

American Heart Month: Intermittent Fasting is Good for Your Heart

Research links popular diet trend to lower cholesterol, blood pressure, and resting heart rate

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VO/SOT SCRIPT

SUGGESTED TEASE	PREVENTING HEART DISEASE IS ONE OF THE TOP GOALS OF AMERICAN HEART MONTH. WHY INTERMITTENT FASTING MAY BE MORE THAN A FAD WHEN IT COMES TO GETTING HEART HEALTHY IN FEBRUARY.
ANCHOR LEAD	IT'S FEBRUARY WHICH MEANS MANY PEOPLE WILL BE FOCUSED ON GETTING HEART HEALTHY FOR AMERICAN HEART MONTH. ONE OF THE BEST WAYS TO FIGHT CARDIOVASCULAR DISEASE IS WITH A HEALTHY DIET... AND RIGHT NOW THERE'S A LOT OF HYPE AROUND THE HEART HEALTH BENEFITS OF A POPULAR DIET TREND. INTERMITTENT FASTING INVOLVES SKIPPING MEALS OR RESTRICTING WHEN YOU EAT TO A LIMITED PERIOD OF TIME. NEW RESEARCH ¹ SUGGESTS DOING SO CAN LOWER YOUR BLOOD PRESSURE, CHOLESTEROL, AND RESTING HEART RATE. BUT DR. ANDREW FREEMAN, A CARDIOLOGIST AT NATIONAL JEWISH HEALTH, SAYS YOU CAN DEFEAT THE PURPOSE OF INTERMITTENT FASTING IF YOU'RE NOT CAREFUL.
(SOT :16) CG: Andrew M. Freeman, MD National Jewish Health	<i>"For the people that are willing and have the willpower that can do intermittent fasting. I'm all for it. But it's important also that when you do intermittent fasting to not gorge yourself in those four hours or eight hours or six hours, whatever it may be, so really plan your meals appropriately. So that when it is time to eat you're eating well."</i>
ANCHOR TAG	INTERMITTENT FASTING MIGHT NOT BE FOR EVERYONE, INCLUDING PREGNANT WOMEN AND

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	THOSE WITH CERTAIN HEALTH CONDITIONS LIKE DIABETES. YOU SHOULD CHECK WITH YOUR DOCTOR BEFORE STARTING ANY FASTING PLAN.
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EXTRA BITES

CG: Andrew M. Freeman, MD National Jewish Health	<p>Dr. Freeman explains the concept of intermittent fasting: <i>“We all fast when we go to bed at night, right? And so breakfast, or break the fast, is when we break the fast from the last meal in the evening to the first meal in the morning. But with intermittent fasting, a lot of people are moving toward patterns where they’re doing what we call a 20:4 or 16:8, and what that means is that means is they’re not eating for 20 hours or 16 hours, and they’re combining all their eating in that short period of time.” :19</i></p> <p>Dr. Freeman explains how intermittent fasting changes habits: <i>“It makes one very cognizant of what they’re eating, which is a huge plus in the American society. And more, it makes it harder to consume as many calories because the time to consume then is less.” :10</i></p> <p>Dr. Freeman highlights health benefits of intermittent fasting: <i>“If you say to yourself, ‘Well, I don’t eat during these times,’ then you don’t, and you cut out all of those garbage carbs, or what I call ‘cabbage.’ And if people can get rid of that, the weight goes down, and when the weight goes down blood pressure gets better, diabetes can often go into remission, blood pressure normalizes and people feel more energetic.” :17</i></p> <p>Dr. Freeman says fasting shouldn’t be used by those with certain medical conditions: <i>“Before one starts the intermittent fast they should probably talk with their doctor. So there are conditions, like diabetes for instance, that if there’s not a regular supply of sugar in the blood and you’re on medicine that controls sugar, you can end up with a problem.” :11</i></p> <p>Dr. Freeman explains intermittent fasting isn’t effective in achieving every goal: <i>“There are other conditions too, you know, if you’re trying to gain weight fasting may not be the right thing. If you have a condition that makes your metabolism very high you may not want to do this approach.” :08</i></p>
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CG: Andrew M. Freeman, MD
National Jewish Health

Dr. Freeman says more research is needed on the effectiveness of intermittent fasting:
“The data’s still emerging if this is better than eating a healthy diet throughout the day. And then, there is some conflicting evidence out there that breakfast does actually reduce cardiac event rates.” :11

References

¹*Effects of Intermittent Fasting on Health, Aging, and Disease*, **The New England Journal of Medicine**, Volume 381, No. 26, December 2019. Online:
<https://www.nejm.org/doi/full/10.1056/NEJMra1905136>

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