

LOWN NORTH STAR

News & Updates for Our Patients

Spring 2025 Issue #01



Dear Lown Patients and Community,

We are proud to introduce The Lown North Star, our quarterly newsletter, serving as a beacon for our shared mission of patient-centered care. Just as the North Star has provided guidance for generations, our commitment to compassionate, high-quality medicine continues to light the way for everything we do.

This year marks a major milestone for us. Founded in 1974, the Lown Cardiology Group recently celebrated its 50th anniversary—five decades of delivering exceptional non-invasive cardiovascular care with a strong focus on prevention. As we honor this legacy, we are also looking ahead.

Recognizing that the foundation of exceptional medical care includes internal medicine, we are excited to announce the expansion of our practice. The newly named Lown Medical Group will now offer primary care, with plans to introduce additional specialties in the near future. This growth reflects our commitment to an integrative approach to health, wellness, and medical excellence, always keeping our patients at the center.

In this inaugural edition of The Lown North Star, we welcome the newest members of our medical team and share updates on this exciting new chapter. Thank you for being part of our journey—we look forward to what's ahead!

Warmly,
The physicians of The Lown Group

INTERNAL MEDICINE AT THE LOWN GROUP

We are excited to announce the expansion of our primary care team with four outstanding providers! Please join us in extending a warm welcome to all. To learn more about our new providers, please visit our website.



Dr. Joel Katz

Dr. Joel Katz is an Infectious Disease specialist as well as a seasoned primary care physician. Dr. Katz also serves as the Senior Vice President for Education and the Designated Institutional Official at the Dana-Farber Cancer Institute.



Dr. Lilian Mahrokhian

Dr. Lilian Mahrokhian brings expertise in Preventive Health, Women's Health, and Lifestyle Medicine to the Lown Group. Dr. Mahrokhian is an Assistant Professor of Medicine at Harvard Medical School.



Dr. Harley Simeone

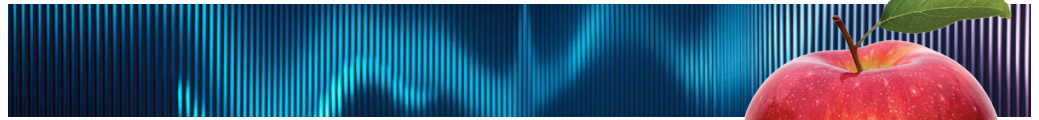
Dr. Harley Simeone, an Assistant Professor of Medicine at Harvard Medical School, brings over 15 years of experience as a primary care physician. She focuses on comprehensive Preventive Health, GI health, and using nutrition and exercise as medicine.



Alyssa Gramstorff

Alyssa Gramstorff, a board-certified physician associate, works alongside Dr. Joel Katz. She has extensive experience managing acute and chronic conditions, emphasizing open communication and shared decision-making with patients.

Q&A



Q: Can I sign up with one of the new primary care doctors?

A: As of now, Dr. Katz's panel is full. Drs. Mahrokhian and Simeone will have limited panel sizes, and their established patients will take priority in enrollment. If you or a loved one would like to be added to their waitlist, or for more information, please call our membership line at (617) 651-5950.

Q: Why don't you hire more primary care doctors?

A: We hear you loud and clear! Many of you have told us that you would love to have a primary care doctor within the Lown Medical Group. We are working on further expanding our primary care team in the next few years, so please stay posted!

A NEW HEART HEALTH PROGRAM FOR WOMEN - LAUNCHING SPRING 2025



Lown is partnering with Systole Health to bring you a transformative **Heart Health** Lifestyle Program this spring, designed specifically for women who want to take control of their cardiovascular health.



This six-week program offers:

- Weekly virtual group visits led by BWH Cardiologist Dr. Simin Lee (see below) and a certified health coach.
- Expert coaching on heart-healthy nutrition, movement, and stress management.
- Personalized tools, including remote monitoring to track your progress. The power of community, learning with other women navigating similar challenges.
- For a limited time, this pilot program will be offered free of charge to our Lown Group patients. We hope you will be willing to provide feedback following completion of the program so that we can make it even better for future participants.



If you're eager to take charge of your heart health and connect with a like-minded, health-conscious community guided by experts, ask us how to sign up today - spots are limited, so don't miss this opportunity! Call our office to enroll.

We're thrilled to announce Dr. Simin Lee, BWH Cardiologist and co-founder and CEO of Systole Health, is now a

Lown Group partner! You may remember Dr. Lee from her outstanding Lown webinar on Ozempic last February.

Dr. Lee brings exceptional expertise and a shared commitment to advancing compassionate, patient-centered care. We are excited for the journey ahead and the valuable contributions she will make to our team.

HEART HEALTH: ALL ROADS LEAD TO PREVENTION

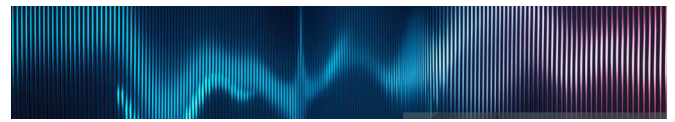
Whether you're a healthy 40-something with a family history of premature cardiac events, a 50-year-old mother who experienced a complicated pregnancy decades ago, or a 65-year-old man whose statin treatment has failed to lower high cholesterol levels, take heart in the growing arsenal of tests and therapies aimed at preventing disease. Lown cardiologist Dara Lee Lewis, MD, shares the latest insights in the Q&A below.

Q: What do you see as some of the most promising recent developments in preventive heart care?

A: As a cardiologist, I'm trained to help patients live well with chronic conditions like coronary atherosclerosis, heart failure and atrial fibrillation. But let's face it - by the time patients are referred to me, their cardiac disease is already established. Wouldn't it be better to prevent these diseases from developing in the first place? While we can do an excellent job minimizing symptoms and stabilizing disease, I'm just treating the tip of the iceberg. We know that atherosclerosis, or hardening of the arteries, takes decades to develop. The time for intervention is in the iceberg itself, before that first heart attack, when someone may feel fine but under the surface, disease is brewing. That's where risk factors such as inflammation, pre-diabetes, high cholesterol levels, and unhealthy behaviors are putting the patient at risk. We have the opportunity to make a huge impact by working with our primary care colleagues to identify high-risk patients at the earliest stages and reduce the chance of having a cardiovascular event in the first place.

Q: In addition to the well-documented factors that can signal a person at high risk for heart disease - unhealthy cholesterol levels, hypertension, diabetes, metabolic syndrome, smoking, lack of physical activity, age, family history - have others been identified?

A: Yes, we're beginning to better understand the key role inflammation plays in the development of coronary artery disease, and now consider chronic inflammatory conditions such as gingivitis, rheumatoid arthritis and certain autoimmune disorders to be risk factors. Women who experienced a complicated pregnancy history, premature menopause or certain cancer treatments are also at a higher risk of heart disease and require close monitoring and screening throughout their lifetime. Most notably, elevated levels of lipoprotein (a), known as Lp(a) (a subtype of LDL cholesterol), have been identified as an independent risk factor.



Q: Why is Lp(a) so significant?

A: An elevated Lp(a), greater than 30-50 mg/dl, is often present in otherwise healthy people. It is a genetically determined risk factor for heart disease, peripheral artery disease, and ischemic stroke. What makes this challenging is that traditional strategies for lowering cholesterol such as statins or exercise and diet modifications have little to no effect on Lp(a); however, PCSK9 inhibitors (non-statin therapy for lowering cholesterol), hormone replacement therapy and Tamoxifen can work for certain individuals. There are also promising new medications being studied.

Q: Sometimes statins (e.g. Lipitor, Crestor) don't work to lower LDL or 'bad' cholesterol either... are other options available?

A: A number of non-statin therapies can be prescribed, including:

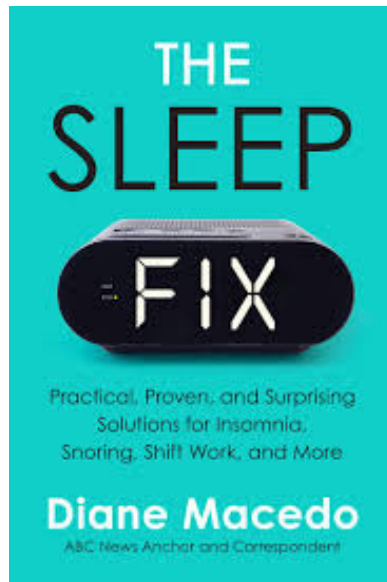
- Ezetimibe (Zetia), a relatively inexpensive pill that can be used alone or given with statins to reduce cholesterol absorption.
- PCSK9 inhibitors (e.g. Praluent, Repatha), monoclonal antibodies given as a shot every two to four weeks. These inactivate the protein PCSK9 to promote more LDL receptors and help clear LDL from the bloodstream.
- Bempedoic acid (Nexletol), a daily pill that causes the liver to make less cholesterol, but with fewer of the muscle aches some who take statins experience.
- Inclirisan (Leqvio), given as a shot twice yearly, blocks production of PCSK9.
- Evinacumab (Evkeeza), a monthly infusion approved only for people with a family history of hypercholesterolemia.

Q: Are new tools available to calculate an individual's risk of heart disease?

A: I've found the American Heart Association's new PREVENT calculator to be a convenient resource to assess an individual's risk of heart attack, stroke or heart failure over the next 10 and 30 years. More comprehensive than earlier versions, it includes measures of kidney function and metabolic health and can be used to predict risk in patients as young as age 30, which is extremely valuable in terms of early detection.



Healthy Reads, Tasty Eats



To all a good night

Many of our patients tell us they often have difficulty falling asleep and / or staying asleep. If this sounds familiar, you may be interested in a great book called *The Sleep Fix* by Diane Macedo. Diane is an ABC News anchor who, after struggling with severe insomnia for decades, decided to take matters into her own hands.

After many years spent interviewing sleep experts and studying the sleep literature, she was able to overcome her insomnia. *The Sleep Fix* is based in solid science, readable and relatable, and full of practical tips and strategies for people struggling with insomnia, sleep apnea, and other sleep problems. One of our colleagues, an expert in sleep medicine, recommends it to all of his patients. You can order this book on Amazon or Bookshop.org.



Cottage Cheese Pancakes

These pancakes are delicious, easy to make, and packed with protein and calcium. To get a good boost of fiber too, sub in whole wheat flour for regular flour.

Author:

Sonja Overhiser

Prep Time: 10 minutes

Cook Time: 10 minutes

Total Time: 20 minutes

Yield: 10 4-inch pancakes 1 x

Category: Breakfast

Method: Stovetop

Cuisine: Breakfast

Diet: Vegetarian

Ingredients

- 4 eggs
- 1 1/2 cups small curd cottage cheese
- 3 tablespoons pure maple syrup, plus more for serving
- 1 teaspoon vanilla extract
- 3/4 cup all-purpose flour
- 1/2 tablespoon baking powder
- 1/4 teaspoon kosher salt

Instructions

In a medium bowl, whisk the eggs, cottage cheese, maple syrup and vanilla (if you see very large clumps of cottage cheese, try to break them up or smash them with a fork). In another bowl, whisk the flour, baking powder and salt. Add it to the bowl with the wet ingredients and mix until a smooth batter forms. Heat a non-stick skillet or griddle over medium heat, then add a bit of butter to coat. Scoop out 1/4 cup portions of batter and cook the pancakes until golden brown on one side, adjusting the heat so it doesn't brown too fast. Flip and cook until cooked through and no longer gooey at the edges (the batter will ooze out a bit at the sides; just keep cooking until it is fully cooked, adjusting the heat as necessary so it doesn't brown too fast). Place the pancakes in a stack under an overturned bowl, and cook the second batch of pancakes. Serve immediately, topped with pure maple syrup.

