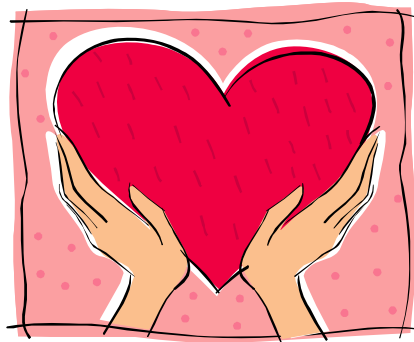


# Living with Heart Failure



## Hospital to Home

2<sup>nd</sup> Edition 2007

*Information for you, your family and carers*



**Queensland  
Government**  
Queensland Health



**Brisbane  
Cardiac  
Consortium**

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*The authors have taken every effort to ensure the content of this booklet is in accord with current recommendations and practice at the time of publication. However, in view of ongoing research and the constant flow of information relating to the treatment of heart failure, all patients should seek regular up to date information from their medical practitioners and relevant health care professionals.*

*The information in this booklet relating to medication use is not comprehensive and further information can be obtained from a medical practitioner or pharmacist.*

*The hospitals, divisions of general practice and governing bodies involved with the production of this booklet will hold no responsibility over any damage that occurs to any person as a result of reading the information provided in this booklet.*

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## Section 1 - Introduction

This booklet aims to help you understand heart failure and how it affects your body, and to control your condition and improve the way you feel.

### **What is heart failure?**

Heart failure is when the pumping ability of your heart is **reduced** and less efficient than normal. Heart failure is also called: Congestive Heart Failure (CHF), Congestive Cardiac Failure (CCF), or Left or Right Ventricular Failure (LVF or RVF).

Heart failure is due to a weakening of the heart muscle. As the muscle gets weaker, the heart finds it harder to pump enough blood around the body to meet the demands of the functioning organs and tissues.

The severity of heart failure depends on how much the pumping ability of the heart is reduced.

Studies have shown that heart failure medications and lifestyle changes can improve symptoms, decrease your time in hospital and help you to live longer.

### **How common is heart failure?**

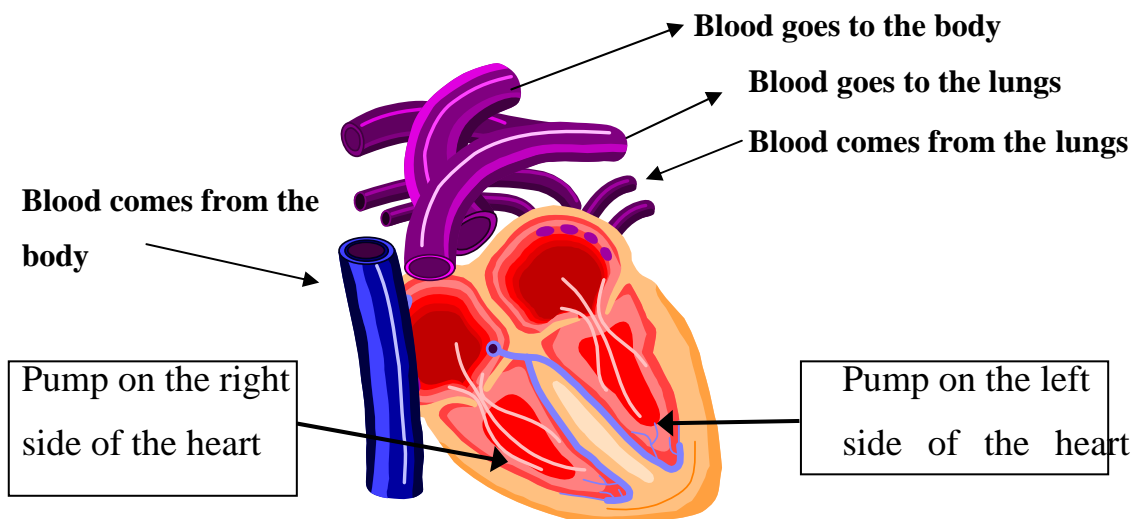
Heart failure is a common health problem around the world.

In Australia up to 5 in every 100 people over the age of 65 have heart failure.

## Section 2: How the heart works and causes of heart failure

The heart is a muscle which pumps blood to every part of the body. The blood pumped from the heart provides the body with oxygen and nourishment needed

for energy and growth. The heart muscle has two pumps called ventricles, one on the left and one on the right.



### **The left pump (ventricle)**

The left side of the heart pumps fresh blood, received from the lungs, to all parts of the body.

This pressure can cause fluid to collect in the lungs making it difficult to breathe.

If the left pump is not working well, a backpressure of the blood entering from the lungs builds up.

### **The right pump (ventricle)**

The right pump receives blood returning to the heart from the body that is low in oxygen. The right side of the heart pumps blood to the lungs where it collects more oxygen and gets rid of other waste.

If the right pump is not working well, a back pressure of the blood returning from the body builds up which can cause fluid to collect in the body such as the ankles, feet or waist.

### **What causes heart failure?**

Heart failure can be caused by a narrowing of the blood vessels which supply the heart, high blood pressure, enlarged heart, **defects** of the heart present at birth, and problems with heart valves.

High blood pressure places a great strain on your heart and needs to be carefully controlled by medications and lifestyle changes.

**The good news is that there is a lot you can do to prevent heart failure or stop it getting worse by changing your lifestyle and taking medications.**



## Section 3: Symptoms of heart failure

### Symptoms to monitor

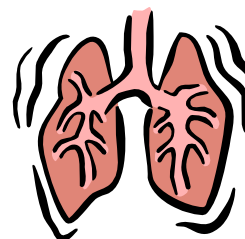
1. Shortness of breath
2. Persistent coughing
3. Waking at night with breathlessness
4. Tiredness
5. Feeling faint or dizzy
6. Swelling of ankles, feet or legs
7. Swelling or pain in your abdomen
8. Chest pain
9. Fast or irregular heart beat
10. Emotional changes

To help you monitor your symptoms record when they start, how often they occur and how bad they are.

**If your symptoms worsen or you notice a new symptom you should discuss this with your doctor.**

### What causes the symptoms?

1. *Fluid on lungs*



Back-up of fluid in the lungs can cause **shortness of breath** or **coughing**.

At night time, you may **waken with breathlessness** because fluid accumulation in the lungs increases when you are lying down. Propping yourself up on

two or more pillows may improve your breathing at night.

### ***2. Reduced blood supply to body***

A reduction in the amount of blood supplying your muscles can make you **breathless** and feel tired, especially during exercise. A reduction in the blood supply to your brain can cause **dizziness** or **faintness**.

### ***3. Fluid build up in body***

The back up of fluid in the body can cause **swelling of ankles, feet and legs and sometimes around the waist**. This fluid build up can be removed by taking medications called diuretics or ‘water tablets’.

### ***4. Emotional responses***

It is common to feel angry, helpless, or to loss of confidence because of changes to your lifestyle.

If you feel overwhelmed or would like some help to cope with your feelings, your doctor can refer you to social workers, psychologists or other professionals who work with individuals or families to cope with heart failure.

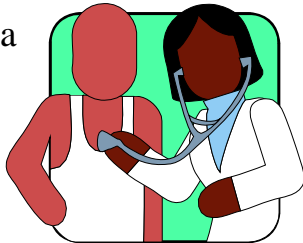


## Section 4: Diagnosing Heart Failure

### Symptoms and physical signs

To diagnose heart failure your doctor will ask you about your symptoms and will examine your heart and body for physical signs of heart failure.

Using a stethoscope, the doctor listens to



your breathing, for signs of fluid in the lungs, and to heart sounds. Your doctor will also look for excess fluid in your body.

### *Electrocardiogram (ECG)*



An electrocardiogram (ECG) test is carried out by placing small electrodes onto your skin and recording the electrical activity of

the heart. The ECG shows the rhythm and rate of your heartbeats and may show whether your heart muscle is damaged.

### *X-Ray*

An x-ray of your chest will show the size and shape of your heart. It also shows any fluid in the lungs.



### **Echocardiogram (Echo)**

Echocardiography (echo) uses sound waves to show a picture of the heart. This helps the doctor to see how efficiently the heart is pumping. An echo measures the quantity of blood that the heart pumps out at each heartbeat and allows its size, shape and movement to be observed.

### ***Cardiac Catheterisation***

Cardiac catheterisation is where a heart specialist passes a thin tube through a blood vessel in your leg that reaches into your heart. This is done in order to measure the pressure at which blood is being pumped through the heart. Sometimes a very small piece of heart muscle is taken and examined under a microscope. This may help the doctor find out the cause of your heart failure.



### ***Angiogram***

An angiogram is where dye is passed into the heart allowing the heart specialist to take pictures of the blood vessels of the heart (coronary arteries).

### ***Other tests***

Your doctor may carry out other tests in order to rule out other causes for your symptoms such as an over-active thyroid gland or a low red blood cell count (anaemia).

## Section 5: Medications Management

### Tips on taking your medications

- Carry an updated list of your medications at all times
- Take medications at the same time every day. Ask your pharmacist for the best times.
- Keep taking your medications even if you start to feel better.
- If you forget to take a dose, take the next dose as usual. Do not double-up the dose to 'catch-up'.
- Over the counter medications or natural remedies may affect your heart, or interfere with your medications. Check with your pharmacist before taking any.
- If you have a side effects from your medications tell your doctor, pharmacist, or heart failure nurse. Do not stop taking your medications until your doctor advises you to do so.
- If you have trouble remembering to take your tablets, let your pharmacist know and they will be able to help you.
- Do not share your medications with anyone else or take medications from anyone else.
- Do not leave your medications in the car. Keep them in a cool place away from direct sunlight and out of the reach of children.
- Check labels carefully for expiry dates, your name, the correct medication name and for the right number of tablets.
- If you are unsure how to take your medications, please ask your pharmacist, heart failure nurse or doctor. **DON'T GUESS!**

## **Chemical names, brand names and strengths**

All medications have one chemical name and one or more brand names. For example 'lisinopril' is a chemical name and that has four brand names Zestril, Prinivil, Lisodur and Fibsol.

Your pharmacist may give you a brand that is different to those you have had before. If you are not sure of the medication you have been given, for example the box looks different to usual, ask your pharmacist to explain.

Most medications are available in different strengths. Make sure you check the strength of each medication before you take it.

The main groups of medications are described in detail over the next few pages. Not all of the medications discussed will be suitable for you. The severity of your heart failure, your

symptoms and other medical conditions will determine which types of medications prescribed

## **Side effects**

You are most likely to experience side effects during the first few weeks after starting a new medication, or after an increase in dose. Most side effects should go away as once your body gets used to the medication.

**Angiotensin Converting Enzyme (ACE) inhibitors**

<b>CHEMICAL NAME</b>	<b>BRAND NAME</b>
Captopril	CAPOTEN <sup>®</sup> , CAPACE <sup>®</sup> , CAPTOHEXAL <sup>®</sup> , ENZACE <sup>®</sup> , ACENORM <sup>®</sup>
Enalapril	RENITEC <sup>®</sup> , AMPRACE <sup>®</sup> , ALPHAPRIL <sup>®</sup> , AUSPRIL <sup>®</sup>
Fosinopril	MONOPRIL <sup>®</sup>
Lisinopril	ZESTRIL <sup>®</sup> , PRINIVIL <sup>®</sup> , LISODUR <sup>®</sup> , FIBSOL <sup>®</sup> , LISINOBEL <sup>®</sup>
Perindopril	COVERSYL <sup>®</sup>
Quinapril	ACCUPRIL <sup>®</sup> , ASIG <sup>®</sup>
Ramipril	TRITACE <sup>®</sup> , RAMACE <sup>®</sup>
Trandolapril	GOPTEN <sup>®</sup> , ODRIK <sup>®</sup>

**How do ACE inhibitors work?**

ACE inhibitors work by widening narrowed blood vessels making it easier for the heart to pump blood to all parts of the body. ACE inhibitors also help to stop some of the body’s harmful responses to heart failure such as fluid retention. Controlling fluid retention will improve your symptoms.

**ACE inhibitors help you to:**

- ♥ **Live longer**
- ♥ **Reduced time in hospital for heart failure**
- ♥ **Reduced risk of heart attacks**
- ♥ **Improve heart failure symptoms**



**Give yourself a chance to live longer!**

Studies involving thousands of people with heart failure, found that over a period of one year, taking an ACE inhibitor will

reduce your risk of dying by about one third (30%).

It was shown that, of 100 people with heart failure and who were **not** taking an ACE-inhibitor, 81 people survived. This compared

to the group of people who were taking an ACE-inhibitor in who 85 out of 100 survived. More lives are saved (up to 10 per year) in those people with more severe heart failure.

<b>NOT taking an ACE-inhibitor</b>	<b>Taking an ACE-inhibitor</b>
	
81 out of 100 survive	85 out of 100 survive

**Possible side effects of ACE inhibitor medication**

- Dizziness or light-headedness (symptoms of low blood pressure)
- Persistent dry cough (try sucking a sugar-free lozenge)

**Tell you doctor immediately if you:**

- **develop a swollen face, lips or mouth;**
- **experience wheeziness or have difficulty breathing; or**
- **develop a severe rash.**

**Doctor check-ups**

- ✓ Potassium level in the blood
- ✓ Kidney function
- ✓ Blood pressure

Your doctor will also need to gradually increase your dose of ACE inhibitor until the correct dose for you is achieved.

## Angiotensin II Receptor Antagonists

Chemical name	Brand name
Candesartan	ATACAND <sup>®</sup>
Eprosartan	TEVETEN <sup>®</sup>
Irbesartan	AVAPRO <sup>®</sup> , KARVEA <sup>®</sup>
Losartan	COZAAR <sup>®</sup>
Telmisartan	MICARDIS <sup>®</sup> PRITOR <sup>®</sup>

### How do they work?

Angiotensin II receptor antagonists (AII receptor antagonists) widen narrowed blood vessels, making it easier for the heart to pump blood to all parts of the body. They work in a similar way to Angiotensin Converting Enzyme (ACE) inhibitors so you may be prescribed an AII receptor antagonist if you cannot take an ACE inhibitor.

AII antagonists may be used if ACE-inhibitors give you a persistent cough.

### Angiotensin II receptor antagonists help you to:

- ♥ Live longer
- ♥ Reduced time in hospital for heart failure
- ♥ Reduced risk of heart attacks
- ♥ Improve heart failure symptoms

**Possible side effects of  
Angiotensin II receptor  
antagonists**

- Dizziness / light-headedness (symptoms of low blood pressure)
- Persistent headaches
- Nausea or vomiting

**Tell your doctor if you have any of the above symptoms**

**Doctor check-ups**

Your doctor will need to gradually increase your dose of AII receptor antagonist until the correct dose for you is achieved. Your doctor will check your blood potassium levels, kidney function and blood pressure.

**Tell your doctor immediately if you develop:**

- **Swollen face, lips or mouth**
- **Wheeziness or difficulty breathing**
- **Severe rash**

**Note: If you have experienced any of the above from ACE inhibitors, you should not take an AII receptor antagonist.**

## Beta-blockers

CHEMICAL NAME	BRAND NAME
Bisoprolol	BICOR <sup>®</sup>
Carvedilol	DILATREND <sup>®</sup> , KREDEX <sup>®</sup>
Metoprolol tartrate	BETALOC <sup>®</sup> , MINAX <sup>®</sup> , METOHEXAL <sup>®</sup> , LOPRESSOR <sup>®</sup> , METROL <sup>®</sup>
Metoprolol succinate	TOPROL XL <sup>®</sup>

### How do Beta-blockers work?

Beta-blockers lessen the workload on the heart by reducing the heart rate. The overall effect is to strengthen the pumping action of the heart thereby improving your symptoms of heart failure.

### Give yourself a chance to live longer!

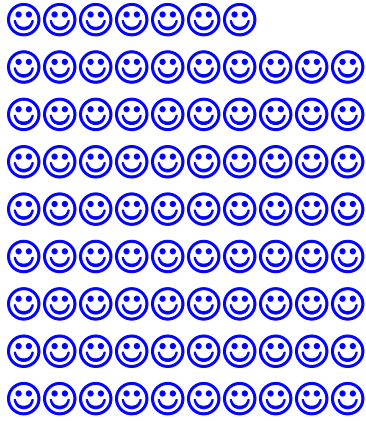

Studies involving thousands of people with heart failure, found that over a period of one year, taking a beta-blocker, along with standard heart failure medications, will reduce your risk of dying by about two thirds (60%).

### Beta-blockers help you to:

- ♥ Live longer
- ♥ Reduced time in hospital for heart failure
- ♥ Reduced risk of heart attacks
- ♥ Improve heart failure symptoms

The table below shows that of 100 people with mild to moderate heart failure who did **not** take a beta-blocker, 87 people are likely to survive. This compared to the group of people who were taking a beta-blocker in whom 92 out of 100 people survived.

Survival rates are also improved if patients with severe heart failure take a beta-blocker.

NOT taking a beta-blocker	Taking a beta-blocker
	
<b>87 out of 100 survive</b>	<b>92 out of 100 survive</b>

## **Possible side effects of beta-blockers medication**

- Dizziness or light-headedness (symptoms of low blood pressure)
- Persistent cough
- Chest tightness / wheeze
- Tiredness
- Shortness of breath
- Ankle swelling
- Difficulty sleeping / nightmares
- Depression
- Cold hands or feet
- Impotence

You are most likely to experience unwanted effects during the first few weeks after starting your beta-blocker, or after an increase in dose. These unwanted effects should go away as you continue taking your beta-blocker. If unwanted effects are troublesome or do not go away, contact your doctor.

## **Doctor check-ups**

- ✓ Pulse
- ✓ Blood pressure
- ✓ Unwanted effects

**Beta-blockers may take several months to work. Your doctor will need to increase the dose of your beta-blocker gradually for you to get the most benefit from the treatment.**

## Spironolactone

**Brand names:** ALDACTONE<sup>®</sup>, SPIRACTIN<sup>®</sup>

### How does spironolactone work?

Spironolactone is a type of diuretic (or ‘water’ tablet). It helps relieve some heart failure symptoms related to fluid retention.

Unlike other diuretics, low doses of spironolactone have also been found to increase the survival of people with moderate to severe heart failure.

**Spironolactone helps you to:**

- ♥ Live longer
- ♥ Reduced time in hospital for heart failure
- ♥ Improve heart failure symptoms

### Possible side effects of spironolactone

- Persistent headaches
- Nausea
- Stomach cramps / diarrhoea
- Lethargy
- Breast pain or breast enlargement in men
- Confusion
- Impotence
- Rashes


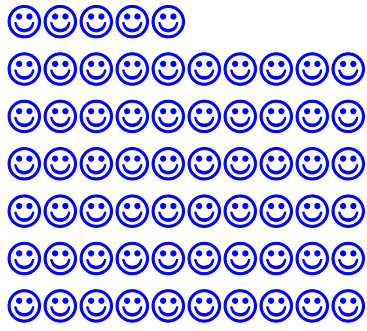
**Tell your doctor if you have any of the side effects listed above**

### Increased survival

Studies of people with severe heart failure show that over a two year period, taking low doses of spironolactone, along with standard heart failure medications, will reduce your risk of dying by about one fifth (20%).

Studies involving thousands of people with **severe** heart failure have shown that over a two year period, taking low doses of spironolactone, along with standard heart failure medications, will reduce your risk of dying by about one fifth (20%).

It was shown that of 100 people with **severe** heart failure who were **not** taking spironolactone, 54 people survived. This compared to the group of people who were taking spironolactone in whom 65 out of 100 people survived.

NOT taking spironolactone	Taking spironolactone
	
<p><b>54 out of 100 survive</b></p>	<p><b>65 out of 100 survive</b></p>

## Digoxin

**Brand name: LANOXIN<sup>®</sup>**

### **How does digoxin work?**

Digoxin helps the heart to beat more strongly and to maintain a regular rhythm and rate. Digoxin may improve the symptoms of heart failure if other treatments are not helping.

Digoxin also reduces symptoms you can get if your heart rate is too fast, such as shortness of breath or feeling that the heart is 'pounding'.

### **Digoxin helps to:**

- ♥ Reduce time in hospital for heart failure
- ♥ Improve heart failure symptoms

### **Possible side effects of digoxin**

- Loss of appetite, nausea or vomiting
- Irregular pulse, slow or fast
- Palpitations
- Unusual tiredness
- Seeing yellow / green circle around objects

Most side effects are caused if you have too much digoxin in your blood. If you notice any side effects your doctor will do a blood test to see how much digoxin you have in your blood and change the dose as appropriate.

## Diuretics

There are many diuretics available. The most common is **furosemide**

(**Brand name LASIX<sup>®</sup>, UREX<sup>®</sup>, UREMIDE<sup>®</sup>**).

Some people call diuretics water or fluid tablets.

### **How do diuretics work?**

Diuretics cause you to pass more urine. Removing excess fluid from the body reduces the amount of fluid that builds up in areas such as the lungs, ankles and feet. Removing fluid from the lungs makes breathing easier.

### **When should they be taken?**

Each dose of diuretic will cause you to urinate more frequently during a four hour period. Doses should be taken in the morning or before midday to reduce the need to urinate during the night. If you find that taking your diuretic

at a particular time of the day is inconvenient, talk to your doctor, pharmacist or heart failure nurse.

Fluid building up in the body results in weight gain, which can occur rapidly over a few days. If you put on one or more per day for two day, you should go and **see your general practitioner for advice or call your heart failure nurse.**

### **Benefits of taking diuretics**

- ♥ **Reduced time in hospital for heart failure**
- ♥ **Improved ability to exercise**
- ♥ **Control of fluid retention resulting in improved heart failure symptoms**

### **Possible side effects of diuretics**

- Nausea or vomiting
- Abdominal pain
- Diarrhoea or constipation
- Dizziness or lethargy
- Dry mouth
- Blurred vision
- Gout (pain and swelling in joints such as toes and fingers)
- Persistent headaches

**Tell your doctor if you have any of the above symptoms.**

### **Potassium**

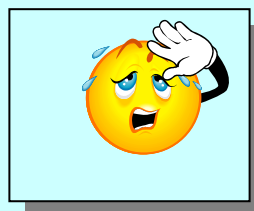
You may be given a potassium supplement when you are taking diuretics. Low potassium levels may cause you to have an irregular heart beat.

The brands SPAN-K® or SLOW-K®, should be swallowed whole, while CHLORVESCENT® can be dissolved in water. Both types of potassium should be taken with or after food.

## **DEHYDRATION**

**If you take diuretics you are at greater risk of becoming dehydrated when:**

- **The weather is hot**
- **You have had diarrhoea or vomiting**
- **You have a fever**
- **You have cut down your fluid intake too much**



### **Signs of dehydration**

- **Dry mouth or thirst**
- **Weakness, tiredness, drowsiness**
- **Muscle pain or cramps**
- **Passing less urine than normal**
- **Fast heart beat**

**If you think are dehydrated  
SEE YOUR DOCTOR!**

**Anti-arrhythmics**

<b>Brand name</b>	<b>Chemical name</b>
Amiodarone	<b>Cordarone X<sup>®</sup></b> <b>Aratac<sup>®</sup></b>

**How do anti-arrhythmics work?**

Anti-arrhythmic medications are used in people who have a fast or irregular heart rate. If the heart is beating irregularly or too fast it may have trouble pumping blood around the body which in turn can worsen the symptoms of heart failure.

**Amiodarone helps to:**  
**♥ Reduced symptoms from a fast or irregular heartbeat**

It is common to start amiodarone at high doses for a week or two for it to work well. If you start on high doses some symptoms may stop as the dose is reduced.

**Possible side effects of amiodarone**

- Persistent headaches
- Dazzling by headlights of cars at night / Impaired vision
- Persistent cough
- Nausea or vomiting / Metallic taste
- Numbness or tingling in fingers or toes
- Rash
- Insomnia (inability to sleep) / Nightmares
- Blue / Greyish colouring of the skin
- Impotence
- Sensitivity to sun

**Tell your doctor if you have any of the above symptoms**

## Sunburn

Amiodarone can make your skin more sensitive to sun. Cover-up as much as possible when going outdoors and use a sun block with sun protection factor (SPF) 30 on exposed skin.

### **Amiodarone – rare side effects**

**Tell your doctor immediately if you get any of the following whilst taking amiodarone:**

- Yellowing of the skin or eyes (called jaundice – a sign of liver changes)
- Weight loss and restlessness (a symptom of an over active thyroid gland)
- Weight gain, constipation and tiredness (symptoms of an under active thyroid gland)
- Worsening breathlessness or any difficulty breathing (a symptom of lung injury)
- Blurred or changes in vision
- Changes of heartbeat such as ‘pounding’

## Doctor check-ups

To look out for possible unwanted effects caused by amiodarone, your doctor will need to carry out the following before and while you take amiodarone:

- ✓ Thyroid test (before treatment and then every six months)
- ✓ Liver test (before treatment then every six months)
- ✓ Chest x-ray (before treatment)
- ✓ Regular electrocardiogram

**Tablets, medicines, herbal products and other supplements to avoid in heart failure**

Some medicines can make your heart failure worse or stop your prescribed medicines from working properly.

**Medications containing a lot of SALT**

Many tablets or medicines that you can buy from a pharmacy, health food shop or supermarket contain a lot of salt. Salt can cause you to retain fluid, which means that your heart needs to work harder.

Types	Examples to Avoid	
<b>Effervescent tablets and powders</b>	<ul style="list-style-type: none"> <li>• Panadol soluble</li> <li>• Aspro Clear<sup>®</sup></li> <li>Ural<sup>®</sup></li> </ul>	<ul style="list-style-type: none"> <li>• Citravescent<sup>®</sup> sachets</li> <li>• Alka-Seltzer<sup>®</sup></li> <li>• Eno<sup>®</sup> powders</li> </ul>
<b>Vitamin and mineral products</b>	<ul style="list-style-type: none"> <li>• Berocca<sup>®</sup></li> <li>• Supradyn<sup>®</sup></li> <li>Redoxon<sup>®</sup></li> </ul>	<ul style="list-style-type: none"> <li>• Phosphate Sandoz<sup>®</sup></li> <li>• Vitamin C products with sodium ascorbate</li> </ul>
<b>Antacids</b>	<ul style="list-style-type: none"> <li>• Gaviscon<sup>®</sup> preparations</li> <li>• Mylanta<sup>®</sup> Heartburn Relief tablets or liquid</li> </ul>	Salvital <sup>®</sup> .

You can still use these products, but you need to be aware of the amount of salt that you may be getting. Always read the label on tablets or medicines to check the amount of salt (sodium) that they contain. In general, you should limit the amount of salt in your diet (from all sources) to 2000mg per day.

## **Pain or Arthritis Medications - “Anti-inflammatories”**

Anti-inflammatory pain medicines may cause you to retain salt and fluid, which means that your heart needs to work harder.

### **Examples of these include:**

- Ibuprofen (**Nurofen<sup>®</sup>**, **Advil<sup>®</sup>**, **Herron Blue<sup>®</sup>**, **Brufen<sup>®</sup>**, **Tri-profen<sup>®</sup>**, **Panafen Plus<sup>®</sup>**)
- Diclofenac (**Voltaren<sup>®</sup> rapid**, **Fenac<sup>®</sup>**)
- Naproxen (**Aleve<sup>®</sup>**, **Naprosyn<sup>®</sup>**)
- Mefenamic acid (**Ponstan<sup>®</sup>**)
- Indomethacin (**Arthrexin<sup>®</sup>**, **Indocid<sup>®</sup>**)
- Celecoxib (**Celebrex<sup>®</sup>**)
- Meloxicam (**Mobic<sup>®</sup>**)

These preparations are also available in creams and gels. Check with your doctor or pharmacist before using these preparations on your skin.

**If you need to use pain or arthritis medicines, paracetamol (eg. Dymadon<sup>®</sup>, Febridol<sup>®</sup>, Panamax<sup>®</sup>, Panadol<sup>®</sup>) is the best choice.**

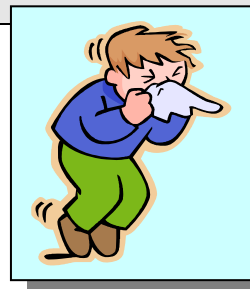


## Decongestants

Decongestants such as phenylephrine and pseudoephedrine are found in many cough and cold medicines. If you have heart failure, these products can make your heart work harder and stop some of your prescribed medicines from working properly.

### Examples to avoid include:

- **Codral<sup>®</sup>** cough and cold preparations
- **Sudafed<sup>®</sup>** preparations
- **Demazin<sup>®</sup>** preparations.



Ask your pharmacist or doctor what would be the best treatment for you

## Medications that need to be taken with a glass of water

Some medicines need to be taken with a full glass of water. You need to include this glass of water as part of your daily fluid allowance.

### Examples of medicines to avoid include medicines those use for constipation:

- **Metamucil<sup>®</sup>**
- **Fybogel<sup>®</sup>**



If you cannot stick to your fluid restriction while taking these medicines, you may be able to use something else instead. Ask your doctor or pharmacist.

## **Herbal products, herbal teas and dietary supplements**

Many “natural” or complementary medicines can worsen your heart failure or stop your heart failure medicines from working properly. Some of these products also contain salt. Always check with your pharmacist or doctor before using any “natural” medicines.

### **Examples to avoid:**

- **St John’s wort**
- **Ginseng**
- **liquorice**
- **willowbark/willow**
- **guarana**



### **Remember**

This is not a complete list of all the medicines that you should avoid in heart failure. Always check with your doctor or pharmacist about whether a medicine or product is safe for you to use.

## Section 6: Life Style Changes

Lifestyle changes can:

- help to improve your symptoms of heart failure
- allow you to live a longer life
- reduce the time you spend in hospital
- allow you to carry out the daily activities you enjoy

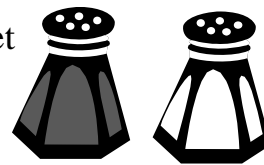
**Lifestyle changes such as diet and exercise are just as important as taking medication.**

### Healthy diet and reducing salt in food

You can improve the health of your heart by eating a food low in cholesterol, saturated fat and salt.

High fat food can cause weight gain and increase your blood cholesterol level. Low cholesterol levels reduce your risk of having a heart attack or stroke.

The salt in your diet can harm your heart and raise



your blood pressure. Salt also makes you thirsty and causes your body to retain fluid. Too much fluid can worsen your symptoms and make it harder for your heart to work efficiently.

Your doctor may put you in contact with a dietician who can give you ideas of how to manage a healthy diet.





## Tips to help you cut down your saturated fat and salt intake.

Talk to your doctor or dietician if you are unsure what types of foods you should eat and about your daily fluid requirements.

Below are some tips to cut down salt and fat in your food.

### Avoiding fat in foods

- ☑ Eat foods that are low in saturated fat and cholesterol such as: lean meat, low fat milk, yoghurt and cheese, fruit, vegetables, pulses and bread.
- ☑ Cook foods using low fat cooking techniques such as boiling, grilling and steaming.
- ☑ Avoid high fat baked goods and snack foods, such as cakes, potato crisps and chocolate.

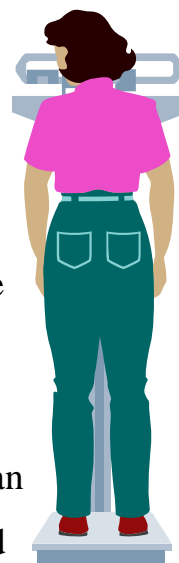
### Avoiding salt in foods

- ☑ Buy reduced salt products and avoid foods that have a high salt content.
- ☑ Add less salt to cooking and avoid adding salt to meals.
- ☑ Buy foods with less than 120mg sodium per 100g. Some items will be labelled 'low in salt'

### Weight control

Maintaining your ideal body weight will help you to feel better and place less strain on the heart.

Losing weight can reduce your blood cholesterol, which in turn reduces your risk of further heart complications.



### Weight gain caused by excess fluid

It is important that you do not carry too much body fluid as this

puts a strain on the heart. Monitor your fluid closely by following the 4 Ws.

**The 4 Ws of to track fluid gain:**

**Wakeup!**

**Wee!**

**Weight!**

**Write!**

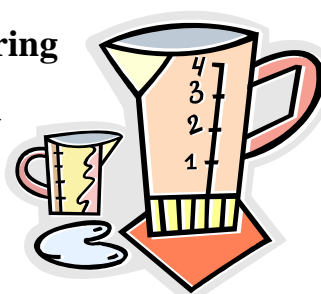
Weigh yourself every morning before breakfast and after going to the toilet. Write your daily weight in your diary.

**CAUTION**

**If you have put on 1.5 kilograms or more over 24 hours you should contact your doctor, nurse or pharmacist. You may be advised to increase your dose of 'fluid' tablets to remove the extra fluid.**

If you have a tendency to retain fluid, you may need to watch the amount of fluid in your food as well as what you drink.

**Tips on monitoring your fluid intake:**



- Check with your Doctor about your daily fluid requirements
- Keep track of what you drink by pouring an equivalent amount of water into a jug

**Smoking**

Stopping smoking will have enormous benefits for the health of your heart. By not smoking your heart will be less strained and your risk of having a heart attack or stroke will be reduced. Speak to your pharmacist, doctor or nurse for advice on how to stop smoking.

## Alcohol

Alcohol can cause further damage to your heart. It is best to reduce the amount of alcohol you drink. For most people it is best to stop drinking alcohol altogether. Ask your doctor for further advice.

**Remember!** Alcoholic drinks count as part of your daily fluid intake. Alcoholic beverages also contain calories and salt (eg beer) which will contribute to making your heart pump less efficiently.

## Exercise

For those well enough, exercise is an excellent way to help your heart and make you feel better both physically and mentally.

Just remaining active can help prevent excess weight gain and keep your muscles healthy and strong.

Check with your doctor or about how much exercise you should do.

Your doctor may put you in contact with a physiotherapist to give you some exercise ideas.



After checking with your doctor you may like to start a simple walking program. Whichever exercise you choose to do, you should start off with a **very light** exercise which does not tire you out or cause any muscle pain. If you get tired **have a rest**. Aim to exercise 5 to 7 times a week, and gradually increase the duration of your exercise at weekly intervals.

## Healthy heart walks

The 'healthy heart walks' are organised walks which take place several times a week. They are supported by local



doctors and health care professionals and give you the opportunity to meet other people who have heart conditions. They are fully supervised by medical staff and are an excellent way to improve your health in a safe and social environment. Ask your doctor for further information.

## **Rest**

Even though regular exercise is good for your heart and helps you to feel better, it is also important not to overdo it and become exhausted. Pace yourself. If you become tired or short of breath stop and have a rest. Overdoing it can put extra stress on your heart.

## **Tips on conserving energy**

- Do not try to do too much in the one day
- Have frequent short breaks between activities
- If you become tired during an activity, stop and rest
- Try not to plan an activity immediately after a meal

- Ask someone else to lift heavy objects for you or use a trolley
- If you are tired, sit down rather than stand up, eg. if preparing food or ironing
- Learn some relaxation techniques
- Store things in convenient places so you don't need to stoop and bend

For more information on energy conservation or relaxation techniques, ask your doctor to refer you to an occupational therapist.



## **Sexual activity**

Questions concerning sexual activity usually go unanswered, as many people are too embarrassed to ask. You should feel comfortable asking your doctor or other health care professionals if you have any concerns about your sex life if you have heart failure, or if you have other heart disease. Some heart failure medications can cause or worsen impotence. If you think this is occurring, please discuss it with your doctor.

## **Cardiac rehabilitation**

Cardiac rehabilitation help you learn more about:

- ♥ your heart
- ♥ lifestyle changes
- ♥ medications
- ♥ exercising sensibly
- ♥ relaxation

Health care professionals including physiotherapists, occupational therapists, dieticians, pharmacists, social

workers, dieticians and nurses are present at the cardiac rehabilitation sessions and give you the opportunity to ask questions. It is also a good opportunity to meet other people who have heart conditions.

Ask your doctor or health care professional for a program nearest to your home.

## Section 7: Questions for your doctor and Emergencies

### What is the outlook?

Your long-term outlook will depend on your age, severity of heart failure, and other diseases you may have.

It is important to discuss your individual long-term outlook with your doctor as the rate at which heart failure worsens and the severity of symptoms varies from person to person.

Your condition can be improved by taking medications and altering your lifestyle.

### Vaccination

**Remind your doctor that you need a vaccination for flu every year and for pneumonia every 5 years.**



With heart failure, you are more likely to become very sick if you get influenza or pneumonia.

### When to see a doctor

Have regular check-ups with your general practitioner.

**If your weight increases by more than 1.5kg (one and a half kilograms) in 24 hours see your doctor as soon as possible.**

If any of the following symptoms seem to be worsening, or occur for the first time, see your GP.

- Shortness of breath
- Tiredness/Fatigue/Lethargy
- Swelling of ankles/feet/legs
- Chest pain
- Waking at night with breathlessness
- Persistent coughing
- Feeling faint/dizziness
- Unable to do usual activities

## When to call an ambulance



**Call an ambulance if you experience any of the following:**

**Severe chest pain for more than 15 minutes with no relief from angina medications.**

**Severe shortness of breath**

**Blackout or loss of consciousness**