

A TRIUMPHANT APPROACH



CARDIOLOGIST BRETT VICTOR FOCUSES ON PREVENTION



BY JOSEPH MYERS
PHOTO BY ANDREW ANDREOZZI

Practicing medicine will never appeal to the faint of heart. It demands not only supreme dedication but also the ability to make connections with people who might not always like the sound of certain advice. Having joined the Cardiology Consultants of Philadelphia nine years ago, Dr. Brett Victor, 40, has wel-

comed every task tirelessly. The Fellow of the American College of Cardiology assists patients

HEALTH at three locations and is affiliated with the same number of hospitals. He and wife Courtney have two children – Mia, 10, and Bennett, 7. PRH caught up with this local physician to discuss how he remains on the beaten path with respect to cardiovascular health and how hard his field is fighting to preserve lives.

RowHome: What led you

to choose your specialty? How has your profession evolved over your time within it?

Brett Victor: My father is a well-known cardiologist who has been taking care of this community for decades, and clearly, I was influenced by his passion for the practice of medicine, and cardiology, specifically. His were very big shoes to fill, but I was able to find my lane. Over my 10-year career, we now have even more advanced imaging modalities at our disposal, like PET/CT to complement tried-and-true

ECG, echocardiography, and a good history and physical exam to make a diagnosis. Also, more and more safe and effective medications are available not only to treat, but to prevent cardiovascular disease.

RH: What are the thrills that your vocation provides to you? What are any drawbacks?

BV: Every patient I see is a new challenge, and no two days are ever the same. The biggest joy I get is making a diagnosis or putting a treatment plan into place, getting to see it through and hearing from a patient that I have helped to make their lives better. Sometimes, though, despite all efforts, things don't turn out well, and this is, of course, a challenge.

RH: What are some misconceptions that people have about cardiovascular health?

BV: 'If it ain't broken, don't fix it.' While this may be a good old saying for your fridge, it doesn't go for your heart. High blood pressure, high cholesterol, and even mild heart disease can be completely asymptomatic, but still pose a significant risk.

RH: Regardless of gender, what can individuals do to strengthen cardiovascular health?

BV: It doesn't take much to improve one's cardiovascular health. Ideally, we recommend at least 150 minutes of moderate-intensity (or 75 minutes of vigorous) aerobic exercise per week, and some kind of weight/resistance training two days per week. This isn't possible or

reasonable for all patients, though. At a minimum, I recommend some kind of physical activity (including walking) for a total of five hours per week. Many patients now have smartphones (or other wearable devices) that have a lot of tools to help keep track of this, but a cheap pedometer works, too. Of course, just exercise alone won't cut it. Dietary choices are equally important to long-term cardiovascular health. The single most important thing for cardiovascular health is to avoid smoking and, if you do smoke, to cut down and stop.

RH: What is your top cardiovascular health tip?

BV: If you smoke, now is the time to stop. Not soon, or next year. **THIS WEEK.** And if you've tried and relapsed, try again! Most people try to quit a bunch of times before it sticks.

RH: Is there an anecdote that validates for you that you have chosen the perfect vocation?

BV: Often, I will hear stories about how another provider may suggest that a patient of mine start/stop this medication or try this/that diet, and they say, 'Well, first I gotta' talk to my heart doctor.' It is very satisfying to learn that I have earned a patient's trust. I don't have all the answers, and sometimes I learn from my patients. That builds trust, as well.

RH: What do you foresee in your field in the future?

BV: I think the future of our field will focus more and more on prevention, with more precise and personalized risk assessments based on advanced imaging, genetics, and maybe even artificial intelligence. Then, rather than a "one size fits all" approach to lowering risk, it will be more individualized.

RH: Given that your job calls on you to venture to CCP's South Broad Street location, what is your perception of South Philadelphians? Is there any special joy that you gain from helping people who live in a major city?

BV: South Philadelphians are a tight community, like a big extended family who always take care of one another. There are foods, traditions, and even words/phrases, that are special to this community. I am lucky to have a connection to this community, given the many decades our group has been a staple here.

RH: Why should people choose you as their cardiovascular health specialist?

BV: I try to be well-rounded and stay up-to-date on the best information to share with my patients. I also LISTEN to my patients and value and respect them as people.

RH: What are some non-job pursuits/interests that keep you going?

A: BV: I have always loved traveling, especially to other countries. Most recently, my family and I visited Madrid and Barcelona. I love skiing and try to get out West at least once a year. Over the summer, I like to spend time down the shore. Recently, I've rediscovered a love for tennis (I played in high school) and have been learning squash, too. I greatly enjoy music (listening, not playing!), especially concerts, and I love the Eagles. These days, my free time is spent more and more watching or coaching my kids in their various sports.

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