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Non-Invasive Cardiology

When some of his patients said they wanted to try supplements and alternative approaches to their heart problems, one suburban Chicago cardiologist decided to open his mind and practice to their ideas, yielding surprisingly positive results



Dr. Devries in his heart disease prevention office in Deerfield, Ill.

By Rose Spinelli

From the parking lot, Dr. Stephen Devries' cardiology practice looks unremarkable. The bland stucco building is located smack in the middle of a standard-issue mall in the northern suburb of Deerfield, and the aroma of Dunkin' Donuts indicates the chain is within easy cheating distance. Inside Healthy Heart Center, however, an unusual approach to heart care is taking place.

It's not just the lavender aromatherapy scenting a waiting room mercifully free of fluorescent lights. Or the flat-screen televisions broadcasting serene scenes of undulating ocean waves. It's not even an examination room that opens up to a lush atrium flush with living plants, though these touches are part of his pioneering practice, which, according to Devries, "is perhaps the only one in the country specifically set up to do prevention."

Flouting Tradition

For patients quickly losing faith in the catechism of Western medicine, his brand of care is as rare as it is refreshing. Of the growing concern that Americans are obsessed with radical, invasive procedures and prescription pill-popping, Devries says, "I used to think that kind of opinion was the minority, but now I know it's huge." But he's not sure his colleagues are taking heed: "What traditional doctors don't understand is that the alternative movement is larger than their own, but they almost completely ignore it."

According to the National Center for Complementary and Alternative Medicine, an agency within the National Institutes of Health, 55 percent of adults recently surveyed reported that, given the opportunity, they "would be more likely to use complementary alternative medicine combined with conventional medicine because they believed it would be beneficial."

Devries, 48, is firmly in the fold, although he has plenty of traditional, mainstream credentials. Board-certified in internal medicine at the University of Michigan and in cardiovascular diseases at Washington University, he is the former "Heart Beat" columnist for the *Chicago Sun-Times* and the current medical director for the Outpatient Cardiology Center at University of Illinois at Chicago.

"I think traditional medicine is great," he says. "I believe in some of the medicines and I prescribe them often. But this is my departure: There are many ways to get there and you have to incorporate peoples' own belief systems."

That open-mindedness has opened many new doors. "I came in contact with an increasing number of patients who were going to alternative health-care providers, using supplements and seeing nutritionists with diets I wasn't familiar with," he says, explaining that while most of it sounded

"foreign," he kept the dialogue going. "These were very intelligent people who were in touch with their bodies and I could actually see some good results."

One woman came to him with difficult-to-control blood pressure and an aversion to standard drugs. "I came up with another medicine she hadn't tried," he said. When she returned months later, her condition was vastly improved.

"I said, 'Oh, this new medicine is working beautifully.' And she said, 'No, I stopped taking it because I wasn't feeling well with it, but' — and she gave me this long list of supplements that she'd read about — she said, 'I feel great.' "

Among other things, the list included simple vitamins like niacin, B-6 and B-12, and folic acid and fish oil. A typical doctor's response might have been anger. Instead, Devries asked for the list: "I thought, 'Boy, there's something really powerful here.' So I started to read and learn more."

Four years ago, Devries knew the time was right to approach UIC's hospital about creating the satellite office in Deerfield, which is outfitted with state-of-the-art noninvasive equipment. This includes ultrasound imaging and advanced blood testing that detects not only the amount of LDL — the so-called bad cholesterol — but also Lp(a), a combination blood-clotting chemical and LDL fat particle. (The smaller particles are the more dangerous because they can easily penetrate the blood vessels and cause the arteries to harden.) These new technologies allow doctors to detect abnormalities that standard tests do not. Then, as Devries stabilizes cholesterol and blood pressure levels, he works to design individualized treatments based on patients' physical and emotional needs.

"While I think controlling cholesterol for high-risk people is very important, there are many people who won't take prescription drugs," he says. "They're afraid of it, especially because it can be a lifelong proposition. But there are so many ways to get there and I'm going to engage them wherever they are." For those people, Devries says, "We'll go over specific dietary information, exercise, maybe order a stress test if they've been sedentary. Then we'll talk about supplements, or combine them with traditional medicines. We can get very creative with that. Sometimes using a low dose of a prescription medicine, like a [cholesterol-inhibiting] statin, in combination with other supplements can create a powerful effect. I can't tell you how many doctors prescribe cholesterol medications and then say, 'This is what you need for prevention. Now you can eat whatever you want.' The medicines might be exactly the right thing to do, but it's just a small piece of the puzzle."

Genetics to Anxiety, Risk Factors

All patients who see Devries tend to be those who participate in their own health. They're often athletic and health-conscious, and shocked when they hear bad news. "About five years ago, my blood pressure shot up," says Robert Manasse, a 58-year-old dentist from Matteson, Ill., who participates in both marathons and triathalons. "I couldn't figure out why this was happening."

Among other things, Manasse learned from Devries about hereditary. "I was very enlightened by him. First, he put me on Altase, a beta inhibitor, to control my blood pressure. Then he talked to me about diet — even though I never eat junk food. In college I was the weirdo who made a sack lunch every day. So, I inherited this from my parents." Manasse was told to stay away from white flour because the simple carbohydrates break down quickly and raise triglycerides, which can't be absorbed and create bad cholesterol. "I wondered, 'Wow, why didn't I know this?'" Two years later, he says, "another advent came. I wanted to get off medication. My blood pressure was great, but what was my liver going to look like in 20 years?" Devries helped him get off the meds and into chiropractic care. Now he does chiropractic stretches daily. "It puts your spine in a different position. You stretch so that your nerves have flow and everything is open."

Devries says many of his patients come to him in need of intervention but knowingly refuse it. "I have people who have severe multi-coronary disease, and all the literature says they would do better having bypass surgery, and I've told them 'If I were you, I'd have surgery.' Many of them say, 'You know, I hear you, I know what you're saying. I just don't want to do it.' Many cardiologists would say, 'OK, fine, then I don't want to deal with you. Leave.' My approach is very different," Devries continues. "I say, 'OK, I've given you my recommendation and as long as you

know the facts and don't want to go with that, let's go to what's next.' So we look at the next best options."

These days, it's likely to be acupuncture, biofeedback, even energy healing. "I sent one woman for a healing-touch treatment after a serious trauma, which was causing her tremendous stress. She told me it was the first time she felt at peace in three years. She had come to see me because of her heart," Devries says. "But she told me something very interesting. She said, 'I know my heart is at risk because of this thing that's built up inside me.' Her numbers looked fine, but I think she was right. She knew what she needed." Devries adds, "The great thing about these therapies is there's no toxicity, there's no risk. I'm going to make sure that these things are not done in place of important treatments. We're not leaving anything out. We're just adding a whole lot."

Life Lessons

"In medical school," Devries says, "we learned about pills and surgery, but mind-body? We learned zero. Nutrition? We learned close to zero. Surely there must be some truth in other systems and yet we learned nothing — we didn't even learn about it to discard it. That is short-sighted. I trained in two Top 10 medical schools and they devoted no time to prevention."

Continually adding to his exploration of natural treatment options, Devries enrolled in the Program in Integrative Medicine directed by Andrew Weil at the University of Arizona. He completed the two-year training last November.

"It gave me more tools, more information and more fuel in my fire," he says. "Practicing this kind of medicine is so enjoyable. Otherwise, it's 'Here's a prescription.' My 13-year-old son can do that. That's not good medicine. The data show half the people stop taking their prescriptions after a year. Why? Because you haven't engaged them in a conversation that they feel comfortable with."

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