Meet the Heart Expert

Matthew J. McMahon, DO, FACC

An Iowa native, Dr. McMahon grew up in rural Clayton and Delaware counties, and graduated from Loras College in Dubuque and Des Moines University medical school. He began his career as a primary care physician in Nevada through the National Health Service Corp, before deciding to continue his medical education with the United States Army. He completed an Internal Medicine residency and cardiology Fellowship at Fitzsimons Army Medical Center in Colorado and practiced there, as well as at Fort Benning, Georgia.

After leaving the Army, Dr. McMahon joined a busy medical practice in Las Vegas and remained there until moving back to Iowa in 2008, where he joined Cardiologists, L.C. Dr. McMahon is board certified in interventional cardiology, cardiovascular diseases and internal medicine, and also has a special interest in peripheral vascular disease.

“During my early years in cardiology the era of ‘intervention’ began,” said Dr. McMahon. “Being exposed to the pioneers of balloons, stents and other devices increased my desire to learn and perform new techniques for diagnosis and treatment of heart and vascular diseases.”

Dr. McMahon and his wife, Liz, enjoy travel, family and friends. Their seven children—three of whom are still at home—and three grandchildren keep them busy as well. Hunting, fishing and camping are also favorite ways Dr. McMahon enjoys the great outdoors.

Call 319/364-7101 or 800/982-1959 to schedule an appointment with Dr. McMahon.
A minimally invasive approach
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Transradial cardiac catheterizations typically have less complications and less risk of bleeding or artery problems following the procedure. Both procedures take about the same amount of time. Each patient has a very small incision about two or three millimeters. Doctors are able to do all of the same things with either approach, take pictures of the heart, angioplasty or stent placement.

“I went in around 7 a.m., had the procedure and was sent home around 4 p.m.,” said Clark. “It was great. I had no pain and was able to walk around after the procedure.”

“Margaret had a severe blockage in one of her arteries and I placed a stent,” said Dr. Venzon. “In some patients like Margaret – it’s possible for them to forgo an overnight hospital stay.”

These days Clark is back to her regular walks and offers a bit of advice. “I waited about a year and a half to get my chest pain checked out,” said Clark. “I was very lucky I didn’t have a heart attack. I would tell others to get it checked out as soon as possible – don’t wait.”

Understand your risk for a heart attack

Increasing age
About 82 percent of people who die of heart disease are 65 or older.

Gender
Men have a greater risk of heart attack than women and they have attacks earlier in life.

Heredity
Children of parents with heart disease are more likely to develop it themselves.

Smoking
Smokers’ risk of developing heart disease is two to four times that of nonsmokers.

High blood cholesterol
As blood cholesterol rises, so does the risk of heart disease.

High blood pressure
High blood pressure increases the heart’s workload.

Physical inactivity
An inactive lifestyle is a risk factor for heart disease.

Obesity and overweight
People who have excess body fat – especially around the waist – are more likely to develop heart disease and stroke.

Diabetes
Diabetes increases your risk of heart disease.

Stress
Some scientists have noted a relationship between heart disease risk and stress.

Source: American Heart Association

Heart disease isn’t just a man’s disease.
Heart attacks are the number one cause of death in both women and men, but symptoms of this killer are not gender neutral.

“The symptoms experienced by women can be different than those of men,” said Keith Kopec, MD, cardiologist, Cardiologists, L.C. “The classic symptom men typically feel is heaviness or weight in the upper chest but this is not always felt by women. A lot of women will present with fatigue, they can be short of breath or can just have vague aches and pains in the chest.”

According to the American Heart Association (AHA) many women believe cancer is more of a health threat, but that’s not the case. Nearly twice as many women in the United States die of heart disease, stroke and other cardiovascular diseases than all forms of cancer, including breast cancer.

“There are several factors that increase the risk of heart disease and stroke,” said Dr. Kopec. “The more risk factors a woman has, the greater her chances of having a heart attack or stroke. Some of these risk factors you can control, such as increasing age, family history, race and gender. But you can modify, treat or control most risk factors to lower your risk.”

One of the best things a woman can do to reduce her heart attack risk is to stop smoking. Other areas she can improve would include: reducing blood pressure, lowering cholesterol, losing weight, exercising and minimizing stress.

“What women tend to put their issues behind those of their family,” said Dr. Kopec. “Unfortunately it can hurt them and they need to pay attention to and take care of their own health issues.”

If you or someone you know is experiencing chest discomfort that is lasting and not going away seek medical attention immediately.

Cardiologists, L.C. now offers evening appointments at its St. Luke’s Hospital location.
Call 1-855/CLC HEART to schedule an appointment.

What are the symptoms of a heart attack in women?
Like in men, the most common heart attack symptom for women is pain or discomfort in the chest. However, women can also have a heart attack without having any chest pain. Some of the other symptoms women might experience include:

• Feeling out of breath
• Pain that runs along the neck, jaw, or upper back
• Nausea, vomiting or indigestion
• Unexplained sweating or dizziness
• Sudden or overwhelming fatigue

Cardiologists, L.C. now has evening hours to fit your busy schedule. With 16 doctors and more than 30 years serving Eastern Iowa, we offer you full-service, highest quality heart care. Choose the experts at Cardiologists, L.C.

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