



Image: The Yorkshire Heart Centre Jubilee Building, Leeds General Infirmary.

Heart Failure

Information Booklet for
Patients and their Families



YORKSHIRE
HEART CENTRE

The Leeds Teaching Hospitals
NHS Trust



Please read about Take Heart at rear of this booklet



The publication of this
booklet has been financed
by Take Heart

Raising funds exclusively for the

Yorkshire Heart Centre

at Leeds General Infirmary,

St James's Hospital

and its units within the

Leeds Teaching Hospitals NHS Trust

Take Heart

F Floor, Jubilee Building, The General Infirmary at Leeds, LEEDS, LS1 3EX

Telephone: 0113 392 2888 Fax: 0113 392 5222

Email: admin@takeheart.net Web: www.takeheart.net

Please read about Take Heart at rear of this booklet

WHAT IS HEART FAILURE?

Heart Failure does NOT mean that the heart has or is about to stop working. Heart Failure occurs when the heart fails to pump out enough blood to meet the demands of the body. It can often result in the build-up of fluid in the lungs or other parts of the body, most commonly the legs or stomach. This is often associated with breathlessness.

WHAT CAUSES HEART FAILURE?

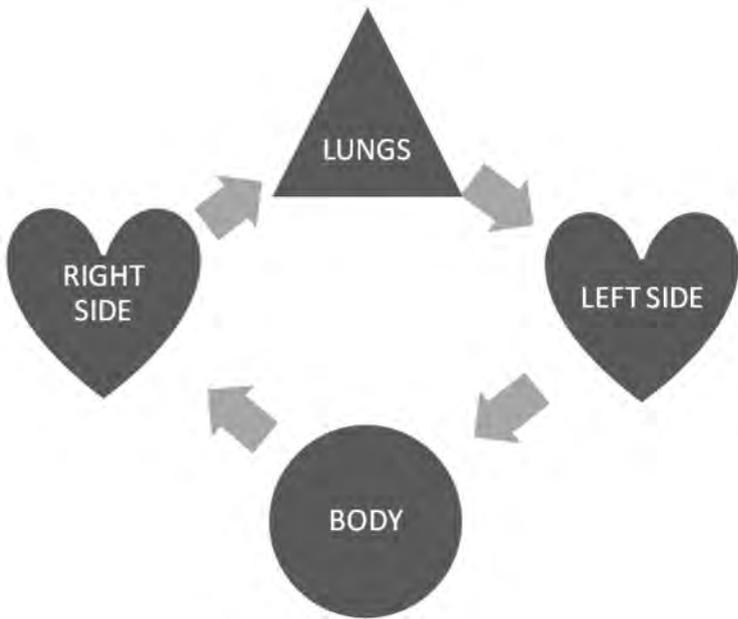
Many things can cause heart failure. The most common causes are:

- Heart attacks (causing damage to heart muscle)
- Coronary Artery Disease (Angina)
- Heart Valve Disease
- Disease of the heart muscle (Cardiomyopathy)
- Hypertension (high blood pressure)
- Infections of the heart
- Abnormal heart rhythms
- Alcohol or drug abuse
- Congenital heart disease (an abnormality of the heart at birth)

Your doctor or nurse should be able to give you more information about the cause of your Heart Failure. This is usually done by looking at your past medical history and test results. However, sometimes it can be difficult to know the exact cause of Heart Failure.

NORMAL HEART FUNCTION

The heart is a muscle that functions as a pump. The right side of the heart pumps blood to the lungs where it picks up oxygen. The blood is then returned to the left side of the heart which pumps the oxygenated blood to the rest of the body. Once the body uses the oxygen this blood is then returned back to the right side of the heart.



The heart is made of four chambers and contains four valves. The valves ensure that blood flows through the heart in the correct direction.

WHAT ARE THE SYMPTOMS OF HEART FAILURE?

Heart Failure affects different people in different ways. You may not experience all of these but the most common symptoms are:

- **Shortness of Breath**

Some people may feel short of breath only when exerting themselves others can feel short of breath at rest. Sometimes shortness of breath can occur when you lie down flat or during the night. This can be due to the accumulation of fluid in the lungs or due to reduced heart function.

- **Swelling**

You may have some swelling of your feet, ankles or legs. Sometimes this may extend up to your thighs or stomach. This swelling is called oedema. The swelling is due to fluid build-up which occurs as a result of a reduced heart function, this leads to salt and water retention.

- **Weight Gain**

Because Heart Failure can cause you to gain excessive fluid this is often reflected in your weight. Weight gain can be one of the very first symptoms of Heart Failure.

- **Tiredness**

Sometimes you may feel very tired, weak or as though you have no energy at all. This can occur after even light activities.

- **Chest Pain**

Many people with Heart Failure also experience chest pains due to narrowing of the arteries which supply blood to the heart. This is called angina and may be eased by medication

- **Nausea and Loss of Appetite**

Feeling sick is a common symptom of Heart Failure. This can be due to fluid around your abdomen or the build-up of waste substances in the body.

- **Low Mood**

Feeling upset, anxious or depressed is common in people with Heart Failure. It is important that you discuss your feelings and worries with your nurse or doctor. They may suggest other services to help with this problem e.g. a psychologist or physiotherapist.

TREATMENT FOR HEART FAILURE

In the majority of cases Heart Failure cannot be cured, it is a chronic condition. However, taking certain medication and making lifestyle changes can greatly improve the symptoms and slow the progression of Heart Failure. It can also help you to gain some control over your condition.

MEDICATIONS

Evidence shows that certain medications are very beneficial in the treatment of Heart Failure. Other medications are used to help reduce or control fluctuating symptoms. The most common medications used for Heart Failure are:

- **Diuretics**

Diuretics are more commonly known as ‘water tablets’. They help to remove excess fluid from the body by making you pass more urine.

The dose of water tablet you take may vary depending on the amount of excess fluid you have on your body. Most people find their symptoms are best controlled when they take their diuretics regularly. Sometimes it is possible for you to alter the dose you take depending on your symptoms. It may also be possible for you to alter the time you take your tablets to help them fit around your lifestyle as it can be an inconvenience needing to pass urine more regularly than usual.

Diuretics can sometimes cause your body to lose substances called electrolytes, especially potassium. They also can have an effect on your kidney function. For these reasons you may find that you have regular blood tests.

A List of common diuretics;

- > Furosemide
- > Bumetanide
- > Bendroflumethiazide
- > Metolazone

- **ACE Inhibitors (Angiotensin-Converting Enzyme inhibitors)**

It is highly recommended that anyone with Heart Failure should be taking an ACE Inhibitor; evidence shows that they can help people live longer and improve their quality of life by helping to control their Heart Failure. They widen your blood vessels which makes it easier for your heart to pump blood through them, reducing the work load on your heart.

Common side effects of ACE Inhibitors can be; dizziness or a persistent dry cough. Like diuretics, ACE Inhibitors can have a negative effect on your kidneys, this will be monitored with blood tests.

A list of common ACE Inhibitors;

- > Ramipril
- > Enalapril
- > Perindopril
- > Lisinopril

- **Angiotensin-II Receptor Antagonists (ARBs)**

ARBs are an alternative to ACE Inhibitors if you cannot tolerate them. They work in a very similar way and can also have a very positive effect on Heart Failure.

A list of common ARBs;

- > Candesartan
- > Valsartan

- **Beta Blockers**

Beta blockers slow the heart rate down, meaning the heart doesn't have to work so hard. They improve the life expectancy of people with Heart Failure and can sometimes also help to relieve peoples' symptoms.

Some common side effects can include dizziness, tiredness and increased breathlessness.

A list of common Beta Blockers;

- > Bisoprolol
- > Carvedilol
- > Nebivolol

- **Aldosterone Antagonists**

Aldosterone antagonists are a group of drugs that can be beneficial in helping to reduce hospital admissions as a result of Heart Failure and can ease symptoms.

Not every person with Heart Failure will be on these medications, your doctor or nurse will decide if it is appropriate for you.

A list of common Aldosterone Antagonists;

- > Spironolactone
- > Eplerenone

As with all medications there can be side effects. Suddenly stopping any of these medications can make your condition worse. If you do experience any side effects or are thinking about stopping a medication you should discuss this with your doctor, nurse or pharmacist who will try to find a solution.

Most patients with Heart Failure will be required to take these medications for life, it is important to keep taking them even if your symptoms improve or you start to feel better.

You can write your medications down in the back of this booklet if you wish.

PACEMAKERS

Some people with Heart Failure can benefit from having a synchronising pacemaker put in. Not every patient with Heart Failure will be suitable for this, your doctor will decide if it this treatment is appropriate for you.

The pacemaker works by resynchronising the hearts' pumping chambers because Heart Failure can sometimes cause the heart to beat 'out of sync' which is called dysynchrony. By resynchronising the heart it can make the heart work more efficiently and some people find that it improves their symptoms.

LIFESTYLE ADVICE & MANAGING HEART FAILURE

As well as taking medication. Making some lifestyle changes may help you to manage some of your symptoms and can extend your life.

- **Diet**

Fat content

Try to have a diet that is not high in saturated fat, for example; cheese, butter, baked and fried foods and non-lean meat such as bacon and sausages. A diet high in fat can cause narrowing of the arteries that supply blood to your heart, this can lead to angina or a heart attack which would worsen Heart Failure.

Aim to have a diet that contains fresh fruit and vegetables, lean meats, chicken, fish and high fibre foods such as wholemeal bread, rice or pasta.

All foods now have nutrition labels to tell you what the food contains, the labels work like a traffic light system. Green is good because it contains low levels of fat, orange is medium and red is high. So aim to avoid the foods that have the high (or red) fat content.

Salt

Salt can worsen symptoms of Heart Failure by encouraging fluid to stay in the body. Try to avoid food with a high salt content such as crisps, bacon and ready meals.

Again, use the traffic light food labels to guide your choices, trying to avoid the high (or red) salt content.

If you would like further advice about your diet ask your doctor or nurse who should be able to give you more information.

- **Weight**

Being overweight causes extra work for your heart. A healthy diet can help you to lose weight as well as exercise which is discussed below. If you want to lose weight discuss this with your doctor or nurse.

- **Fluid Restriction**

Sometimes your doctor or nurse may advise you to cut down on the amount of fluid that you drink. This is to help reduce any swelling or fluid retention that you have.

- **Alcohol**

Alcohol often worsens Heart Failure and it may interfere with your medications. Drinking a lot of alcohol can mean that you drink a large volume of fluid which is to be avoided in Heart Failure.

- **Smoking**

Smoking is one of the biggest risk factors for heart disease as it can narrow the arteries around your heart. Smoking can worsen the symptoms of Heart Failure. You are strongly advised to stop smoking. If you are interested in stopping smoking speak to your doctor, nurse or pharmacist, there are many different options available.

- **Activity**

It is important to try to keep active. Regular activity can help the heart get stronger. Most people find it can improve symptoms, reduce stress and boost energy levels. Taking a walk is a good gentle form of exercise. It is important to start slowly and build up the amount of exercise you take. Your doctor, nurse or physiotherapist can advise you how much and what type of exercise is best for you. If you have chest pain, become breathless beyond your normal limits, dizzy or lightheaded stop what you are doing straight away.

- **Sleeping**

People with Heart Failure sometimes find it difficult to sleep; this can be due to shortness of breath. You may find it useful to sleep with extra pillows if this is the case.

You may feel very tired during the day time, try to schedule time to relax or have a short nap to relieve this.

Speak to your nurse or doctor if you have further concerns.

- **Avoid Infection**

It is recommended that you have the flu jab every year. If a person with Heart Failure has flu it can create an added work load on the heart and make your Heart Failure worse. You should also have the pneumonia jab, this only needs to be done once.

- **Sex**

People with Heart Failure are often very concerned about whether it is safe to have sex. There is no reason why you should not have a normal sexual relationship if your symptoms are managed well.

There may be reasons why your desire for sexual activity becomes affected such as: side effects from medication, feeling tired, mood swings or depression. Talk to your partner about your concerns and feelings, there are plenty of ways of sharing intimacy that do not involve sexual intercourse. You can also discuss any problems with your doctor, nurse or pharmacist.

SELF-MONITORING

It can be very beneficial to monitor the symptoms of your condition in order to identify and deal with problems. You can easily monitor yourself at home.

- **Weigh Yourself**

A sudden increase in weight can sometimes be an indication that your body is retaining fluid. It is advised that you weigh yourself every morning after you have been to the toilet. You may find it helpful to write your weight down to

keep track. If your weight increased by 3 pounds (about 1.5kg) in a few days or more than 5 pounds (about 2.5kg) in a week you should see your doctor or nurse, as this may be a sign that you are retaining fluid and may need extra medication. There is a weight chart in the back of this booklet.

- **Breathing**

It is important to be aware of what your normal pattern of breathing is and what type of activity usually makes you breathless. If you notice that you are becoming more breathless during your usual activities you should contact your doctor or nurse. If you become breathless very suddenly or you are struggling to breathe you should seek medical help immediately.

- **Swelling**

If you notice increased swelling in your ankles, legs or stomach inform your doctor or nurse as this is usually a sign of fluid retention.

- **Chest Pain**

If you develop chest pain that is not relieved or you have never experienced it before call 999. If you have angina and notice is increasing in frequency inform your doctor or nurse.

LIVING LONG TERM WITH HEART FAILURE

In the vast majority of patients with Heart Failure their heart does not recover. Heart Failure is a chronic illness. Symptoms can be managed but over time they do tend to become worse.

Many people want to know how long they will live with Heart Failure, it is not possible for anyone to tell you exactly how long you will live. They can only say what is likely or what happens to the average person. Everyone is an individual.

It is advisable to discuss your prognosis with your doctor or nurse.

There are support groups available (contacts listed in the back of this booklet) who can offer advice and reassurance for you and your family around this difficult subject.

SEE YOUR DOCTOR

It is important to see your doctor regularly to check on your general health such as monitoring your blood pressure or taking blood tests. This is also a good time to ask your doctor, nurse or pharmacist any questions about your condition, medications or concerns you may have.

USEFUL CONTACT NUMBERS & WEBSITES

British Heart Foundation – Heart Helpline

0300 330 3311
www.bhf.org.uk

The Cardiomyopathy Association

0800 018 1024
www.cardiomyopathy.org

British Cardiac Patients Association

Run support groups for people with heart problems and carers in your area
01223 846 845
www.bcpa.co.uk

Hearty Voices

A British Heart Foundation initiative that gives individuals the skills and confidence to speak on behalf of heart patients and carers
02075 540 426
www.bhf.org

Genetic Information Service

Information and support on inherited heart conditions
0300 456 8383

Citizens Advice Bureau

Provides free and impartial advice on your rights and responsibilities
0844 477 4788

CRUSE Bereavement Care

Bereavement support, information and advice

0113 234 4150

Dying Matters

A website to support people in thinking about end of life decisions

www.dyingmatters.org

Leeds Carers Centre

Offer information, financial help, social events, courses and

Support for other carers

0113 246 8338

DIAL – Disability Information and Advice Line

Information and advice line covering most aspects of disabilities

0113 214 3630

Age Concern

Provides a range of services for older people in Leeds including meals on wheels, hospital after care, education and social course, insurance and advocacy

0113 245 8579

www.ageuk.org.uk

LIST OF CONTRIBUTORS

Professor Mark Kearney – Professor of Cardiology

Dr Klaus Witte – Consultant Cardiologist

Sarah Townend – Heart Failure Clinical Nurse Specialist

Emma Sunley- Heart Failure Clinical Nurse Specialist

Rani Khatib – Senior Cardiology Pharmacist

Dr Penny Morris – Clinical Psychologist

REFERENCES

Chronic Heart Failure – NICE Guidelines (2010)

An Everyday Guide to Living with Heart Failure – British Heart Foundation

National Service Framework for Coronary Heart Disease (2000)

Heart Failure – A Clinical Nursing Handbook. Christopher Nicholson (2007)

Membership Application

Membership of Take Heart is open to anyone for a once only fee of £1.50. In return you will receive a regular newsletter and the opportunity to participate in the club's activities.

Title:Surnames(s):

First Names: Member 1:

Member 2:

Address:

..... Postcode:

Telephone:

An attractive club badge is available at £1.00. Please indicate the quantity required in the box shown and add the cost to the Membership fee.

No of Badges required:

I enclose a cheque/postal order for £..... payable to TAKE HEART

Donation Form

Donations should be sent to: The Secretary, Take Heart, The Yorkshire Heart Centre, 'F' Floor, Jubilee Wing, The General Infirmary at Leeds, Leeds LS1 3EX.

I would like to make a donation of £..... to TAKE HEART

Name:

Address:

..... Postcode:

If you are a UK taxpayer, the Charity can benefit further from your donation.

If you would like further details, please tick this box:

PLEASE MAKE ALL CHEQUES PAYABLE TO TAKE HEART

Donations are always welcome and will be acknowledged, and published in our newsletter

*Please send completed Membership/Donation Forms to:
The Secretary, Take Heart, The Yorkshire Heart Centre, 'F' Floor, Jubilee Wing,
The General Infirmary at Leeds, LS1 3EX. Tel: 0113 392 2888. Fax: 0113 392 5222.*

Registered Charity No. 1002063



We Are Take Heart

Take Heart is a small, but professional charity, run on a completely voluntary basis, raising funds exclusively for the Yorkshire Heart Centre at Leeds General Infirmary, St James's hospital and its units within The Leeds Teaching Hospitals NHS Trust. We were founded in 1989 by a small number of heart patients wishing to return something for the excellent care received.

From a small beginning, we have raised over three million pounds and this has been used to provide comfort and enhance the surroundings for the many thousands who visit the centre every year. We have also made significant progress in supporting staff in their work and improve their working environment.

Some of the major achievements of the charity are the provision of a suite of relatives rooms available free of charge when required, a roof garden providing a peaceful area for patients and relatives, and an internal garden. We provide free bedside television, free telephone calls and free internet for all patients on the heart wards and we have recently provided changing rooms for an additional MRI scanner. Take Heart have refurbished most waiting areas and made sure that patients enjoy comfort of the highest standard. We also fund information booklets (such as the one you are now reading) which are available in all the Heart Centre wards.

Look around and you will see that all the bedside furniture in the heart wards was provided by Take Heart. We also provide equipment to help bring the latest technology into the centre which, in some cases, helps to reduce waiting times. Our latest major projects include two new portable echo machines and an Intracoronary Optical Coherence Tomography Scanner, (catheter-based invasive imaging systems using light rather than ultrasound for detailed examination of stents), costing in excess of £165,000 and complete refurbishment of the Roof Garden and spent some £60,000 on a major refurbishment of Ward L16.

Take Heart funds are raised in many ways - through donations - events - sponsorship, and bequests, mainly through its thousands of members and supporters.

We would love you to become a member of Take Heart. As a member, you will receive our newsletter about five times a year and if you wish to take part in anything, this is absolutely at your choice. Please note that you will never be bombarded with follow-up mail. You can join by going to our web site www.takeheart.net or picking up a form from any ward reception area.

Use your SmartPhone to visit our website > > >



Colin Pullan, MBE
Chairman, Take Heart.

For more information contact:

Take Heart, 'F' Floor, Jubilee Building, Leeds General Infirmary, Leeds LS1 3EX.

Tel: 0113 392 2888. Fax: 0113 392 5222

Email: admin@takeheart.net Web: www.takeheart.net



Registered Charity No. 1002063

Raising funds exclusively for the
Yorkshire Heart Centre
at Leeds General Infirmary,
St James's Hospital
and its units within the
Leeds Teaching Hospitals NHS Trust

© This booklet is copyright.

Further information regarding this booklet and its reproduction can be obtained from:
Cardiac Rehabilitation Services, 'F' Floor, Jubilee Wing, Leeds General Infirmary, Leeds LS1 3EX.
Tel: 0113 392 8110 or 0113 392 5639