



Managing Heart Failure



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Managing heart failure

Heart failure (HF) can be managed

You are the most important person in managing your HF. *Managing Heart Failure* is a learning program. It was developed to help you take charge of controllable aspects of your illness and its effects on your daily activities. There are seven learning sessions or modules. You can use the program by yourself, with your family, or with a group of people. If you need assistance working through and understanding the modules, ask your nurse, physician or another healthcare worker.

Managing Heart Failure and the information contained in this publication is not medical advice and is not to be considered a substitute for medical advice. Anyone with HF should talk to their doctor and healthcare team about their individual condition and appropriate course of action.

During the first session, you will decide what your learning needs are and begin to learn how the heart works as a 'living pump' for the body. In the second session, you will learn some keys to manage heart failure and what skills are needed. The other five sessions will focus on those key aspects and skills, one at a time: medications, diet, activity, stress, relaxation, and community resources.



For further information about heart failure, or about heart health, please visit the Heart and Stroke Foundation website at: heartandstroke.ca or call: **1-888-HSF-INFO (473-4636)** toll-free. The Foundation has many free brochures and heart-healthy recipes.

READINESS TO LEARN

1. What do you want to learn about heart failure?

2. What do you do to manage your heart failure condition now?

3. Do you feel you are successful in managing your heart failure?

4. How involved do you think you should be in the care of your heart failure?

5. What else do you think you could be doing?

6. How do you think your healthcare professional can help you with managing your heart failure?

Understanding Heart Failure Module



In this session, you will discover:

- how the heart works
- factors that influence how well it works
- what you can do to manage heart failure

THE HEART IS A LIVING PUMP

Your heart is a muscle about the size of your fist. It is located in the middle of the chest. The heart's job is to contract and relax. As it works, it forces blood through the heart into the lungs to pick up oxygen. This blood returns to the heart and is pumped into the rest of the body through blood vessels.

Arteries and capillaries carry blood rich in oxygen and nutrients to every cell in your body. Then, veins carry that blood from the cells back to the heart, for another trip to the lungs. This cycle repeats itself every minute of the day, through your entire life.

To do its work, your heart must beat (contract and relax) 60 to 90 times a minute. When your heart is healthy, it can pump 1.25 gallons (5 litres) of blood every minute of your life. When it is injured or tired, the heart cannot keep up with the needs of the body.

FACTORS WHICH INFLUENCE

The healthy heart adjusts to needs of the body in two ways. It can speed up or slow down; and it can beat with more force or with less force. Most of the factors that affect how well the heart works are related to age, to heart damage, and to increased demands.

As you grow older, the heart muscle gradually loses some of its ability to pump well. Your heart has to work harder when you are ill, to help the body heal. When your heart is damaged (as in a heart attack), some of the muscle actually dies and forms scar tissue. This scar tissue is no longer useful as part of the pump.



When your activity increases or there is stress in your life, your heart responds by working harder. Feelings (such as worry, fear, anger, and grief) can increase the heart's workload. Daily living choices also affect how well the heart works: what you eat, lifestyle decisions, climate and weather, and every medication you take (even non-prescription ones).

HEART FAILURE

The heart “fails” when the muscle weakens and has trouble pumping blood through the body (systolic heart failure). The heart also “fails” when it has trouble relaxing, building up pressure inside the heart and back to the lungs (diastolic heart failure). Some of the blood and fluid collects in areas of the body where it causes “congestion” and swelling (also called edema). You may notice “puffiness” in your abdomen, ankles, or feet. Fluid may also collect in your lungs and cause you to feel short of breath.



Over time, the degree of heart failure usually progresses. Your symptoms may appear, disappear for awhile, and then reappear. This can happen very quickly, or gradually over a long period of time.



Every year, more people in Canada learn that they have heart failure.



Heart failure can be managed successfully, but it can't be cured. Heart failure affects the whole family, not just one person. When symptoms appear or reappear, healthcare professionals (nurses, physicians, social workers, psychologists, occupational and physical therapists, etc.) can help you and your family through the experience.



You are the most important person in managing your heart failure. You can help yourself to feel better and enjoy better quality of life. You can prevent or reduce the number of hospital visits related to heart failure. It is important to recognize small changes in daily health that can lead to early treatment.

The areas you can manage include: diet, exercise, energy saving, medications, stress, and environmental conditions. This learning program will help you in each of these areas.

Activity Sheet #1 at the end of this module will assist you to think about your past experience with heart failure. The **HEART FAILURE MANAGEMENT MODULE** (page 7) will help you understand how heart failure affects you personally and how to monitor yourself for changes.



Activity Sheet 1

UNDERSTANDING HEART FAILURE

What does heart failure mean to me?

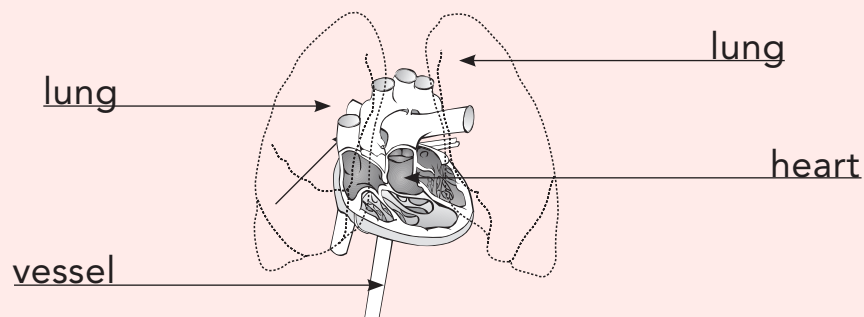
How has heart failure affected my usual lifestyle?

Is heart failure something I have to live with?

Can my heart failure be managed?

Who is responsible for managing my heart failure?

Who can help me to manage my heart failure?



Heart Failure Management Module



In this learning session, you will discover:

- factors that affect how well your heart works
- what your signs and symptoms mean
- how to monitor yourself for changes
- what changes to report, when, and to whom

Your heart is affected by many factors: what you eat (diet); what activity and exercise you do; the climate and weather in which you live; and every medication you take (even over-the-counter ones). Even your mental and emotional states affect how well your heart works.

Food that is high in saturated and trans fats can damage the inside of blood vessels.



This makes it much harder for the heart to pump blood through them. Sometimes vessels become so narrow, blood can no longer get through. Food that is high in salt (sodium) can cause the body to retain more fluid. This extra fluid must also be pumped, so the heart has to work even harder.



Activity and exercise increases your heart rate and the force it has to use to pump. When exercise is planned and controlled, it can strengthen the heart muscle just as exercise does for other muscles. When exercise is excessive or unplanned, it strains the heart's ability to adapt.



Some stress can have a positive effect in the body, but when stress is excessive, sudden, or persists over a long time, it may also affect how well your heart works.



Rest and sleep are very important. During rest periods, the heart slows down and relaxes. It has a chance to catch up with the body's demands. Short rest periods can be as important as sleep because you change your body's position. Raising your feet and legs helps blood to return back to the heart. In contrast, you may have trouble breathing when there is extra fluid in your lungs so by raising your head and shoulders, you reduce the amount of blood returning to the heart and lungs. This can help you breath more easily. Long rest periods are not recommended if you suffer from central sleep apnea.



Extreme environmental temperatures (very hot or cold weather which lasts for days) put added stress on the heart. As well, the body loses some ability to heat and cool itself as it ages.



Other health problems affect the heart's actions. Examples are diabetes, lung disease, high blood pressure, kidney, and liver disease. If you have more than one of these illnesses, you may need help to figure out how they influence each other. Medications for different problems may work against each other, or make one another have a stronger effect on you. Both prescription and over-the-counter drugs influence how well the heart performs. Sometimes the results are planned. Sometimes they are not desired results.



Smoking or exposure to second hand smoke increase the heart's workload. It reduces blood flow to the heart muscle itself and robs it of needed oxygen and nutrients. Smoking also narrows the vessels that carry the blood, making the heart pump against increased pressure. Smoking harms the heart extensively. The best action you can take to manage HF is to stop smoking.

YOUR SPECIFIC HEART FAILURE EXPERIENCE

If you want to discuss what you've learned so far, ask your nurse or doctor to review this information with you. You may want to discuss what your experience has been in the past, as well as what is happening now. You may be in the hospital and have symptoms of heart failure. You may be at home and have symptoms. You might feel quite well at present.

Everyone is unique and can have slightly different needs in caring for themselves. Your physician may have given you guidelines for physical activity, exercise and diet, as well as medications. Future learning sessions will review these topics in detail:

- your medications for heart failure
- your diet recommendations
- your level of physical activity and exercise
- your level of stress
- other risk factors



SELF-MONITORING SKILLS

You need to take time each day to compare your state of health with the day before. A few skills, used **consistently**, will help you plan what you should be able to do today.

These skills can warn you that some changes are needed, before your symptoms become severe. The information you report can be very useful for your physician or nurse, because they show how your body is changing over time.



The following chart describes what to monitor, how to do it, when to do it, and when to report any problems. Some of the skills may not apply to you. If you're not sure which skills you need to learn, ask your nurse or doctor for advice on what to do and how. **You do not need to learn skills that do not apply.** Highlight those which you need to learn or wish to review.

Activity sheet #2 will give you a chance to practice these skills between learning sessions. The **MEDICATIONS MODULE** (page 13) will focus on your specific medications for heart failure.

MANAGING HEART FAILURE

What to Monitor	Look For	When to look for	Report if there is...
<ul style="list-style-type: none"> Changes in breathing 	<ul style="list-style-type: none"> shortness of breath dry or congested cough rate of breathing increased number of pillows at night difficulty carrying on a conversation 	<ul style="list-style-type: none"> at rest with activity or exercise changes at night 	<ul style="list-style-type: none"> any noticeable change breathing associated with pain or lightheadedness confusion of thought changes in memory
<ul style="list-style-type: none"> Fatigue (tiredness) 	<ul style="list-style-type: none"> everyday self-care activities require help more frequent rest periods are needed weakness in legs 	<ul style="list-style-type: none"> daily, every morning at rest with activity after activity or social outings 	<ul style="list-style-type: none"> any change in level of ability to participate in self-care weakness which prevents a usual activity
<ul style="list-style-type: none"> Weight gain 	<ul style="list-style-type: none"> always use the same scale wear the same clothes sudden change in weight (higher or lower) increase in weight unexplained by change in diet reduced volume of urine 	<ul style="list-style-type: none"> first thing every morning, before eating breakfast and after urinating 	<ul style="list-style-type: none"> a weight gain of 2 pounds (or 1 kilogram) or more, over 2–3 days

Use the activity sheet for this session to begin monitoring yourself. Keep the record.

MANAGING HEART FAILURE

What to Monitor	Look For	When to look for	Report if there is...
<ul style="list-style-type: none"> Swelling (edema) 	<ul style="list-style-type: none"> swollen feet, ankles, or legs swollen abdomen, tenderness in abdomen fingerprint impression left on skin after pressure applied (especially around feet, ankles) 	<ul style="list-style-type: none"> every morning and evening 	<ul style="list-style-type: none"> any increase (sudden or gradual)
<ul style="list-style-type: none"> Side effects of your medications 	<ul style="list-style-type: none"> each of your medications' side effects light headedness, dizziness changes in vision loss of appetite, nausea muscle cramps 	<ul style="list-style-type: none"> daily if the medication is new if the dose has been changed. Watch for side effects several times a day for the first week 	<ul style="list-style-type: none"> changes that are creating problems, such as loss of appetite, loss of ability to participate in self-care or to move around safely
<ul style="list-style-type: none"> (OPTIONAL) Pulse – when you are taking a medication that changes the heart rate and you need to decide if it should be taken. 	<ul style="list-style-type: none"> Your pulse (at your wrist) 	<ul style="list-style-type: none"> before taking your medications 	<ul style="list-style-type: none"> if pulse changes from being regular to irregular or more irregular if the rate is less than 60 or more than 100 beats per minute (unless your physician tells you differently)

Use the activity sheet for this session to begin monitoring yourself. Keep the record.

Activity Sheet 2

MANAGING HEART FAILURE

SELF-MONITORING (Record your findings)

	Change in breathing pattern	Weight	Swelling	Fatigue	Side effects of medications	Action taken and the results of the action
Day 1						
Day 2						
Day 3						
Day 4						
Day 5						
Day 6						
Day 7						

QUESTIONS TO ASK YOURSELF:

1. What was I doing when the change was noticed? _____
2. What time of day did the change happen? _____
3. How did I decide to report or not to report it? _____
4. To whom did I report the change? _____

Medications Module



In this session, you will discover:

- what information you need to know about medications in general
- how medications affect the heart in general
- what your specific medications are doing for you
- how to monitor your body's response to them

MANAGING HEART FAILURE WITH MEDICATIONS

Medications are one important part of managing heart failure. They help the heart in two main ways: by reducing the amount of work or by strengthening its pumping action. Your physician will determine the strength of the medication (dose) and the number of times it is taken (frequency) according to your particular needs. Your needs will be different from another person's needs. It is very important that you take your medications as prescribed:

- 1 the right medication
- 2 at the right time
- 3 even when you feel well

Always discuss your situation with your physician. You may not feel the medication is working or you may experience side effects. **Do not make changes on your own.**

- Learn the **names, dose, frequency, the purpose**, and main side effects for each of your medications.
- Be sure to provide a complete list of your medications to all healthcare professionals you work with. Since some drugs should not be used together, it's important that they know all the medications you are taking, so they can check for possible interactions between or among drugs.

- Check with your pharmacist, nurse, or physician when buying any over-the-counter medications (such as pain pills, antacids, herbals and laxatives) to see if they affect your heart medications.
- Plan ahead to be sure you have enough medications on hand, especially when going on a trip or over holidays when stores are closed.
- Be consistent in taking your medications at the same time each day. It will help you remember to take them, and to get the best effect from them.
- If you need an extra reminder to take your medication, consider using a medication chart to record what pills you've taken and when, or invest in a day-by-day pill box. Check with your pharmacist to ensure your drugs are stable in these containers.

MEDICATIONS

Common medications for HF belong to five groups (or families) of drugs: aldosterone antagonists, angiotensin converting enzyme (ACE) inhibitors, beta blockers, diuretics, and digoxin (Lanoxin®). Each of these groups may encompass several different drugs. You may need one or more drugs from each group. It is important to understand how they work together and what they can do for you.

Aldosterone Antagonists reduce the stress to the heart and also have a weak diuretic effect. The use of these drugs is usually limited to patients with advanced disease and severe symptoms.

Recommendations:

- Aldosterone antagonists are usually taken once a day. Before this medication is prescribed, your doctor will need to check your kidney function and blood potassium level. Some of your other medications may need to be adjusted as well.

Report these side effects: Too much potassium in the body. This will occur especially in patients with impaired kidney function. Close monitoring of blood potassium levels is therefore necessary.

Gynecomastia or enlargement of the breasts in males. Occasionally this would require the discontinuation of the medication.

Your aldosterone antagonist is: _____

Dose : _____ Frequency : _____

You take it at: _____

Some specific side effects may include:

Angiotensin Converting Enzyme (ACE) inhibitors will help reduce the stress on your heart and may prevent your symptoms from becoming worse.

Recommendations:

- Take this medication at a convenient time each day.
- Discuss with your doctor or pharmacist, how many times per day and whether you should take it with food.

Report these side effects: Weakness, dizziness or lightheadedness, skin rash, dry cough, swelling of the face, neck, tongue, hands or feet, altered taste, persistent dry cough, diarrhea, difficulty breathing, yellowed eyes or skin.

Your ACE inhibitor is: _____

Dose : _____ Frequency : _____

You take it at: _____

Some specific side effects may include:



Beta Blockers work by affecting the response to some nerve impulses in certain parts of the body. As a result, they decrease the heart's need for blood and oxygen by reducing its workload. They also help the heart to beat more regularly.

Recommendations:

- Ask your doctor if you should check your pulse before and after taking your beta blocker. Sometimes, these drugs can slow heart rate too much, creating circulation problems.
- Never stop taking beta blockers without first checking with your doctor. Stopping beta blockers suddenly can lead to serious medical problems.
- If you have trouble getting to sleep while taking beta blockers, take them earlier in the evening (at least two hours before bedtime).
- If you have asthma, make sure your physician is aware of it because beta blockers may make your asthma worse.

Report these side effects: Fatigue, difficulty concentrating, insomnia, nightmares, dizziness, slow heart rate (less than 50 beats per minute), wheezing, cold hands and feet.

Your beta blocker is: _____

Dose : _____ Frequency : _____

You take it at: _____

Some specific side effects may include:

Digoxin (Lanoxin®) increases the strength of the pumping action of your heart.

Recommendations:

- Wait two hours after taking antacids or fibre supplements before taking digoxin.

Report these side effects: Nausea, vomiting, diarrhea, major loss of appetite, weakness, blurred vision, confusion.

Dose : _____ Frequency : _____

You take it at: _____

Some specific side effects may include:

Diuretics are sometimes called water or fluid pills. They can also be given by injection when necessary. These drugs act to reduce the amount of fluid in your body. Diuretics prevent or reduce swelling, shortness of breath and bloating associated with HF. They help the heart by lessening the amount of fluid it must pump around. The kidneys get rid of this extra fluid, meaning that more urine is produced and urination occurs more often. Some (but not all) of these drugs can affect your body's normal amount of sodium and potassium. As a result, you may need to take a potassium supplement depending on which diuretic you use.

Recommendations:

- Take diuretics at the same time(s) each day.
- Take diuretics with meals to avoid stomach upset.
- Avoid taking diuretics after 4 p.m., to prevent or reduce the need to get up at night to urinate.
- Monitor your weight **daily** to see if you are retaining (gaining) or losing fluid.
- Report any increase of 2 pounds (1 kg) over 2-3 days.
- Monitor yourself for shortness of breath and for swelling (refer to the self-monitoring section pg. 12)

Report these side effects: Weakness in legs, dizziness, rash, nausea, dry mouth, increased thirst and muscle cramps.

Your diuretic is: _____

Dose : _____ Frequency : _____

You take it at: _____

Some specific side effects may include:

Need for a potassium supplement? ☐ yes ☐ no

Your potassium supplement is: _____

Dose : _____ Frequency : _____

Refer to the chart in the **NUTRITION AND HEALTHY EATING MODULE** page 20 for foods that are naturally high in potassium.



You may suffer from other conditions beside your heart failure, including angina, high blood pressure, and irregular heart rhythm. Other medications that are used to treat these conditions include calcium channel blockers, antiarrhythmics, antihypertensives and anticoagulants.

Activity Sheet #3 at the end of this module will help you to keep track of your medications. It is important to have a full list of your medications available. To help you manage when to take your medications on a weekly basis, the Heart and Stroke Foundation has a Weekly Medication Chart available on heartandstroke.ca. You can print copies of this chart.

The next session will discuss diet and heart failure.

Activity Sheet 3

UNDERSTANDING HEART FAILURE

MEDICATION LIST FOR (name) _____

PRESCRIBED MEDICATIONS

NAME (s)	PURPOSE	DESCRIPTION	DOSE	FREQUENCY
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				

List non-prescription medications taken: _____

This image shows a full page of blank, lined paper. It features approximately 20 evenly spaced horizontal grey lines across its entire width, providing a guide for handwriting or typing. The paper itself is a clean, off-white color.

Nutrition and Healthy Eating Module



MANAGING HEART FAILURE WITH DIET

In this learning session, you will discover:

- main aspects of diet that affect heart failure
- how your choices can affect you
- how to make some changes to your diet
- the importance of changes in appetite

BALANCED DIET

A balanced diet chosen from Canada's Food Guide is a good starting point for managing heart failure. Extra weight makes more work for your heart. A gradual, but steady

weight loss can be achieved by using the lowest recommended number of portions from each of the four food groups. If you need professional help with diet planning, talk to a dietitian.

You may find proper eating with heart failure is a bit of a "balancing act". While you don't want to eat too much, you have to be sure you eat enough to have good nutrition. Some people with heart failure have a hard time keeping a healthy weight, because of higher energy needs, poor appetite, nausea and other HF-related symptoms. For people who find it hard to eat enough, special food supplements may be advised.

With heart failure it is important to decrease or avoid caffeine use to prevent increased heart rates or abnormal heart rhythms.



SALT (SODIUM)

One of the best steps you can take is to reduce the amount of salt (sodium) in your diet. Food that does not seem "salty" can have hidden salt (sodium). It causes extra fluid to build up in your body and makes the heart work harder. The Heart and Stroke Foundation recommends that Canadians eat no more than 2,300 mg of sodium (about 1 tsp / 5 mL of salt) a day total from processed foods and salt added during food preparation and at the table. For those that have heart failure, you should

limit salt intake to no more than 2,000 mg per day. For those that have been diagnosed with high blood pressure (hypertension), or those who are salt sensitive, sodium intake should be limited to 1,500 mg (2/3 tsp) a day. Speak with your health care professionals about the right sodium level for you.




To cut back on the salt in your diet start by taking the salt shaker away from the dinner table and cook without adding salt. Then work by eliminating or cutting back on:

- High-sodium processed foods, beverages or condiments
- Fast foods
- Salad dressings
- Smoked, salted and kosher meats
- Canned food (not including fruits)
- Pickled vegetables
- Salted snack foods
- Luncheon meats
- Soya sauce

When possible, replace “regular” products with a “low-sodium” version.

Limiting your salt intake will require careful reading of labels on all the food you buy and careful choices when you eat out. The chart in this session will show you which foods to avoid and suggest good food choices to use. Many pamphlets and books in libraries, bookstores, pharmacies and community health centres give more details about healthy eating. Information is also available on the Heart and Stroke Foundation website at heartandstroke.ca or by calling **1-888-HSF-INFO (473-4636)**. You may also ask for more information from your nurse or from hospital and community dietitians.

Guidelines for Food Choices for 2 g (2000 mg) Sodium

FOOD ITEMS	USE	AVOID
Breads, rice, pastas and cereals 	Plenty of whole grain breads and cereals (hot or cold). Pitas, bagels, English muffins Unsalted crackers. Plain rice and pastas, cooked without salt.	Sweet rolls, tea biscuits, muffins, croissants, doughnuts. Salted crackers. Instant hot cereals. Commercial bread crumbs or cracker crumbs. Pre-packaged, convenience products such as coatings for meats and pastas with sauces included.
Vegetables	All fresh and frozen vegetables. Tomato paste, sauce labeled as "no added salt"; low sodium canned vegetables and vegetable juices.	Regular canned vegetables, tomato juice and canned vegetable juices, sauces and pastes.
Fruits	Fresh, frozen and canned fruits and juices.	Dried fruits (usually have sodium as preservative).
Milk and milk products	Skim milk, 1% milk, evaporated skim milk, low fat yogurt. Limit to 2 cups (500 mL) per day. Low sodium cheese, or up to 3 oz. (84 g) of hard cheeses per week.	Chocolate milk, evaporated or condensed milk, sour cream, sweet cream, ice cream, dairy substitutes, and whiteners. Processed cheese slices or bottled cheese products.
Meat, fish, poultry, eggs and alternatives (legumes) 	Fresh or frozen, lean cuts of poultry, fish, and red meats with all visible fats trimmed. Canned fish such as tuna or salmon, if rinsed thoroughly in water to remove salt. Beans, peas, lentils (avoid canned varieties). Eggs (2 per week) or egg substitutes.	Smoked, cured or canned meats, poultry and fish. Kosher meats. Hot dogs, sausages, ham, bacon. Herring, anchovies, sardines. Frozen, breaded meats. Cold cuts such as bologna.
Soups, sauces	Home-made soups and sauces without any added salt; low sodium canned soups (read label carefully).	Canned and packages soups, bouillon packaged sauces.
Fats	Soft tub non-hydrogenated margarines, salt-free. Calorie-reduced mayonnaise.	Limited use of bottled salad dressings, peanut butter, oils (1 tbsp./15 mL per day).
Seasonings and miscellaneous 	Salt substitutes: check with physician, nurse or dietitian for choices; some substitutes may contain potassium and not be allowed. Use seasoning powders, instead of seasoning "salts". Use herbs, spices, garlic, lemon, pepper, or onion. Low-sodium soya sauce (1 tsp. or 5 mL). Unsalted pretzels, popcorn.	TABLE SALT Any seasoning made with salt, including garlic salt, celery salt, onion salt, seasoned salt, sea salt, meat tenderizers, MSG, chili sauce, ketchup, prepared mustard, pickles, relish, soya sauce, olives, sauerkraut, salted crackers, potato (and other) chips, salted nuts.
Bottled water	Sodium-free brands.	Brands with labels reading: 10 mg of sodium per litre (quart), or more.
Potassium rich foods (if needed)	Oranges, bananas, fruit juices, apricots, dates, prunes, spinach, dried beans, fresh tomatoes, brown breads, orange fruits and vegetables.	Note: salt substitutes may contain potassium, be cautious of their usage. If in any doubt, consult your physician, nurse or dietitian.



FIBRE

You may not be as physically active as you would like to be, due to your level of heart failure. Also, you may have to restrict the amount of fluid you drink. Some of your medications (such as the diuretics or fluid pills), reduce the amount of fluid in your body. These factors can lead to constipation which causes a strain on your heart. You can avoid constipation by increasing the fibre in your diet. Fibre is found in whole grain cereals, breads, legumes, fruits, and vegetables. Add these to your daily diet.



FLUIDS

Fluid intake should be moderate, no more than 8 glasses per day. This includes all types of fluids that you drink, at meals and between meals. Some examples are: water, juice, milk, beverages and soups. At least half your fluid intake should be water. If your blood sodium is at a very low level, you may have to drastically reduce your fluid intake to let your body balance out your blood sodium level. Talk to your doctor if you are experiencing this.

Know about alcohol: Reduce your use of alcohol to no more than one drink per day. This is equal to a glass of wine (5 oz./142 mL/12% alcohol), beer (12 oz./341 mL/5% alcohol), or one mixed drink (1 1/2 oz./43 mL/40% alcohol). In some types of heart failure, alcohol must be totally avoided; your physician can tell you if this applies to you.

You need to discuss drinking alcohol with your doctor because:

- Alcohol may change how your medication works;
- Alcohol can affect other medical conditions you may have;
- Alcohol reduces the strength of the heart's contraction;
- Alcohol may cause or worsen irregular heart rhythm.

The following table will guide your healthy food choices.



APPETITE

You may find there are some changes in your appetite. Nausea or lack of appetite can be a side effect of heart medications. It can also be a sign of increasing heart failure. It's hard work for the heart to digest large meals. Try eating smaller portions more frequently, and have a rest period after eating.



FOOD PREPARATION

How you plan and prepare your food is just as important as what you choose to prepare:

- Steam, broil or bake instead of frying foods.
- Substitute soft, non-hydrogenated margarine for butter.
- Plan your grocery shopping so you have the needed ingredients at home.
- Read labels or get someone to check the contents for you.
- Watch for any items with the words 'salt' or 'sodium' listed on the label.

Remember these important guides to reduce your intake of salts:

- Get rid of the salt shaker.
- Choose fresh and fresh-frozen foods.
- Avoid processed foods including convenience and fast foods.
- Prepare foods from scratch more often using herbs or spices to increase the flavour.
- Read nutrition labels on food packages.

Helpful Hint: When you shop, purchase items mostly from the outer aisles of your grocery store. This is where most of the fresh, basic foods are found.



CELEBRATIONS

You need to plan ahead for special events or celebrations. Choose foods that are special but will not make your heart failure worse. Many restaurants offer heart-healthy menus. Phone ahead before deciding on a restaurant, to be sure they offer items you will enjoy and which will meet your dietary needs.

Or, instead of rewarding yourself with food, choose a special outing, concert or book. Take time to relax and visit with friends and family at meals. You and your heart will benefit!

Activity Sheet #4 at the end of this module will help you to check your eating habits. If you need further information or advice about diet after reviewing this module, ask your dietician, nurse or family doctor. The next session will discuss exercise, rest and energy saving.



Activity Sheet 4

EXPLORING FOOD CHOICES

Favourite foods eaten regularly	Possible substitutes
Favourite foods for celebrating	Possible substitutes
Special or ethnic foods I like (Chinese, Italian, etc.)	Possible substitutes
Do I need to add potassium to my diet? <input type="checkbox"/> Yes <input type="checkbox"/> No	Foods rich in potassium
Three preferences for food high in fibre	Ways to reduce my fluid intake

[illegible]

Physical Activity Module



In this learning session, you will discover:

- how rest and activity influence your heart
- how to monitor yourself for adequate rest and activity
- how to plan ahead for events

MANAGING HEART FAILURE WITH EXERCISE, REST AND ENERGY SAVING

Exercise (physical activity) helps strengthen your heart so it works more efficiently. Activity helps blood flow to all parts of the body. It gives you a feeling of well-being and adds to your quality of life.

When planning physical activity, *Canadian Physical Activity Guidelines* are a good source of information. They discuss different types of exercise and make suggestions about how to incorporate physical activity into your daily routines.

It's very important to discuss your physical activity program with your nurse or family doctor before starting. Every person with heart failure has unique needs and limits. Your exercise program has to be designed with your specific needs and limits in mind.



The keys to your level of activity are:

- Beginning with your ability as it is now.
- Being active regularly. Daily exercise is best. Walking is an ideal activity. It can be done outdoors or indoors (even in gyms or shopping malls) at your own pace. Cycling on a regular bike or exercise bike is another good choice.
- Increasing your activity a small amount each day.
- Being careful not to overdo it. Feeling tired the following day usually means you over-exerted.
- Stopping any activity if you feel pain, become fatigued, or become short of breath.



After any period of activity, it is important to allow the heart to rest and 'catch up' with the body's demands on it. Rest is also important after meals. Resting does not have to be sleeping. It can be a quiet time of listening to music, relaxing or reading.

- Choose a position of comfort.
- Elevate your feet and legs.
- Support your back and head.

Energy conservation helps your heart, by saving up energy for activities you plan to do in the next day or the next week. If you have a big job to do, or a long day away from home planned, do only one part of the task at a time. Allow yourself rest periods between parts.

Some examples include:

- Getting extra rest the day before a celebration.
- Breaking up your self-care activities (shaving, bathing, preparing breakfast, etc.) with rest periods between them.
- Dividing shopping needs into several, short trips rather than one long trip.
- Engaging in sex when you are well rested and relaxed. Choose less stressful positions and techniques.



Discuss with your nurse or doctor:

- 1) What activities are you able to do now?
- 2) Which activities cause you the most problems?
In what ways?
- 3) How can they be changed to make your life easier?

Activity Sheet #5 at the end of this module gives you the opportunity to decide what activities are important in your life. It will help you to find ways to participate in them. The next module will discuss stress management, relaxation, and how the environment affects heart failure.

Activity Sheet 5

Exploring Choices for Rest and Activity

Activities which I enjoy doing are:

I feel limited in the activity I can do because:

My activity level could be increased by:

I know I have done too much when:

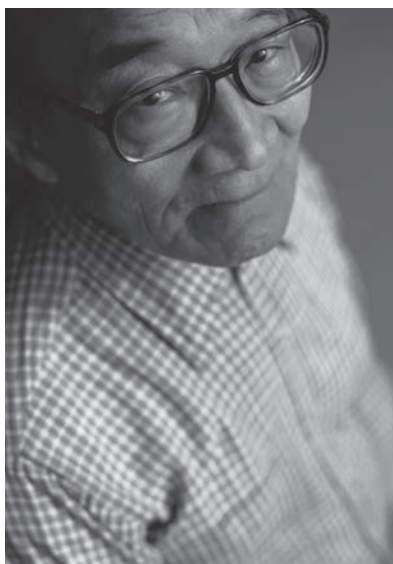
I feel more rested when:

In the next day, I need to plan for:

In the next week, I need to plan for:

This image shows a full page of blank white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page, providing a template for writing or drawing. There are no margins, text, or other markings on the page.

Stress Management Module



In this learning session, you will discover:

- how stress affects heart failure
- your personal stresses
- how to modify stressful situations
- techniques to help deal with stress

MANAGING HEART FAILURE AND STRESS

Stress can be a normal part of living and a challenge for personal growth. It can be physical or mental. When stress is intense and lasts for too long, it makes your heart work harder than usual. For a person with heart failure, this extra workload may cause their symptoms to worsen.

Early management of stress can prevent a hospital admission and its disruption to your daily life. Some signs of stress that you may notice include:

- changes in breathing
- tenseness in the face, neck, shoulders
- increased heart rate
- stomach upsets
- anxiety
- restlessness
- mental confusion

Physical stress can be controlled by avoiding situations that strain your heart. You can use assistive devices to do heavy work, and get help from family and friends. Plan ahead whenever possible.

When the weather is extremely hot and humid or extremely cold, your body may not be able to adjust to these conditions. Listen to the weather forecasts. Avoid exercise and prolonged activities during this time. Space your usual activities between periods of rest. Avoid outdoor activity until the weather returns to normal. Be especially cautious about drinking too much fluid during hot weather to avoid overloading your heart.

Mental stress includes dealing with unexpected events, dealing with family conflict, and general worry. You may choose to re-evaluate what things are most important in your life and give you the most pleasure. Put your energy and time into the activities you enjoy most. Some of your usual roles and activities may need to change. You may decide to seek help from a counsellor, a spiritual advisor, or a close friend to help you with mental and emotional stress. It is also very important to maintain friendships and social contacts.

Relaxation should be a planned part of each day. You choose what is relaxing for you; it may be reading, listening to music or doing handicrafts, for example. Whenever your body feels tense or fatigued, it's time to relax. Here's how to begin:

- Find your position of comfort: sitting with your feet elevated slightly, lying down or lying with the head and shoulders raised slightly.
- Use progressive muscle relaxation.
 1. Starting with your toes and feet, focus your thoughts on totally relaxing them.
 2. Move up to your ankles, then to the calves of your legs, your knees, your thighs, etc. and focus on relaxing each area in turn.
 3. Spend enough time on each area to really feel the tension leave.
 4. Continue up to the head, neck, and eyes.
 5. Enjoy the feeling of total body relaxation for as long as possible.
- If you cannot take the time for progressive muscle relaxation, you can position yourself comfortably, loosen any restrictive clothing and focus on breathing slowly and deeply 4–6 times.

Activity Sheet #6 at the end of this module will help you identify what your stresses are and how you might make some changes.

The final module will focus on resources and support for managing heart failure.

Activity Sheet 6

STRESS, RELAXATION AND ENERGY SAVING

Some of my stresses are:

I know that I am stressed when I:

In the past, I have handled stress by:

When I feel stressed, I prefer to receive help from:

My favourite ways to relax are:

I would like to learn more about:

- ☐ ways to relax
- ☐ ways to handle stress

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Community Resources Module



In this learning session, you will discover:

- areas where you need assistance to manage heart failure
- community resources available
- personal and family support available

MANAGING HEART FAILURE USING RESOURCES AND SUPPORT SYSTEMS

You are the most important person in managing your health. You are the expert in what you are feeling and experiencing. You remember best how your body has felt and worked in the past. Therefore, you are able to notice changes before anyone else. These changes may be small or big. They may happen slowly over time or suddenly. You can conduct a daily 'state of affairs' for your heart and health.

You are not alone. There are nurses, physicians, and other healthcare providers to assist you. Take time to review the signs and symptoms to monitor. Review when you need to report them. Any sudden or noticeable change is a warning to seek help. Memorize the phone number in your community for emergency assistance. In many communities, it is 9-1-1.

For more information about the resources available through the Heart and Stroke Foundation, visit the website at: heartandstroke.ca or call: **1-888-HSF-INFO (473-4636)** toll-free. The Heart and Stroke Foundation has useful information on heart health, dining out, weight control, exercise, smoking cessation, managing stress, heart-healthy recipes and *Canada's Food Guide*.

Many hospitals and health centres offer support and education in heart health through clinics and out-patient programs. You may also find heart failure support groups in your community. Local clinics, community health centres and drugstores offer written information as well.

Fitness clubs often have special groups for persons with heart health problems. To learn more about exercise and physical activity, refer to *Canadian Physical Activity Guidelines*, produced by the Canadian Society for Exercise Physiology. You can get a copy by visiting csep.ca/guidelines.

As you learn more about your heart, you will feel able to:

- monitor yourself for changes
- report symptoms to the right persons at the right times
- make changes to improve your quality of life

This learning program has been written to help you get started. There is much more you can learn when you are ready. Your specific situation may be somewhat different from someone else's experience. If you need help tailoring the information in this book to your unique needs, talk to your nurse or doctor.

Activity Sheet #7 at the end of this module can be used as a wall chart or a refrigerator chart. It will remind you each day, how to take good care of yourself. You may want to post it together with your weekly medication record in a visible place.



Activity Sheet 7 — TIPS FOR SUCCESS

KEYS TO MANAGING HEART FAILURE



WEIGH yourself each morning.



Eat a balanced DIET (with no added salt, low fat, low cholesterol and reduced amounts of sugar).



Be smoke free.



Take MEDICATIONS as prescribed, even when feeling well. Know the names, dose, frequency, side effects and reason for being prescribed each one.



REPORT any side effects or problems with your medications.



Report any SYMPTOMS of increased heart failure: shortness of breath, ankle swelling, abdominal swelling, fatigue, confusion or weight gain.



Be PHYSICALLY ACTIVE at least once a day.



Plan ACTIVITIES for the day: include periods for rest; think about special events or extra demands coming up so you can conserve energy for these.



Modify your plans for the WEATHER conditions (extremes in heat or cold).



CHECK your mental health: stress level, tension and anxiety. Plan and use relaxation techniques.



CELEBRATE your successes.

NOTES

[illegible]

Heart And Stoke Foundation Managing Heart Failure

EVALUATION

Please take a few moments to complete and return this evaluation. It is with your comments that the Heart and Stroke Foundation is able to continually improve this resource to help people with Heart Failure manage their condition and improve their quality of life.

1. Where did you receive Managing Heart Failure? (please check one)

- ☐ In the Hospital
 ☐ In Heart Failure Clinic
☐ In Cardiac Rehabilitation
 ☐ Family Physician office
☐ Other, please specify: _____

2. Who gave you your copy of Managing Heart Failure? (please check one)

- ☐ Local Heart and Stroke Foundation office
☐ Home Care Worker
☐ Ordered yourself
☐ A Cardiologist or Internist
☐ Family Physician
 ☐ A Nurse
☐ A Social Worker
 ☐ Other, please specify: _____

3. Did you receive Managing Heart Failure when it was most useful to you?

- ☐ Yes
☐ No When would it have been more useful for you to receive Managing Heart Failure? _____

4. On the following scale, please indicate whether you found the information in Managing Heart Failure to be "very good", "good", "fair" or "poor". If you didn't read a particular section, please mark the "Didn't Read" box.

	Very Good	Good	Fair	Poor	Didn't Read
Understanding Heart Failure <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heart Failure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nutrition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exercise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community Resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Would you recommend *Managing Heart Failure* to other people diagnosed with heart failure?

☐ Yes, very strongly ☐ Yes ☐ No ☐ Not at all

If not, why not?

6. Did the topics discussed in *Managing Heart Failure* match your concerns about your condition?

☐ Yes, very much ☐ Yes, somewhat
☐ No, not really ☐ No, not at all

7. Would you prefer that *Managing Heart Failure* be available in another language? Please list
-

8. What topics would you like covered in *Managing Heart Failure* or discussed in more detail?

a) _____
b) _____
c) _____

9. How long have you been diagnosed as having heart failure?

☐ Less than a year ☐ 1–5 years ☐ Over 5 years ☐ Not applicable

10. Have you been hospitalized because of your heart failure in the past six months?

☐ Yes How many times?

☐ No

☐ Not applicable

11. Demographic information (for statistical purposes)

Gender: ☐ Male ☐ Female

To which of the following age groups do you belong?

☐ under age of 35 ☐ 35–44 years of age ☐ 45–54 years of age
☐ 55–64 years of age ☐ 65–74 years of age ☐ 75 and over

Thank you for taking the time to fill out this evaluation.

Please send your completed form to:

Heart and Stroke Foundation
ATTN: Patient Initiatives
2300 Yonge Street, Suite 1300
P.O. Box 2414
Toronto, Ontario M4P 1E4



The Heart and Stroke Foundation would like to thank the Ottawa Health Research Institute (ohri.ca), and the authors Margaret B. Harrison, Cynthia Toman and Jo Logan, for the development of this resource. *Managing Heart Failure*, formerly *Partners in Care™ for Heart Failure*, was developed following the AHCPR (Agency for Health Care Policy and Research) Guidelines for Heart Failure (1994) and evaluated in research funded by NHRDP (National Health Research and Development Program). Published reports can be found in:

Patient Education and Counselling, Vol 42 (2001)
pp. 279–287.

The Canadian Nurse, February 1998, pp. 36–42.

Medical Care, Vol. 40 (2002), No. 4, pp. 271–282.

Millions of Canadians will develop some form of heart disease or stroke over their lifetime - and some at a much too early age. As a leading funder of heart and stroke research in Canada, the Heart and Stroke Foundation continues to find the answers that lead to earlier diagnoses, better treatments and new insights into how to prevent and manage these diseases. To protect your health and the health of those you love, the Foundation also provides the most up-to-date healthy living information to Canadians, based on the most current, evidence-based research.



To find more information about heart disease, stroke, how to live a healthy life, as well as how you can offer much needed support in your community, visit

heartandstroke.ca

or call

1-888-HSF-INFO (473-4636)

This publication **Managing Heart Failure** is for informational purposes only and is not intended to be considered or relied upon as medical advice or a substitute for medical advice, a medical diagnosis or treatment from a physician or qualified healthcare professional. You are responsible for obtaining appropriate medical advice from a physician or other qualified healthcare professional prior to acting upon any information available through this publication.