

Enjoying Life While Managing Heart Failure: Understanding the Diagnosis

The work of the heart is to pump blood to all the parts of the body. “Heart failure” means that the heart is not pumping well enough to get oxygen – carrying blood to all of the body’s organs. The word failure means that your heart is failing to do its pumping job well. Even though this problem is called heart “failure,” it does not mean your heart is about to stop working. By working closely with your nurses and doctors, together you can help manage your heart failure.

Why does heart failure happen?

The two most common causes of heart failure are:

- Blockage in a heart artery leading to heart attack and/or damaged heart muscle. Many factors increase the risk for these blockages, like smoking, high cholesterol levels, high blood pressure, diabetes, age, and family history.
- Having high blood pressure for a long time, which overworks the heart muscle and makes it stiff.

Some other causes of heart failure:

- Some infections
- Some cancer treatments
- Many years of drinking too much alcohol
- Valves in your heart that do not open and close correctly (valve problems can be present at birth, or may develop over time)
- Pregnancy (rare)
- Problems in the heart’s electrical system — making the heart beat too fast or too slow — can sometimes cause heart failure.

What are signs that I might need a change in my heart failure treatment?

There are 2 groups of symptoms that can happen when you have heart failure. The first column of symptoms are those from fluid buildup, the second is from your body not getting the oxygen it needs. Your nurse or doctor will talk to you about when to call them if any of these things happen to you, or if the symptoms you may have get worse.

Symptoms caused by fluid build up	Symptoms caused by the body not getting as much oxygen-rich blood as it needs
Shortness of breath or waking up in the middle of the night with trouble catching your breath	Heart beating fast even when you are not doing anything
Swollen ankles, legs, or belly	Dizziness
Coughing or wheezing	Feeling tired or fatigued, lack of energy
Increase in weight	Poor appetite or upset stomach



What can I do to help my nurses and doctors manage my heart failure?

The most important thing you can do is to let your nurses and doctors know if you have new symptoms or if your symptoms get worse. These symptoms won't get better by themselves. If you let your nurses and doctors know when there is a change in your weight, your swelling, or how you feel, then they can adjust your treatment. This will help you feel better and may keep you from having to go to the hospital!

Other important things to do to manage your heart failure and to feel better:

- Take your medications every day as prescribed.
- Eat a low salt, heart healthy diet.
- Get regular daily exercise.
- Quit smoking. Don't use tobacco of any kind.
- Avoid alcohol.
- Weigh yourself every day.
- Keep a daily record of your weight and symptoms.
- Manage your stress.

Remember, call your nurse or doctor if you have:

- **Breathing trouble, such as:**
 - More shortness of breath or shortness of breath when you aren't doing anything
 - Waking up in the middle of the night with trouble catching your breath
 - Needing more pillows when sleeping or needing to sit up to breathe at night
 - Coughing or wheezing (noisy breathing)
- **Change in your weight**
 - Weight gain of 3 pounds in one day or 5 pounds in one week or less
- **Swelling**
 - Swollen ankles or legs
 - Swelling in your belly (you cannot button your pants or your belt is too tight)
- **No appetite or upset stomach**
- **Dizziness or feeling lightheaded when you first sit up or stand up**
- **More tiredness, sleepiness, or mental confusion**
- **Heart beating fast even when you are not doing anything**

Call 911 if you have:

- Severe pain in your chest
- Severe difficulty breathing
- Sudden confusion or dizziness
- Severe weakness or difficulty speaking
- Very fast heart rate or fainting

Enjoying Life While Managing Heart Failure: The Journey

When you have heart failure, there are ways to help you maintain an active lifestyle. There are many simple lifestyle changes in addition to medicines and other treatments that can help you manage your heart failure. No two patients are alike. Your health care team (nurses and doctors) will recommend medicines and treatments for you based on the cause of your heart failure, how you are feeling and how well your medicines are working. It is very important to make and to follow a treatment plan with your health care team that is right for you.

Common Heart Failure Medicines:

Take your medicine every day as prescribed.

To lower your heart's workload and help it pump stronger, these medicines are commonly prescribed, often in combination:

- **Angiotensin-converting enzyme (ACE) inhibitors:** These medicines help your arteries relax so your heart can pump blood more easily.
- **Angiotensin II receptor blockers (ARB):** These medicines work in a way very similar to ACE-Inhibitors.
- **Beta blockers:** These medicines slow your heart rate and lower your blood pressure by blocking the stress hormone adrenaline.
- **Diuretics (water pills):** These medicines work by helping your kidneys take water and salt out of the body by making more urine. This will help you breathe easier and have less swelling in your legs, feet and belly.
- **Aldosterone inhibitors:** These medicines block aldosterone, a chemical made in the body that causes the body to hold on to salt and water.
- **Digoxin:** Digoxin is a medicine that slows down the heart and helps it pump stronger.

Pacemakers and implantable cardioverter defibrillators (ICDs)

People with heart failure often have fast, slow, or irregular heart rhythms. These “arrhythmias” can affect how you feel and increase your risk for more serious heart rhythms. Your doctor may recommend an ICD or a pacemaker. Pacemakers and ICD devices have batteries that last a long time (several years) with wires that connect to your heart. You will be scheduled for regular checkups. Close follow up with your nurses and doctors is important.

- **Pacemakers** are used to set the rhythm of your heart.
- **Defibrillators (ICDs)** are used to correct unsafe heart rhythms and can help “jump start” the heart to resume a normal rhythm.



Procedures to treat heart failure:

- **Blocked arteries in the heart:** Blocked arteries can decrease blood flow to the heart—causing heart failure or other heart problems, or making heart failure worse. Procedures to open blocked arteries are often done in the cardiac catheterization lab (“cath lab”). Sometimes surgery is a better choice.
- **Percutaneous coronary intervention (PCI or angioplasty):** A catheter with a tiny balloon on the end is placed into the blocked artery in the cath lab. When the balloon is inflated, the blockage is pushed to the sides of the artery to open it up. A small metal device called a stent may be placed in the artery to keep it open.
- **Coronary Artery Bypass Surgery:** A vein from your leg or an artery from your chest is used to re-route the blood flow around the blocked artery.
- **Abnormal or damaged heart valves:** Sometimes heart failure is caused or worsened by a damaged heart valve. If so, surgery to repair or replace a damaged heart valve may also improve heart failure.

Advanced heart failure treatment options:

Advanced treatments may be recommended when your symptoms are not controlled with the usual medicines and/or procedures and devices described above.

- **Constant intravenous (IV) medications:** IV medicines that are used in the hospital to give your heart a temporary boost can also be given continuously, even at home if needed.
- **Heart Transplant:** Sometimes heart failure is so severe that a heart transplant may be considered. Many factors determine whether a person should be on a waiting list for a heart transplant. Some of these factors include age, overall health, and severity of heart failure.
- **Mechanical circulatory support or left ventricle assist device (LVADs):** These devices help the heart pump or take over the pumping of the heart when it is failing. LVADs can be used instead of a heart transplant, or to support the heart while waiting for a heart transplant.

Palliative care:

Palliative care is a team approach to improve your quality of life by easing the stress, pain and symptoms of heart failure. Palliative care may be a part of your plan in addition to other treatments for your heart failure. The palliative care team of doctors and nurses can also help you and your family with making decisions about the end of life and when you want your care to be more focused on providing comfort. Making decisions about the kind of care you want at the end of life can be difficult but also can offer you peace of mind.

Enjoying Life While Managing Heart Failure: Your Emotions

Having an illness like heart failure may be a challenge. Sometimes people with heart failure feel sad, depressed, nervous or stressed. It is normal to have periods of time when you feel sad or “down.” Here are some tips on things you can do to feel better and also how to know when you need some extra help from your nurse or doctor to work through these feelings.

Sadness and depression

It is not uncommon to have feelings of sadness or even depression.

There are some things you can do on your own to feel better.

- Even if you feel sad, try to get dressed every day.
- If the weather is not too hot or too cold, get out and take a walk every day.
- Even if you cannot get outside, keep up your physical activity and exercise routine, as recommended by your nurse or doctor.
- Get a good night’s sleep.
- Eat a balanced, healthy diet.
- Be involved in activities and hobbies you enjoy.
- Keep in touch with your friends and family.
- Share your feelings with someone you trust like your spouse, a good friend, or a counselor from your church or place of worship.

These are signs that you should contact your nurse or doctor and ask for advice to help manage your feelings.

- You feel nervous, guilty, or emotionally “empty”
- You have trouble focusing, remembering, or making decisions.
- You feel that life is not worth living or have thoughts of death or suicide.
- You have sleep problems like trouble falling asleep, waking up in the middle of the night, or sleeping too much.
- You are eating either more or less than usual.
- You do not enjoy things that you used to enjoy.



Managing stress

Stress is a part of everyday life. You can't always remove things that cause stress, but you can change how you respond to them. Managing your stress can make you feel better and help your heart. Here are some things you can do to help lower your stress.

- Do fun things that you like to do such as reading or other hobbies.
- Listen to peaceful music.
- Allow yourself to put your feet up and take a rest every day.
- Take time every day to relax, close your eyes, breath slowly and in your mind visit a place that is very special to you (perhaps the beach, or a sunset, or petting your cat or dog).
- Write down how you feel, or talk to a friend or family members about your feelings.
- Go for a walk or get some physical activity that you enjoy.
- Set goals for what you want to get done each day.
- Don't try to do too many things in one day.

Alcohol and tobacco use

Drinking alcohol and using tobacco can harm your heart.

Talk to your nurse or doctor if you drink alcohol regularly—like every day or more than 3 times a week. Alcohol may not mix well with your medications and may weaken your heart. Years of drinking too much alcohol is actually a cause of heart failure.

Using tobacco can damage your arteries and affect the pumping of your heart. If you smoke or chew tobacco, it is important to stop. There are many different ways to help you quit smoking. This may include medications, quit smoking programs or working with a counselor. Even if you have tried before to quit, it is important that you try again. Many times people find success on the second, third, or fourth attempt. Your nurse or doctor can work with you to set up a plan to help you. Your heart will thank you!

Enjoying Life While Managing Heart Failure: Get Walking

You can be physically active when you have heart failure. Ask your nurse or doctor if an organized cardiac rehabilitation program would be right for you. Physical activity and exercise will help you keep your heart strong and help you:

- lose weight or keep from gaining weight
- have more energy and feel better
- lower your cholesterol and keep your blood pressure healthy
- improve your circulation

Exercise Tips

- A good goal is to build up to walking 30 minutes every day, or on most days of the week.
- Always take 5 minutes to walk slowly to “warm up” and finish your walk with a 5 minute slow “cool down” walk.
- You can break the exercise into 10 minute periods three times a day.
- Start slowly and build up to walking longer as you get stronger.
- Wear a pedometer and record your steps or how far you have walked.
- Wear supportive shoes and comfortable clothing.

For Your Safety

- It is normal for your pulse rate and breathing to increase during exercise, but you should be able to pass the “talk test,” (carry on a conversation while exercising).
- Ask a friend or family member to exercise with you.
- Carry a mobile phone or let someone know your walking route.
- Don’t exercise if it is very hot or cold outside.
- Wait one hour after meals before exercising.
- If you become tired during activity, stop and rest.
- Do not lift, push or pull any object over 10 pounds.

Guidelines for daily activities

There are some simple things you can do to make housework and other daily tasks a little bit easier.

- Plan your daily activities ahead of time to better “pace” yourself. For example: do the laundry on one day and sweep the kitchen floor on another day.
- Do the things that take more energy when you are feeling your best.
- Rest before and after activities.



Physical Activity: Get Walking!

Set goals and write down your steps/distance

Week Day	Goal	Warm up	Steps/ Distance	Cool Down	How I feel	Daily Activities Accomplished	What I need to finish
Example	I will walk ½ block today	Walked slowly 5 minutes	2000 steps	Walked slowly 5 minutes	Good, no shortness of breath	Laundry washed, dried, and folded	Put clean laundry away
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							

Questions I need to ask my nurse or doctor about my daily activity and walking:

Enjoying Life While Managing Heart Failure: The Sodium in Your Food

Most Americans eat too much sodium (salt), which can increase your blood pressure. Too much sodium in your food can also make you retain (hold) extra fluid when you have heart failure. This makes your heart work harder. Fluid buildup can result in (1) fluid in your lungs which causes trouble breathing and (2) swelling (edema) especially in your legs.

It is a good habit not to add salt to your food when cooking or at the table, but the salt shaker only adds a small part of the sodium we eat. Most sodium comes from packaged, processed, store-bought and restaurant foods.

Every patient's condition is a little different. Talk to your nurse or doctor about any special instructions for you. There is no one standard sodium limit for all patients with heart failure.

An example of how to manage your sodium limit: Your nurses and doctors tell you to eat less than 2500mg of sodium in a day. One way to do this is to plan your meals so that you eat 700mg of sodium or less each meal. This allows you 400mg throughout the day for low sodium snacks such as fruits, raw vegetables, low sodium cereals, unsalted nuts and unsalted pretzels.

Almost half (44%) of the sodium we eat comes from the very common foods on this list. You might not think about food like bread having a lot of salt. But when you eat a few servings a day, it adds up. There are many low sodium choices in these food groups. Learning to read food labels is really important. Eating a lot of fresh fruits and vegetables and foods you make yourself will help keep your sodium intake lower too.

- Breads and rolls
- Cold cuts and cured meats
- Pizza
- Poultry
- Soups
- Sandwiches
- Cheese
- Pasta dishes
- Meat dishes
- Snacks

How to Reduce the Sodium in Your Diet

- Read Nutrition Facts labels on the foods you buy when shopping. This can help you find the lowest sodium choices of your favorite foods.
- Eat more fruits and vegetables—fresh, frozen (without sauce), or “no salt added” canned products. If you eat canned or processed foods, rinse them with water before you cook or eat them.
- Limit processed foods that are high in sodium (hot dogs, lunch meat, frozen pizza, and canned soups).
- When eating at a restaurant, ask for no salt to be added to your food. Ask for sauces or dressings on the side and just put a little on your food.
- Don't eat snacks from a vending machine.
- Ask your nurse or doctor if you should avoid any medicines, especially “fizzy” ones that some people take for indigestion or headache. These may be high in sodium.

What about seasonings?

- There is as much sodium in sea salt and Kosher salt as there is in regular table salt. Limit these just like you limit table salt.
- Salt substitutes: Ask your nurse, doctor, or dietitian if these are okay for you to use.
- Stay away from flavored salts, lemon pepper, garlic salt, onion salt, meat tenderizers, flavor enhancers, bouillon cubes, ketchup, mustard, steak sauce and soy sauce.
- Choose onion powder or garlic powder instead of garlic salt. Fresh herbs have no salt.

Regular Canned Tomatoes

Nutrition Facts	
Serving Size ½ cup (126g)	
Servings Per Container 3½	
Amount Per Serving	
Calories 25	Calories from Fat 0
% Daily Value*	
Total Fat 0g	0%
Saturated Fat 0g	0%
Cholesterol 0mg	0%
Sodium 250mg	10%
Total Carbohydrate 6g	2%
Dietary Fiber 2g	
Sugars 2g	
Protein 1g	
Vitamin A 10%	Vitamin C 15%
Calcium 2%	Iron 2%
*Percent Daily Values are based on a 2,000 calorie diet. Your daily values may be higher or lower depending on your calorie needs.	

Low Sodium Canned Tomatoes

Nutrition Facts	
Serving Size ½ cup (126g)	
Servings Per Container 3½	
Amount Per Serving	
Calories 25	Calories from Fat 0
% Daily Value*	
Total Fat 0g	0%
Saturated Fat 0g	0%
Cholesterol 0mg	0%
Sodium 50mg	2%
Total Carbohydrate 6g	2%
Dietary Fiber 2g	
Sugars 2g	
Protein 1g	
Vitamin A 10%	Vitamin C 15%
Calcium 2%	Iron 2%
*Percent Daily Values are based on a 2,000 calorie diet. Your daily values may be higher or lower depending on your calorie needs.	

Here is an example of a food label that shows the difference between regular sodium (on the left) and reduced (low) sodium (on the right) canned tomatoes. See that there are 3½ servings (½ cup each) in each can. The food label tells you how much sodium is in one serving. A good rule of thumb is to try and eat nothing that has over 150mg of sodium in 1 serving.



Heart Failure Patient Log

Tape this sheet to your bathroom door or your refrigerator to remind you to write these things down every day: your weight, how you feel, and anything you did about your symptoms (like “very short-winded, called my nurse about taking an extra water pill”). Weigh yourself at the same time every day with the same amount of clothes on. Use the numbers listed below to stand for how you are feeling (your symptoms) and actions (anything that you did about it). Call your nurse or doctor if you have new or worsening symptoms, or if you gain 3 pounds in a day or 5 or more pounds in less than a week.

Show this to your nurse or doctor every visit. Ask them for some blank monthly sheets to use when this one is filled up.

Date/Things I needed to call my nurse or doctor about:

Date/New instructions my nurse or doctor gave me when I called in:

Date/Things to remember to ask about/talk about at my next appointment:



PCNA
PREVENTIVE CARDIOVASCULAR
NURSES ASSOCIATION

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Date							
Weight							
Symptoms							
Actions							
Appointments							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Date							
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Symptom Codes:

- | | | |
|--|---|---------------------------------------|
| 1 = Short of breath, more frequent coughing | 4 = Fast or heavy heart beat | 7 = Very tired and weak |
| 2 = Need more pillows or recliner to sleep | 5 = Swelling of ankles, arms, or belly | 8 = Feel very sad or depressed |
| 3 = Waking up feeling breathless or anxious | 6 = Sick stomach or loss of appetite | |

Action Codes:

- A** = Took extra diuretic (water pill)
- B** = Cut down on salt and fluid
- C** = Called nurse or doctor
- D** = Rested
- E** = Other: _____