





We started the wine tasting with two lovely Spanish sparkling wines that demonstrated very different styles. The 2013 Raventos I Blanc “L’heureu” Conca del Roiu Anola Bruit was youthful, fresh, lively and paired nicely with passed hors d’oeuvres. From biodynamically farmed vineyards, it is a blend of three indigenous Spanish grapes, 40% Macabeo, 40% Xarel-lo and 20% Parellada.

The 2009 Pere Mata “Cuvee Barcelona” Cava Grand Reserva Penedes showed richness and depth from five years of bottle aging on the yeast, and its earthy complexity went well with the delicious mushroom tarte, which is certainly one of Piperade’s showcase dishes. This wine is produced from the same three Spanish grapes, this time a blend of 50% Macabeu, 30% Xarel-lo and 20% Parellada.



For the next course we celebrated Spring with a trio of dishes—a minestre of spring vegetables-peas, asparagus, and artichokes; brilliant red Piquillo peppers stuffed with fresh goat cheese, pistachios, and golden raisins; and then classic Basque sheep cheese, warmed and toasted with ham terrine and aged sherry.

The white wine chosen to accompany these dishes was in itself a revelation of the quality of modern Spanish white wine production. The 2015 Bodegas Godeval Valdeorras, Godello Vina Godeval Cepas Vellas is from yet another indigenous grape, the Godello. This example is from the Galicia region, perhaps better known to Americans as the home of Albarino. The grape has been grown in Galicia and in the Duoro area of Portugal since at least the 16<sup>th</sup> century, but by the 1970's very few vines remained. Fortunately the movement to “re-discover” native, non international, varietals led to restoration of this grape, predominantly in Galicia where it produces a lovely fruit filled wine with natural acidity and freshness that is a wonderful alternative on a day you want something other than Chardonnay.



Our main course of roasted squab with braised cabbage, foie gras, grapes and verjus provided the opportunity for us to sample two excellent reds and to touch base with two additional Spanish regions—the 2012 Marques de Murrieta Reserve from Rioja and the 2013 Bodegas Alejandro Fernandez “Pesquera” Criana Tinto from Ribera del Duero.

Marques de Murrieta is one of Rioja's two oldest bodegas. This vintage was composed of 77% Tempranillo, 10% Granacha (Grenache), 8% Graciano, and 5% Mazuelo (a local name for Carignane). The wine was aged for two years in, as is often the custom in Rioja, American oak barrels. (Hint—if you want to learn more about the effects of different types of oak on wine, be sure to come to our June dinner at the French Club—more information at the end of the newsletter).

The Pesquera is pure Tempranillo (or Tinto Fino as it is called in Ribera del Duero) and Alejandro Fernandez is one of the icons of this region. As we enjoyed this intense and flavorful wine, Susan Anacker reminisced for the group about the Society's vintage tour to Spain a number of years ago where the group was warmly hosted by the energetic Senor Fernandez.

An informal poll showed that each wine was preferred by about half of the attendees, although both were enjoyed by all. Once again our venture into Spain provided a wonderful change of pace from what many of us usually drink.

The dessert course was Turrón (nougat) Mousse Cake with roasted almonds. This was paired with a Jerez dulce, or sweet sherry, the Lustau "East India Solera".

Centuries ago casks of sherry were often used as ballast on sailing ships plying the trade between Europe and the far east. Providing stabilisation for the ship and refreshment for the crew, it was also a revelation that the wines tended to improve after their long and warm voyage, due to the enhanced oxidation taking place due to the motion of the ship and temperatures in the hold.

As steam and then diesel engines replaced sail, the need for ballast passed, but the memories of the wines did not. Today Lustau makes this sherry blend in the "style" of yesteryear by aging certain casks in the warmest and dampest parts of their cellar. The oxidative richness and nuttiness of the base Oloroso sherry wine is further enhanced by the addition of some Pedro Ximenez.

Pedro Ximenez grapes are used to produce a rich and sweet sherry, made even more so by placing the grapes on mats in the sun to dry and concentrate the flavors and sugar content further prior to crushing. The resulting wine is unctuous and may be the sweetest of all wines, known for its flavor of dates and dried fruits. By blending some Pedro Ximenez with the Oloroso sherry made from Palomino grapes, the resultant wine is nutty, sweet, and rich, with a tangy saltiness on the palate and a pleasing aftertaste. A great way to end a meal.

Our thanks to executive chef and owner, Gerald Hirigoyen, for a wonderful repast and a very entertaining talk on the culture and history of the Basque people and their migration to our shores. Our thanks also to our wine co-chairs, Susan Anacker and Dr. Jack McElroy. Susan and Jack spent a lot of time researching and tasting wines to come up with the great selection we enjoyed, and also shared their memories of visits to the Spanish wine country with us.



## ALCOHOL AND CARDIOVASCULAR DISEASE

A recently published very large clinical study has added to the research on the association of alcohol consumption and the incidence of cardiovascular disease. *"Association between clinically recorded alcohol consumption and initial presentation of 12 cardiovascular diseases: population based cohort study using linked health records"* by Steven Bellet al was published March 22, 2017 in the British Medical Journal.

For over four decades there have been a number of studies showing less heart attacks among moderate drinkers compared to either abstainers or heavy consumers. Dr. Art Klatsky, who has addressed our Society several times in years' past, and his colleagues from Kaiser Permanente published some of the first data about incident heart attacks with data about alcohol consumption obtained from the questionnaire associated with the Kaiser Multiphasic Physical Exam. In subsequent studies Dr. Klatsky also reported on alcohol consumption and incident coronary artery disease, ischemic stroke, hypertension, and hemorrhagic stroke.

The protective benefit of moderate alcohol consumption is complex and controversial. There is heterogeneity among different types of heart disease, and most if not all studies relied on self reporting of alcohol consumption. Furthermore there was the confounding question of whether non drinkers included a proportion of former drinkers, who quit drinking due to health reasons, thus skewing the statistics unfavorably for non drinkers.

The current study in the British Medical Journal by Bell et al used review of electronic medical records from nearly 2 million adults over the age of 30 free of cardiovascular disease at baseline. 51% of participants were women. Outcomes compared to alcohol consumption were compared for 12 manifestations of cardiovascular disease: chronic stable angina, unstable angina, acute myocardial infarction (heart attack), unheralded coronary heart disease death, heart failure, sudden cardiac arrest, transient ischemic attack, ischemic stroke, stroke due to intracranial bleeding, peripheral arterial disease, and abdominal aortic aneurysm.

The study still relied on self reporting, with some subjective entry by clinicians. There was an attempt to differentiate between true non drinkers versus former drinkers. Moderate drinking was defined as 3 units a day or 21 a week for males and 2 per day or 14 per week for females. Heavy drinking was more than this. A unit was the equivalent of a glass of wine or half pint of beer or an ounce of spirits.

Non drinkers were associated with an increased risk of unstable angina, heart attack, unheralded coronary death, heart failure, ischemic stroke, peripheral arterial disease, and abdominal aortic aneurysm compared to moderate drinkers.

Heavy drinking conferred an increased risk of developing unheralded coronary death, heart failure, cardiac arrest, transient ischemic attack, ischemic stroke, intracerebral hemorrhage, and peripheral artery disease, but a lower risk of heart attack or stable angina. Regarding difference by sex, there appeared to be few associations that differed in magnitude by sex other than that women who were heavy drinkers were not at increased risk of heart failure compared to men.

For us wine lovers, the study unfortunately was unable to account for differences in risk by type of beverage. Furthermore they were unable to account for impact of drinking pattern, which is important since most people do not spread their consumption equally during the week. They also did not seek to elicit thresholds of drinking associated with the lowest risk of harm, thus heavy drinkers undoubtedly included considerable variation.

So what did the study show: Findings were consistent with many previous publications, with the power of a data base of nearly two million persons enhancing the validity of the findings. The question of separating never drinkers from former drinkers also was addressed here, to the extent that questionnaires and chart review can provide the answer to this question.

Studies such as this enhance the science and epidemiology of Medicine. The art of Medicine involves interpreting these studies in order to counsel the individual patient. So how does this individual Cardiologist use this data?

To individualize advice one must take the time to know the patient. If I have a male patient who does not have a contraindication to alcohol use—i.e. no personal or strong family history of addiction, does not have uncontrolled hypertension or heart rhythm disorder or history of heart failure,— I counsel him that moderate alcohol consumption has been shown in multiple epidemiological studies to convey a decreased risk of coronary artery disease related events, such as heart attack, unstable angina, and ischemic stroke.

For the female patient one must consider the risk of breast cancer, which has been shown to increase with increasing alcohol consumption. In the absence of a personal or strong family history of breast cancer, particularly in relatives where the disease appeared at a young age, I would again advise that moderate use of alcohol can reduce the risk of heart attack, which is still the number 1 killer of women. Because of the association of alcohol consumption with breast cancer, I would counsel that moderate intake for a woman should be 1 unit a day. I would not encourage a woman with a personal or strong family history of breast cancer to drink alcohol, but if she chose to, I would hope that she would adhere to this lower limit.

Would I urge a reluctant non drinker to begin drinking to reduce cardiovascular risk—probably not. I would certainly emphasize diet, exercise, ideal weight, blood pressure control, cholesterol control, and smoking cessation as all valuable and proven interventions that would have priority. But for the non drinker, without contraindications to drinking, who asks and appears interested in reducing risk, I would give them the data in the hope of facilitating their own informed decision.

As to what to drink, therein lies the question. Large studies such as the one just reviewed do not study differences in type of alcoholic beverage, however, many studies suggest the effect is an alcohol class effect. We do know that wine has many anti-oxidant and organic compounds that theoretically add advantage over other alcoholic beverages, and when you consider taste and diversity and enhanced dining pleasure, it is hard to argue against wine—although admittedly at this point there may be more art than science here

**MARK YOUR CALENDERS-278<sup>TH</sup> QUARTERLY DINNER MEETING  
FRENCH CLUB  
FRIDAY EVENING JUNE 9, 2017**

Each year our most popular event is usually our dinner at the French Club, and this year promises to be no exception. Dinner chair Mark Rosenberg M.D. will be combining his talents with wine chair, Larry Dennen M.D. to plan a delicious and classic French meal paired with wines selected by Larry that I can guarantee you will be fantastic.

And we should have a great program for you as well. Just a couple of years ago when I was a young man learning to explore the world of wine I met Mel Knox, equally youthful and enthusiastic. Mel was in the retail side of the trade then, and has gone on to a very successful career in wine making and barrel brokering, importing wine casks for many of California's most premium producers.

Mel has always had a warm, friendly, and outgoing personality, wonderful attributes for a speaker, and he has agreed to address us at the French Club about the influence of different types of wood on the taste and development of wine. He hopes to bring some barrel samples with him to demonstrate different oaks, and he will be prepared to share his encyclopedic knowledge of the California wine world with us.

So please plan on attending. Great food, great wine, great educational opportunity. This event is likely to fill, so please mark your calendars and respond promptly when the official announcement is sent out.

To your health!

*Bob Blumberg M.D.*

Cellar Master, Editor

**NOTES FROM SUSAN**

**Membership:** Please be reminded that SMFW is now a 501 C 3 non-profit organization and open to Associate Members. You can email me to obtain a membership application form or find one online at [www.medicalfriendsofwine.org](http://www.medicalfriendsofwine.org)

278th. Dinner	June 9, French Club
Vintage Tour	July 15, Anderson Valley
Cheese and Wine	August 6, Emeryville
Lunch & Tasting	August 25, Kenefick Ranch
279th Dinner	October 7, TBD
79 <sup>th</sup> . Annual Dinner	Jan 20 2018 TBD

511 Jones Place, Walnut Creek, CA 94597  
Tel: 925.933.9691 email: [susanguerguy@sbcglobal.net](mailto:susanguerguy@sbcglobal.net)

