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CREW WATCH

DECEMBER 2021

CARDIOVASCULAR DISEASE PRACTICAL ADVICE

PREHYPERTENSION THE WARNING SIGNS

LONELINESS AT SEA HELP FROM SAILORS' SOCIETY

REGULAR MEDICATION DON'T GET CAUGHT SHORT



BRITANNIA P&I
TRUSTED SINCE 1855



IN THIS EDITION WE FOCUS ON CARDIOVASCULAR DISEASE, A GENERAL TERM FOR CONDITIONS AFFECTING THE HEART OR BLOOD VESSELS. WE HIGHLIGHT THE SYMPTOMS AND, MOST IMPORTANTLY, THE SIMPLE LIFESTYLE CHANGES THAT WE CAN ALL MAKE TO DECREASE THE RISKS.

WE ALSO HIGHLIGHT THE PROBLEM OF LONELINESS FOR SEAFARERS. WE ARE GRATEFUL TO SAILORS' SOCIETY FOR THEIR ARTICLE SETTING OUT ADVICE AND SUPPORT FOR THOSE WORKING AWAY FROM HOME. WE CAN ALL BENEFIT FROM SPENDING TIME THINKING ABOUT OUR OWN WELLBEING AND ALSO STAYING AWARE AND ALERT TO THE WELLBEING OF THOSE AROUND US.

A stylized, handwritten signature of Claire Myatt in white ink.

CLAIRE MYATT
Editor

CW

WE HOPE YOU ENJOY THIS ISSUE OF CREW WATCH. We are looking for ways to maintain and increase the usefulness, relevance and general interest of the articles. If you have any ideas or comments please send them to: britanniacommunications@tindallriley.com

CARDIOVASCULAR DISEASE



CARDIOVASCULAR DISEASE (CVD) IS A GENERAL TERM FOR CONDITIONS AFFECTING THE HEART OR BLOOD VESSELS. IT IS ONE OF THE MAIN CAUSES OF DEATH AND DISABILITY WORLDWIDE, BUT THE GOOD NEWS IS THAT IT CAN OFTEN BE PREVENTED BY LEADING A HEALTHY LIFESTYLE.

THE HEART

THE HEART IS A MUSCLE ABOUT THE SIZE OF YOUR FIST. IT PUMPS BLOOD AROUND YOUR BODY AND BEATS APPROXIMATELY 70 TIMES A MINUTE. AFTER THE BLOOD LEAVES THE RIGHT SIDE OF THE HEART IT GOES TO YOUR LUNGS WHERE IT PICKS UP OXYGEN. THE OXYGEN-RICH BLOOD RETURNS TO YOUR HEART AND IS THEN PUMPED TO THE BODY'S ORGANS THROUGH A NETWORK OF ARTERIES. THE BLOOD RETURNS TO YOUR HEART THROUGH VEINS BEFORE BEING PUMPED BACK TO YOUR LUNGS AGAIN. THIS PROCESS IS CALLED CIRCULATION.

CVD OCCURS WHERE THERE IS A BUILD-UP OF FATTY DEPOSITS INSIDE THE ARTERIES WHICH LEADS TO AN INCREASED RISK OF BLOOD CLOTS. THIS DOES NOT ONLY AFFECT ARTERIES IN THE HEART BUT ALSO IN THE BRAIN, KIDNEYS AND EYES.

There are many different types of CVD but the main four are:

1 CORONARY HEART DISEASE

This is where the flow of oxygen-rich blood to the heart muscle is blocked or reduced. This means there is an increased strain on the heart which can lead to chest pains, heart attacks and even heart failure.

2 STROKES

This is where the blood supply to part of the brain is cut off, either permanently or temporarily. This can cause brain damage and, in severe cases, death.

3 PERIPHERAL ARTERIAL DISEASE

This is where there is a blockage in the arteries leading to the arms or, more usually, the legs. This can lead to pain, numbness, weakness and open sores on the feet and legs.

4 AORTIC DISEASE

These diseases affect the aorta which is the largest blood vessel in the body carrying blood from the heart to the rest of the body. If the aorta becomes weak or starts to bulge (an aneurysm) then it could burst and cause life-threatening bleeding.

HIGH BLOOD PRESSURE (HYPERTENSION)

THIS IS ONE OF THE MOST IMPORTANT RISK FACTORS FOR CVD. A CERTAIN AMOUNT OF PRESSURE IN YOUR BLOOD VESSELS IS NEEDED TO CIRCULATE BLOOD AROUND THE BODY. HOWEVER, IF THERE IS TOO MUCH PRESSURE IN YOUR BLOOD VESSELS, IT PUTS EXTRA STRAIN ON YOUR ARTERIES AND HEART, WHICH CAN LEAD TO CVD.

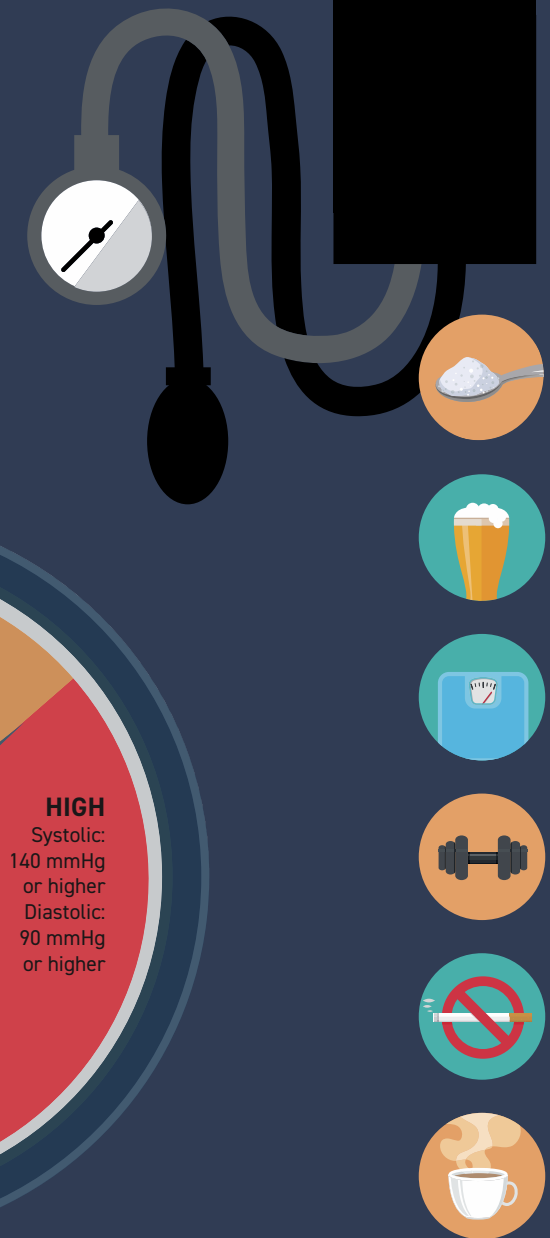
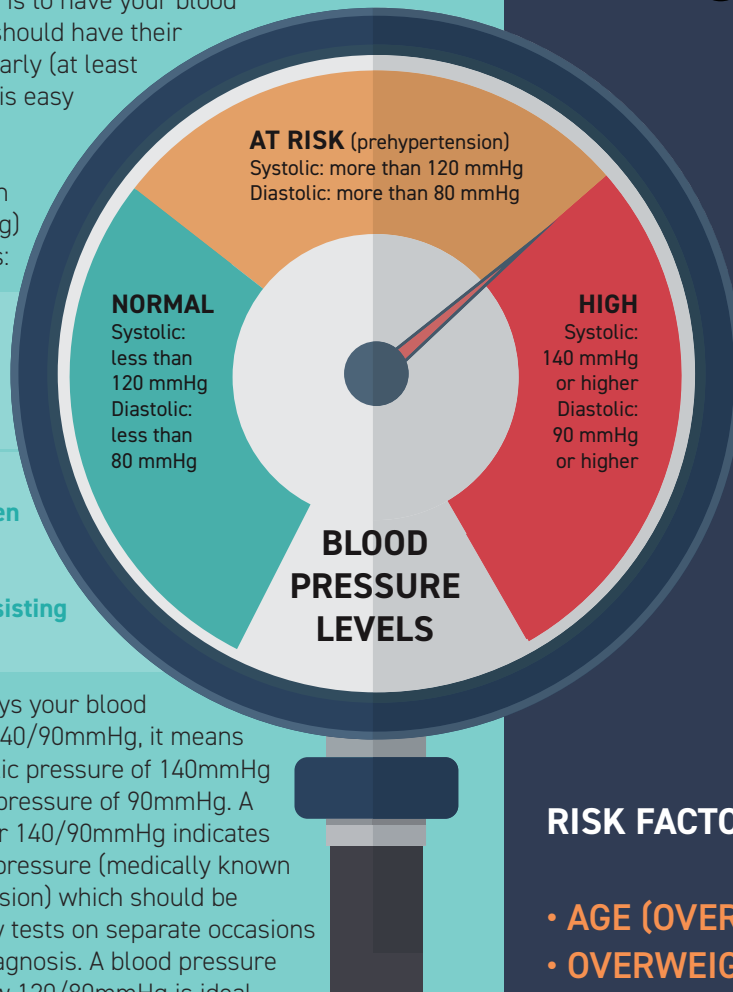
High blood pressure affects more than **1 in 4 adults** and the only way of knowing there is a problem is to have your blood pressure checked. All adults should have their blood pressure checked regularly (at least every year). Having this done is easy and could save your life.

Blood pressure is measured in millimetres of mercury (mmHg) and is recorded as two figures:

SYSTOLIC PRESSURE – the pressure of the blood when your heart beats to pump blood out

DIASTOLIC PRESSURE – the pressure of the blood when your heart rests in between beats, which reflects how strongly your arteries are resisting blood flow

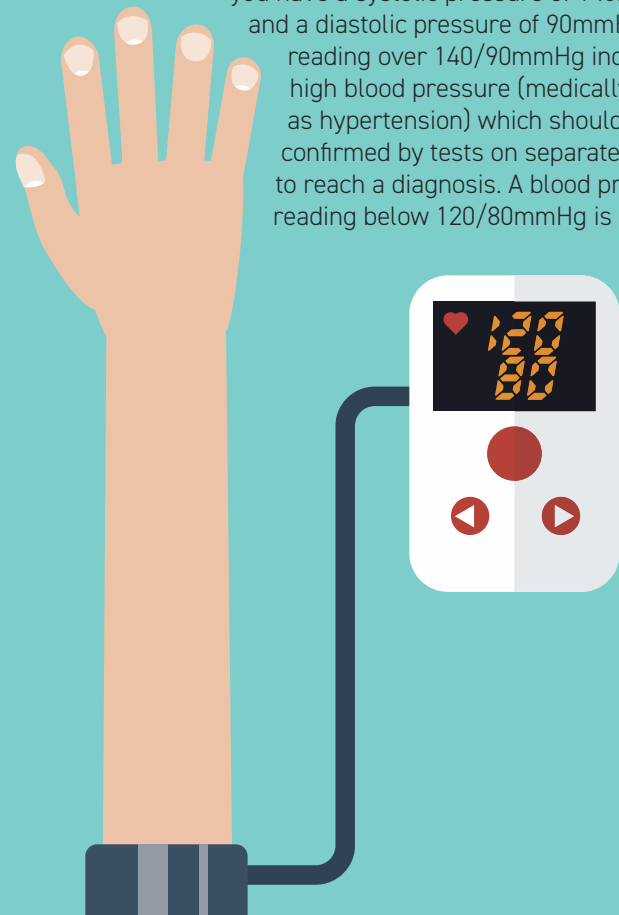
For example, if your doctor says your blood pressure is "140 over 90", or 140/90mmHg, it means you have a systolic pressure of 140mmHg and a diastolic pressure of 90mmHg. A reading over 140/90mmHg indicates high blood pressure (medically known as hypertension) which should be confirmed by tests on separate occasions to reach a diagnosis. A blood pressure reading below 120/80mmHg is ideal.



RISK FACTORS FOR CVD

- AGE (OVER 55)
- OVERWEIGHT
- FAMILY HISTORY OF CVD
- DIABETES
- TOO MUCH SALT
- LACK OF FRUIT AND VEGETABLES
- INACTIVE LIFESTYLE
- ALCOHOL
- CAFFEINE
- SMOKING

IF YOU FALL INTO ANY OF THE GROUPS LISTED ABOVE, CONSIDER MAKING CHANGES TO YOUR LIFESTYLE TO LOWER YOUR RISK OF CVD. ALSO, CONSIDER HAVING YOUR BLOOD PRESSURE CHECKED AT LEAST ONCE A YEAR.



WHAT YOU CAN DO TO LOWER YOUR RISK OF CVD

THE RISK OF CVD CAN BE REDUCED BY EATING HEALTHILY, MAINTAINING A HEALTHY WEIGHT, TAKING REGULAR EXERCISE, REDUCING ALCOHOL CONSUMPTION AND NOT SMOKING. IT IS ALSO IMPORTANT TO MANAGE EXISTING CONDITIONS SUCH AS DIABETES AND TO REDUCE YOUR STRESS LEVELS WHENEVER POSSIBLE.



DIET

Cut down on the amount of salt in your food as **salt raises your blood pressure**. Aim to eat less than 5g (0.2oz) of salt a day, which is about a small teaspoonful, and remember that around 75% of the salt that we eat is already in everyday foods such

as bread, breakfast cereal and readymade meals. Don't add salt to your food automatically – always taste it first.

As well as cutting down on salt, remember to eat a low-fat diet that includes lots of fibre (such as wholegrain rice, bread and pasta) and plenty of fruit and vegetables – all of these will help to lower blood pressure. Fruit and vegetables are full of vitamins and minerals, together with fibre, that all keep your body in good condition. Aim to eat at least **five 80g portions of fruit and vegetables** every day. As an approximate guide, one portion would be 3 to 4 tablespoons of cooked vegetables. Tinned and frozen vegetables all count. For fruit, 1 portion is roughly 2 pieces of small fruit such as a plum or 1 piece of larger fruit such as an apple.



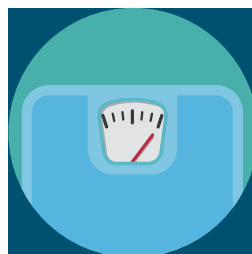
ALCOHOL

Regularly drinking alcohol above the levels recommended by the government health authorities will increase your risk of CVD. Staying within the recommended levels is the best way to reduce your risk of developing high blood pressure.

Recommended levels do vary from country to country but in the UK the advice is:

- **not to drink more than 14 units a week regularly**
- **to spread your drinking over three days or more** (i.e. do not drink all the units on one or two days)

How many units of alcohol are in a drink will depend on the alcohol strength and the size of the drink. As a rough guide, in a can of average strength beer, there will be two units. In a large glass of wine there will be 3 units. A single shot of spirits will be one unit. Also remember that alcohol is high in calories which will make you gain weight.

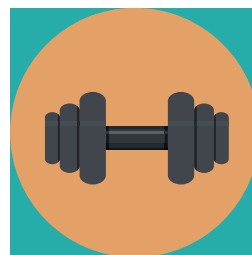


WEIGHT

Being overweight forces your heart to work harder to pump blood around your body and this can raise your risk of CVD. It is worth remembering that losing just a few kilos or pounds will make a big difference to your blood pressure and to your overall health.

It is important to **maintain a healthy body mass index (BMI)** calculated from your weight, height and age and this can be done by your doctor at a medical or by following online calculators such as:

nhs.uk/live-well/healthy-weight/bmi-calculator/



EXERCISE

Being active and taking regular exercise helps to keep your heart and blood vessels in good condition. Regular exercise can also help you lose weight which will also help lower your risk of CVD.

You should do at least **150 minutes** of moderate-intensity aerobic activity (such as cycling or fast walking) every week. For it to count, the activity should make you feel warm and slightly out of breath. You do not have to have access to a gym or a running track to take exercise. There are lots of online exercise programmes and ideas that can be done in a very small space and with no special equipment.



SMOKING

Smoking puts you at much higher risk of CVD as it will damage and narrow your blood vessels. If you smoke and have high blood pressure, your arteries will narrow much more quickly and your risk of heart or lung disease in the future is dramatically increased.



CAFFEINE

Drinking more than **four cups** of coffee a day may increase your blood pressure. If you are a big fan of coffee, tea or other caffeine-rich drinks (such as cola and some energy drinks) you should consider cutting down. It is fine to drink tea and coffee

as part of a balanced diet, but it is important that these drinks are not your only source of fluid.

PREHYPERTENSION

PREHYPERTENSION IS THE INTERMEDIATE STAGE BETWEEN NORMAL BLOOD PRESSURE AND HYPERTENSION WHEN THE SYSTOLIC PRESSURE MEASURES BETWEEN 120 AND 139 MMHG AND/OR THE DIASTOLIC PRESSURE IS BETWEEN 80 AND 89MMHG. IT IS NOT CONSIDERED A DISEASE BUT SHOULD BE REGARDED AS A WARNING SIGNAL OF POSSIBLE DISEASE IN THE FUTURE.

Studies over a 4 year period have shown that those with prehypertension are, on average, 19% more likely to develop hypertension.

With early detection and intervention, progression to hypertension can be avoided and the risk of related cardiovascular and renal disease is also greatly reduced.

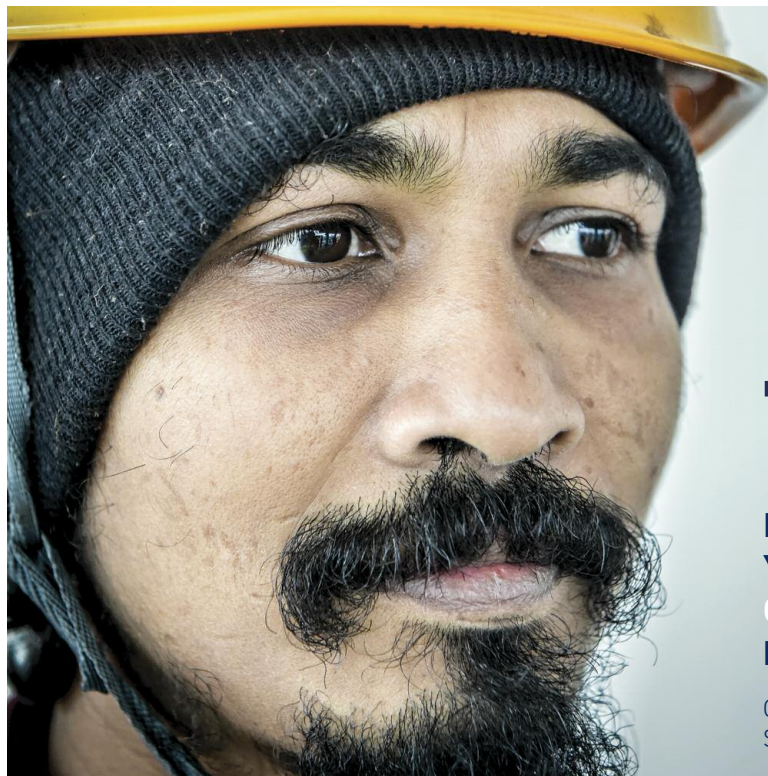
Prehypertension does not usually require medication and can be managed with lifestyle changes that include:

- 1 DIETARY MODIFICATIONS** – reducing sodium intake to **1500mg/day**, cutting down on animal fats and processed food, eating more fruit and vegetables, switching to low and non-fat dairy products and using whole grains rather than refined ones
- 2 REGULAR EXERCISE** – at least **30 minutes** of moderate exercise 5 days/week
- 3 LOSING WEIGHT** if overweight
- 4 STRESS MANAGEMENT**
- 5 LIMITING ALCOHOL INTAKE** to a maximum of **2 drinks** a day for men, and **1** for women.

By adopting these lifestyle changes, you can lower your blood pressure enough to reduce the risk of heart attack, stroke and kidney disease but remember that you need to stick with the changes to make a real difference.

LOOK
FOR THE
WARNING
SIGNS

We are grateful to **Dr Glennda Canlas** from Halcyon Marine Healthcare Systems in Manila for highlighting the early stage signs of hypertension



LONELINESS IS MANY THINGS...

IT'S THE AGONY OF BEING AWAY FROM THOSE YOU LOVE, THE HEARTACHE OF MISSING YOUR CHILD'S FIRST STEPS, OR NOT FEELING AT HOME AMONG YOUR CREWMATES.

Our thanks go to **Johan Smith**, Sailors' Society's Wellness at Sea programme manager

The past 18 months have been tough, especially for those serving at sea. Some have had contracts extended due to lockdowns, others have had flights home cancelled following yet another change to travel permissions.

The very nature of seafaring life means long months spent away from loved ones, and the pandemic has made the situation worse for many, increasing any feelings of low mood.

According to the Centers for Disease Control and Prevention in the US, loneliness is a feeling of disconnect, regardless of the amount of social contact.

Many seafarers battle with bouts of loneliness, regardless of experience or age. It can happen to any one of us.

It can make us experience feelings of inadequacy and self-doubt. It's not uncommon for it to trigger health conditions like depression, sleeping disorders or high blood pressure.

So, what can we do to minimise loneliness?

The good news is, you are not alone. Maritime welfare charity Sailors' Society has been supporting seafarers and their families for more than 200 years.

We have chaplains in ports worldwide who can provide free Wi-Fi so you can call home. We can take you into town or to the doctor. We can help you get the things you need – whether warm clothes, medicine or a giant bar of chocolate!

We know how difficult life at sea can be. If you're missing home, worried about finances or a relationship, or simply want to talk, our chaplains can help:

sailors-society.org/support-for-seafarers

There are also things you can do to take control:

AWARENESS

It's normal to feel 'down' occasionally but prolonged periods of feeling low can be harmful. Check your mental health at: sailors-society.org/was-check-mental-health

STRIKE UP A CONVERSATION

Seek out crew mates, even those you're not currently close to. Deepen friendships through sharing experiences, like relaxing together during mealtimes, exercise etc.

LOOK AFTER YOUR WELLBEING

Be kind to yourself. Do what you can to stay well, physically and mentally. Try to exercise and eat healthily. Perhaps take up a new hobby. Take time to meditate - apps like Calm have free digital sessions.



SEEK SUPPORT

If you're feeling low, call our confidential, 24/7 helpline on **+1-938-222-8181** or instant chat via sailors-society.org/helpline

There are also tips and free podcasts at sailors-society.org/was-coronavirus

REMEMBER, YOU ARE NOT ALONE. SAILORS' SOCIETY IS HERE TO HELP.



REGULAR MEDICATION – DON'T GET CAUGHT SHORT

THE CLUB OFTEN SEES CASES WHERE CREW HAVE BECOME ILL BECAUSE THEY HAVE NOT BEEN TAKING THEIR REGULAR MEDICATION OR WHERE THEY HAVE RUN OUT.

We are grateful to **Dr Glennda Canlas** from Halcyon Marine Healthcare Systems in Manila for some practical tips on taking your medication.

It is very important to take your medication regularly as prescribed by your doctor. This is especially true for chronic conditions such as heart attacks, strokes and diabetes.

For example, taking anti-hypertensive medications (such as Beta-blockers) can reduce

the risk of a stroke by 30% and the risk of a heart attack by 15%. However, when medication is not taken to control the blood pressure, an increase in systolic pressure of 20mmHg and an increase in diastolic pressure of 10mmHg doubles the risk of strokes and heart attacks and increases the need for hospitalisation.

It is important to remember that it may take some days to get medical help or evacuation if you become ill on board and for conditions such as diabetes and cardiovascular disease, this delay could have serious consequences. Risks are less if you take your medication regularly as prescribed.

It is important to have enough medication on board with you. Always take extra just in case your contract is extended or if there are problems with crew changes due to COVID-19 measures.

HERE ARE SOME TIPS TO HELP IN COMPLYING WITH MEDICATION COMPLIANCE:

- 1 TAKE YOUR MEDICATION AT THE SAME TIME EVERY DAY AND LINK IT TO A DAILY ACTIVITY SUCH AS BRUSHING YOUR TEETH OR BEFORE OR AFTER A MEAL.**
- 2 KEEP A MEDICINE LOG TO RECORD AND KEEP TRACK OF INTAKE.**
- 3 USE A PILL CONTAINER TO PREPARE ONE WEEK TO ONE MONTH'S WORTH OF MEDICATION AT A TIME. THIS WILL MAKE IT A CONVENIENT PART OF THE DAILY ROUTINE AND IS AN EASY WAY TO SEE IF THE DAY'S PILLS HAVE BEEN TAKEN OR NOT.**



TR(E)

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