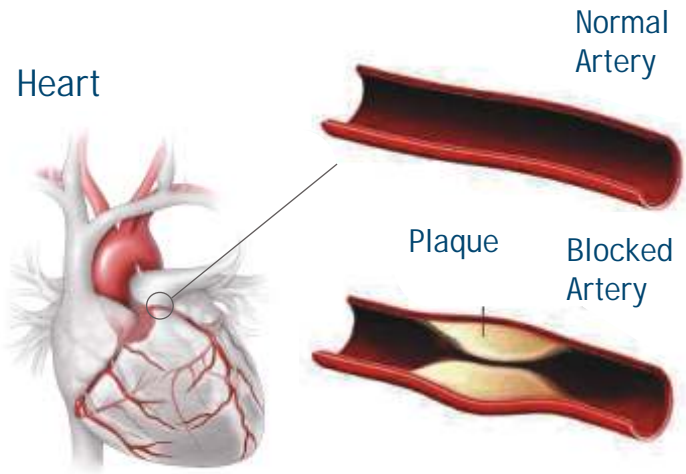
However some patients experience a bit of fatigue at the beginning of their course of treatment, but it usually subsides after the first few sessions.

## What is BCA (Bio Chemical Angioplasty)?

BCA or what medically called Chelation Therapy is a chemical process in which a substance is used to bind molecules, such as metals or minerals, and hold them tightly so that they can be removed from the body. Chelation has been used to rid the body of excess or toxic metals like lead, which play a key role in worsening coronary atherosclerosis.

The use of disodium EDTA for heart disease has been for about a decade to treat heart disease and for other diseases its usage grew. However, in the United States by nearly 68 percent, to an estimated 111,000 people using it annually.

## Methodology of Chelation Therapy



When used as a complementary treatment for heart disease along with ECP, a health care provider typically administers a solution of disodium EDTA, a man-made amino acid, in a series of infusions through the veins. A course of treatment can require 20 to 30 or more infusions of two hours each, taken weekly until the maintenance phase. Patients also typically take high dose pills of vitamins and minerals. In studies conducted in U.S. it has been found that chelation plus high dose vitamins and minerals produced the greatest reduction in risk of cardiovascular events.



Before:  
Sticky plaque is clogging arteries that nourish your heart.

After:  
EDTA blasts away artery plaque to restore healthy blood flow!



## Benefits of Chelation Therapy

- Memory problems or “brain fog”.
- Heart disease: angina; arrhythmias; heart attack; stroke.
- Hypertension (high blood pressure).
- Diabetes.
- Heavy metal toxicity.
- Chronic fatigue.
- Fibromyalgia & autoimmune disorders.
- Kidney disease.
- Leg cramps / walking problems.
- Hearing / vision loss.
- Shortness of breath.
- Hormone dysfunction.
- Erectile dysfunction.
- Poor circulation / cold feet and/or hands.
- Slow-healing sores.

## Limitations of Chelation Therapy

- In some patients Chelation Therapy may result in minor reaction like feverishness, headache and nausea.
- Prior drug history must be checked for sensitivity before treatment.

## Frequently Asked Questions - ECP

### 1. How long does ECP take?

The standard course of treatment is one hour per day, five to seven days per week, for seven weeks (a total of 35 one-hour sessions). Some patients can get two treatments in one day in order to complete the program more quickly. Some patients extend the program beyond 35 treatments, depending on their particular medical situation and goals.

### 2. What are the advantages of ECP?

Well when it comes to treatment of heart disease, the first thing that comes to anybody's mind is balloon angioplasty stenting or lastly bypass surgery. Unlike bypass surgery, balloon angioplasty, and stenting procedures, ECP is non-invasive, carries no risk, is comfortable and is administered in outpatient sessions.

### 3. What does ECP do and how does it work?

As mentioned earlier, ECP works by mainly three processes:

- Dilating blood vessels - Blocked & Small blood vessels enlarge.
- Opening dormant blood vessels lying closed for years.
- Angiogenesis-Forming new blood vessels (what medically known as Collaterals)

### 4. Are there any risks or side effects of ECP?

ECP is safe. Occasionally, some patients experience mild skin irritation under the areas of the blood pressure cuffs. Experienced ECP therapists address this irritation by using extra padding to make the patient comfortable. Some patients experience a bit more fatigue at the beginning of their course of treatment, but it usually subsides after the first few sessions. In fact, patients typically feel energized by ECP.

### 5. How to know if treatment has helped me?

- Patients Angiography would show lesser blockage than before treatment.
- Patient can walk more distance without chest pain.
- Patient would have fewer or no angina.
- Episodes of angina would be less painful.
- Patient can return to work and can participate in their active life style once again.

## 6. Now what is this collateral circulation?

Formation of network of tiny blood vessels, which make it possible for blood to detour around blocked or narrow arteries, is called collateral circulation. However the development of collateral circulation is a gradual process and not everyone has the same ability to develop these networks at the rate that will relieve angina. ECP treatment triggers and accelerates this collateral circulation and makes it permanent in every person who receives complete treatment.



## Millions of Capillaries activated after 34 Heart Care Treatment

### 7. What happens if I miss a treatment?

You are encouraged to come for your ECP treatment every day. However, missing a day will not have a negative effect on your overall results. When you come back, you will simply pick up where you left off, and the missed treatment will be added to the end of your program until you have a total of 35 sessions. Just like exercise, the more consistent you are with your ECP schedule, the better your results will be.

## 8. What does ECP feel like?

ECP feels like a deep muscle massage to your legs. During the treatment, you do not feel anything in the chest or heart. You only feel the cuffs that are wrapped around your legs squeezing in time to your own heartbeat. Our patients have affectionately described this sensation as "gentle hug". Most of our patients relax, listen to music, or read during their treatments. Some even sleep!

## 9. Do the benefits of ECP last?

Yes, In patients followed for three to five years after treatment, the benefits of ECP, including less angina, less nitroglycerin usage, and improved blood flow patterns documented on stress tests, had lasted. If you ask us, for severe cases we recommend to undergo ECP treatment of 35 sessions every year for long lasting results.

## 10. How successful is ECP treatment?

This treatment is famous in western country and more than 90% patients receiving treatments have improved. Most feel better in 15 to 20 sessions of the treatment. ECP benefits last 3 to 7 years or more, depending up on your lifestyle. ECP is so successful, that in USA insurance reimbursement for ECP has gone up by 6% whereas that for other procedures like angioplasty, bypass surgery etc, has decreased by 5%.

## 11. How does ECP compare to angioplasty or bypass surgery?

For a patient who has an event of Myocardial Infarction or severe coronary blockage, for immediate relief angioplasty/stenting or even bypass surgery is needed as ECP cannot provide immediate relief. But once out of emergent condition, patient should undergo ECP to revitalize ischemic muscle tissue, halt further worsening and avoid further complications of Myocardial Infraction.



## 12. Is ECP a recognized treatment?

ECP is internationally recognized by FDA (USA), CE Mark (Europe) etc. ECP is mentioned in medical textbooks. Many articles have been published in the journal of the American College of Cardiology, Cardiovascular Reviews Reports, Mayo Clinical Proc., Clinical Cardiology, Journal of External Counter Pulsation, etc.

## 13. Does ECP give symptom relief as Bypass and Angioplasty?

ECP results are even better than Bypass and Angioplasty. All these current mode of treatments help the heart by increasing the blood flow to the area of the heart muscle not receiving adequate blood supply. Once the blood supply is increased towards normal the patient's chest pain will be decreased or eliminated and his exercise tolerance will improve. However, only via ECP hearts natural mechanism of forming new vessel is enhanced which markedly increase the blood supply to the heart muscle. ECP also tends to improve your endothelial cell function that lines your coronary arteries, which determine your chance of getting heart attacks. ECP decreases your heart rate and other neurohormones which damage the heart muscles.

## 14. Can a patient, who had undergone stenting or bypass surgery, go for ECP?

Yes, of course. Despite the patient had undergone bypass/stenting, the future risk always remains because the disease process of atherosclerosis not only involves the major coronaries , but also its tiny branches which cannot be dilated or undergo stenting due to limitations of the procedure . Also the atherosclerosis can involve the bypass graft in due course of time. Majority of patients undergoing stenting / bypass, land up in undergoing repeat stenting of the other coronaries or repeat bypass surgery, despite regular medications. Therefore, we recommend that a patient who had undergone stenting or bypass, should take sessions of ECP on once a year basis for two to three years, for best outcomes.

## 15. Do I need any investigation to be done after the treatment?

Some patients want to visualize the post ECP treatment improvement when compared with their previous reports. They

can repeat their Exercise TMT or Echocardiography or Nuclear scan after the treatment. Some physician might feel follow-up test is unnecessary since the patient symptomatic clinical improvement itself has demonstrated increase blood flow to the heart muscle. We suggest to get CT coronary angiography before & after treatment to compare results.

### **16. Do I need anything special to prepare myself for the treatment?**

ECP is a safe, out-patient, non-invasive treatment. So you don't have to restrict any of your daily routine work. You can fix your one-hour time treatment schedule according to your convenience. Before you start the treatment you will be asked to wear right clothing to prevent skin irritation and abrasion.

### **17. I have a pacemaker. Is that a problem with ECP?**

No. Pacemakers and internal defibrillators do not interfere in any way with ECP.

### **18. I am on Coumadin/warfarin is that a problem with ECP?**

No. Patients on Coumadin are able to undergo ECP treatments safely.

### **19. I have congestive heart failure (CHF). Is that a problem with ECP?**

No. In fact, in July 2002 the FDA approved ECP as a treatment for Congestive Heart Failure (CHF). After completion a course of ECP treatment, Patients with CHF typically have less swelling in their legs, less shortness of breath, less fatigue, and often require less diuretic medication.

### **20. Can ECP dislodge plaque and cause a stroke or heart attack?**

No. Our bodies obey the laws of physics, and one principle law is that fluid will follow the path of least resistance. Atherosclerotic plaques are calcified and hard, and they create an obstruction that detours the blood through alternate routes. During ECP, when your blood is flowing to your heart, it will naturally bypass arteries with plaque and enter healthy, non-diseased arteries around the blockages. It is a longer trip, but it is a much easier one.



In time, these new pathways are reinforced and become lasting routes for blood to reach your heart beyond the blockages. Every ECP patient had multiple, serious blockages. No one has ever had a heart attack or a stroke as a result of the treatment.

### 21. Are there any patients who are not able to have ECP?

There are very few patients who are unable to have ECP. Those who should not be treated include pregnant women, individuals with a severe leakage in their aortic valve requiring surgical repair, and patients with an active blood clot in their leg, or ones with severe leg injuries.

### 22. I had a blood clot in my leg three years ago. Can I have ECP?

Yes. Having a history of a blood clot (Deep Venous Thrombosis or DVT) in your leg does not preclude you from having ECP. It is recommended that you have Doppler ultrasound of your leg to confirm the blood clot has resolved before beginning the ECP program.

### 23. Does ECP aggravate high blood pressure (hypertension)?

No. If you have hypertension that is properly managed, you may undergo ECP without difficulty. At times, patients with hypertension find that their blood pressure improves as they proceed with ECP. If your hypertension is uncontrolled, you must seek medical care to get your blood pressure under control with proper medications before proceeding with ECP.

### 24. I have bad circulation in my legs (Peripheral Vascular Disease or PVD). May I still have ECP?

Yes, and you should! ECP improves blood flow throughout the entire body, including your legs. If you have poor leg circulation, you might need more than 35 treatments. Many patients typically require at least 50 treatments to get the full benefit of the program. In addition to improved stamina, less angina, and less nitroglycerin use, patients with PVD have a marked improvement in their leg circulation in response to ECP.

## 25. I have atrial fibrillation and an irregular heartbeat. May I still have ECP?

Yes, An irregular heartbeat, including one caused by atrial fibrillation, will not interfere with ECP if the heart rate is controlled and no faster than 100 beats per minute.

## 26. What happens if my angina returns months or years after I finish my ECP treatment course? Can I come back for more?

Yes. ECP is not a once in a lifetime treatment. Heart disease is a chronic illness and symptoms may return at some point in the future. The door is always open for you to return for additional courses of ECP as needed.

## 27. What should I do after ECP treatment?

To prevent the progression of your disease after completion of the treatment you should make life style changes like

- Quit Smoking
- Following heart friendly diet
- Controlling obesity
- Doing regular exercise.

Have regular follow-ups with your cardiologist to lower your cholesterol, to control your blood pressure and diabetes. ECP treatment provides you with new blood vessels. It is up to you to prevent your vessel from developing obstruction again.

## FAQ of Chelation Therapy

### 1. Is Chelation Therapy Safe?

It is a really safe procedure, provided given under monitoring as in some patients any fast infusion results minor reactions like feverishness, headache, and nausea. It is relatively contraindicated in patients with severe grades of renal failure. Patients with drug reactions will be checked for sensitivity before treatment.

### 2. Who should get the Chelation Therapy and do all patients undergoing ECP need it?

It is to be decided by the cardiologist/doctor about your therapy on the basis of your clinical profile and coronary status. Some blood tests are required before taking decision for the Chelation Therapy.

No, it is not needed by every patient. Although patients with no contraindications, can safely opt for BCA in addition.

## Comparison Between Surgical (Bypass) and Non-Surgical 34 Heart Care Treatment

Key Points	Surgical (Invasive)	Non Surgical (AECP/GCA)
Anesthesia, Blood Transfusion	Yes	No
Scar of Cut, Surgery, Pain	Yes	Nil
Hospital Stay	Yes	1 hour per day
Return to Work	In several months	Same day
Danger of Procedure	Death Risk	No Risk
Blockage Removal	None	50-100%
Running, Jogging & Exercise	Restricted	Allowed

### Other Benefits to Brain, Kidney, Liver Disease and more

Increased Blood Flow to all over the Body

To Brain	Nil	22-26%
To Kidney	Nil	upto 19%
To Heart	Nil	20-42%

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Our Locations:



■ Preet Vihar (East Delhi) ■ Prashant Vihar (North Delhi) ■ Meerut (U.P)



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