PREVENTION PRIMER

South Asian Heart-Risk Primer

Why South Asian men carry outsized cardiometabolic risk — and the questions to bring to your next appointment.

The numbers that matter

~4× risk	Greater risk of heart disease versus the general population.
~10 years earlier	Coronary artery disease tends to appear about a decade sooner.
Before 50	A large share of heart attacks in this group strike before age 50.
Even at "normal" weight	Risk can be elevated at lower BMI — waist size and metabolic markers matter more.

Why the difference

- A tendency toward central (visceral) fat and insulin resistance.
- Higher rates of low HDL, high triglycerides, and elevated Lp(a) — often inherited.
- Diets heavy in refined carbohydrates, plus lower average activity in midlife.
- Under-screening: prevention bloodwork is often not done early enough.

Bring these questions to your doctor

- Can we run an **ApoB** and **Lp(a)** test, not just standard cholesterol?
- What are my **HbA1c**, fasting insulin, and triglyceride-to-HDL ratio?
- Is my **blood pressure** in range when measured properly, at rest?
- Given my background, should we be more aggressive on prevention now?

The takeaway

These numbers are a starting line, not a sentence. The M.E.D.S. framework — Meditation, Exercise, Diet, Sleep & Stress — targets exactly the levers that move this risk.