

The AHA Recommends Increased Omega-3 Consumption

Evidence from population studies and randomized, controlled trials over the last 25 years have documented the cardioprotective effect of omega-3 oils.

In 2002, these findings led the American Heart Association (AHA) to recommend that all adults include at least two servings of fish per week (particularly fatty fish) in their diets. For patients with documented cardiovascular disease, the AHA recommended consumption of about 1 gram of omega-3 (EPA + DHA) per day, or even higher doses to manage hypertriglyceridemia. The rather would require high-quality omega-3 fatty acid supplements.

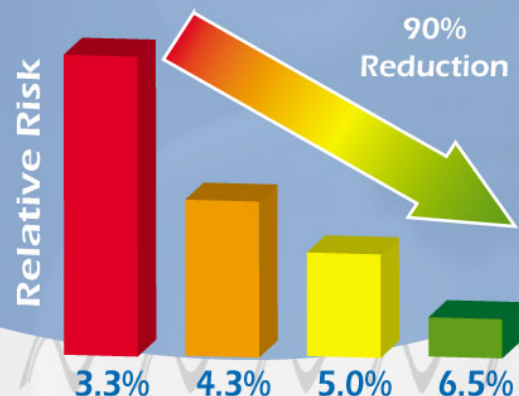


The HS-Omega-3 Index®

This new test is a measure of the omega-3 fatty acid (EPA and DHA) the content of red blood cell membranes. Research has shown an inverse correlation between the HS-Omega-3 Index and relative risk of sudden cardiac death. At the highest omega-3 level, this risk is reduced by 90%.

An HS-Omega-3 Index over 8% indicates low relative risk for death from CHD, where as an Index below 4% is associated with higher risk.

Relative Risk of Primary Cardiac Arrest vs. HS-Omega-3 Index®



Adapted from Siscovick et al. JAMA. 1995

Correcting Your Patients' HS-Omega-3 Index®

Individual differences in metabolism, smoking habits, and other dietary factors will have variable effects on each person's HS-Omega-3 Index. We recommend a baseline test for your patients and retesting 4-6 months later. Modifications in diet or supplementation may be recommended.

You will receive both the test results and an interpretation to share with your patients. When they have achieved an HS-Omega-3 Index greater than 8%, you can both feel assured that their risk of sudden cardiac death has been reduced.

HS-Omega-3 Index® Risk Levels

USA/EU High Heart Risk Japan Low Heart Risk



Effective and Affordable

The American Heart Association reports that coronary heart disease (CHD) is the number one killer of American men and women accounting for more than one of every five deaths in the United States. Of the 425,000 deaths from CHD in 2006, most were sudden death caused by cardiac arrest. Unfortunately, over half of the people that die suddenly from CHD have no previous symptoms.

Researchers have now discovered that one of the best risk indicators for sudden cardiac death is the level of omega-3 fatty acids (EPA and DHA) found in red blood cell membranes.* Now, there is a reliable and affordable blood test that lets you evaluate your patients' omega-3 levels, the HS-Omega-3 Index.

*Albert et al. NEJM. 2002.

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About Dr. William Harris

William Harris, PhD, is an internationally recognized expert in omega-3 and heart disease. He has been the recipient of five NIH grants for studies on the effects of omega-3 fatty acids. He has over 120 publications relating to omega-3's, and was co-author of the AHA's scientific statement, "Fish Consumption, Fish Oil, Omega-3 Fatty Acids and Cardiovascular Disease" published in *Circulation*.



Dr. Harris currently serves as the Director of the Cardiovascular Health Research Center at Sanford Research/USD in Sioux Falls, SD and is a Research Professor of Medicine at the Sanford School of Medicine at the University of South Dakota. He is also the President and CEO of OmegaQuant, LLC.

How to Order the HS-Omega-3 Index®

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The HS-Omega-3 Index®

Are Your Patients
at Risk for
Sudden Cardiac Death?



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