

Quick Guide To Managing Heart Failure



Allina Health



Introduction

You are being treated for heart failure. The information in this quick guide will help you better understand heart failure.

This guide also includes things that you and your health care team can do together to help you feel better.

The goal of your treatment is to make you feel better and make you live longer.

By following your lifestyle and medicine plan, your quality of life should improve. Your heart may even work better.

Heart Failure

Heart failure means that your heart is not working correctly. The main job of your heart is to pump blood to your body. It is like a pump that pumps water out of a pool. If the pump is weak, not all of the water can be removed. Some of the water stays in the pool.

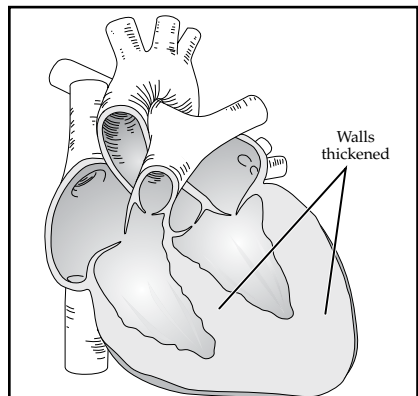
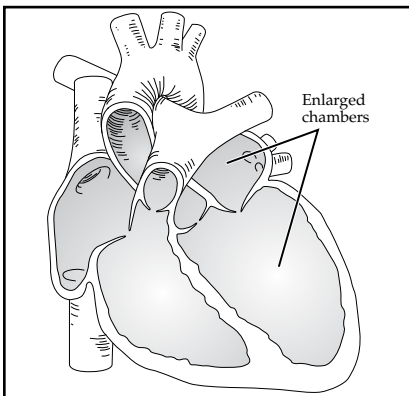
When your heart is weak, it can't pump the blood as well as it should. Parts of your body can hold extra fluid that isn't being moved very well by your heart.

Fluid build-up in your lungs can cause shortness of breath when you walk, go up stairs or lie down. Fluid build-up in your stomach can cause upset stomach after eating, bloating or swelling.

There are two types of heart failure:

- your heart can't fill up with as much as it should
- your heart can't squeeze out as much blood as it should.

In both cases, your heart isn't pumping enough oxygen-rich blood, and fluid is backing up in your lungs and stomach.



Illustrations © Allina Health System

Heart failure can be caused by enlarged chambers (left) or thickened walls (right).

Causes of heart failure

There are a lot of causes of heart failure. Some of the common causes are:

- coronary artery disease (Tobacco use is a risk for coronary artery disease.)
- heart attack
- heart valve problems
- high blood pressure
- kidney failure
- irregular heartbeat
- viral infections (that attack the heart)
- chemotherapy and radiation therapy (to treat cancer)
- pregnancy-related (rare condition that can occur in the third trimester of pregnancy or the first few months after giving birth)
- alcohol use (in large amounts)
- street drug use (such as cocaine or heroin)
- genetic (runs in families)
- obesity (being overweight)
- diabetes.

Treating Heart Failure

You and your health care team will create a treatment plan together. Treating heart failure is done to:

- keep the amount of fluid in your body at a level that your heart can handle
- start or increase medicines that help your heart pump better.

The goal of treatment is to make you feel better and live longer. Your treatment plan may include:

- taking medicines
- eating healthful foods
- getting regular exercise
- reducing your stress.

By following your treatment plan, it is possible that you can have a good quality of life for many years!

Maintain a healthy weight

Each person has a different amount of fluid their heart can handle. In general, most patients have too much fluid and need to lose that fluid weight.

Your health care provider will recommend a healthy weight for you. If you do not lose the fluid:

- you will not feel better
- your medicines won't work as well.

Find Your 'Dry Weight'

Your "dry" weight is your goal weight. This is how much you weigh when you do not have extra fluid (water) build-up in your body.

Weigh Yourself Every Morning

To maintain the right amount of fluid in your body, you need to weigh yourself each morning.

- Weigh yourself without clothes.
- Weigh yourself after you go to the bathroom and before you eat or drink anything.

- Use the same scale.
- Write down your weight in the Worksheets chapter of your “Heart Failure” book.
- You have fluid weight if you gain:
 - 3 pounds in 1 day
 - or
 - 5 pounds in 1 week.

To lose the extra fluid weight, follow your health care provider’s directions.

Watch How Much You Drink

Do not drink more than 2 liters of liquids each day. This includes water, milk, tea, coffee, soda, ice cream and soup.

Remember: you need more fluid coming out each day than what goes in. To maintain your weight, the amount of fluid going in each day has to equal what is coming out.

Limit How Much Salt You Eat

Limit your sodium (salt) to 1,500 to 2,000 milligrams (mg) each day.

- Sodium causes your body to retain (keep) water.
- If you eat more than 2,000 mg a day, your water pills won’t work right or maybe not at all.

Remember: “low salt” does not mean “no salt.” Your heart needs salt to work right. Without any salt, you also will not feel well.

Take Your Medicines as Directed

There are five types of medicines that work to either improve heart failure or your quality of life.

The goal is for you to be on more than two of them at the highest possible doses. The higher dose you can take, the more likely your heart failure will get better.

- **angiotensin receptor blockers (ARBs):** They relax your blood vessels so your heart pumps easier. You would be prescribed this if you cannot take an ACE inhibitor. Examples are losartan (Cozaar[®]), valsartan (Diovan[®]) and candesartan (Atacand[®]).
- **beta blockers:** They can improve how your heart works. Examples are carvedilol (Coreg[®]), metoprolol (Lopressor[®], Toprol XL[®]), bisoprolol (Zebeta[®]).
- **angiotensin converting enzyme (ACE) inhibitors:** They allow your heart to pump easier. Examples enalapril (Vasotec[®]), captopril (Capoten[®]), lisinopril (Zestril[®] and Prinivil[®]), quinipril (Accupril[®]) ramipril (Altace[®]). If you can't take ACE inhibitors, you will take an ARB.
- **hydralazine and nitrates:** Together, they relax your blood vessels and decrease how hard your heart has to work to pump blood. Examples are hydralazine (Apresoline[®]), isosorbide dinitrate (Isordil[®]), isosorbide mononitrate (IMDUR[®]) or hydralazine/isosorbide dinitrate combination tablet (Bidil[®]).

You may take these if you are already taking the highest doses of beta blockers and ACE inhibitors, or if you can't take ACE inhibitors or ARBs.

- **aldosterone antagonists:** They block the effects of the stress hormone aldosterone. When your body makes too much aldosterone, it causes your kidneys keep more sodium and water. Examples are spironolactone (Aldactone[®]), eplerenone (Inspra[®]).

Get Regular Exercise

Exercise is good for heart failure. The more you exercise, the better your muscles get at pulling the oxygen out of your blood. This means your heart will not have to work as hard.

Push yourself and do a little more walking each day. Your goal is to walk at least 30 minutes each day.

Cardiac rehab can improve your quality of life. Talk with your health care provider for more information.

Do Not Use Tobacco

You can help your heart by living a healthy lifestyle.

People who smoke cigarettes are 2 to 4 times more likely to develop heart disease than people who do not smoke. They are at an increased risk for heart attack, stroke, circulatory problems, cancer and lung disorders.

Did You Know

Smokeless tobacco contains *a lot* of sugar. This can make it harder to control your glucose levels.

Nicotine has effects like both caffeine (“upper”) and alcohol (“downer”).

What’s in tobacco

Cigarette smoke contains more than 7,000 chemicals. More than 70 can cause cancer.

Tobacco products include cigarettes, electronic nicotine delivery systems (ENDS, includes e-cigarettes), cigars, smokeless tobacco (dip or chew), hookahs, pipes, roll-your-own, and oral nicotine products.

Using tobacco exposes your body to chemicals such as:

- benzene (fuel additive)
- formaldehyde (embalming fluid)
- cyanide and arsenic (poisons)

- methanol (wood alcohol)
- acetylene (fuel)
- ammonia (cleaning fluid)
- acetone (nail polish remover)
- carbon monoxide (poisonous gas).

What tobacco does to your heart

Tobacco use is especially dangerous to your blood vessels and arteries. It can cause atherosclerosis, a build-up of plaque (fatty substances found in your blood). Over time, the plaque hardens and narrows your blood vessels and arteries.

Smoking also makes the blood vessels and arteries sticky. This leads to “obstructions” in blood flow, meaning that your blood cannot flow easily. The side effects of using tobacco can result in needing stents, coronary artery bypass surgery or both to keep your blood vessels and arteries open. It can also lead to heart attack or stroke.

Tobacco use:

- causes heart disease and stroke
- increases your heart rate
- increases your blood pressure
- lowers your good (HDL) cholesterol
- can cause irregular heart beats
- makes your heart work harder (adding stress to scarred or weakened blood vessels and arteries)
- can interfere with how well your heart medicines work
- causes heartburn and peptic ulcers
- can delay healing from surgery.

A damaged heart has to try to cope with the effects of tobacco. Quitting smoking and avoiding secondhand smoke can help reverse heart and blood vessel damage and reduce your heart disease risk.

What secondhand smoke does to your body

Secondhand smoke is a mixture of smoke coming from the burning tips of cigarettes, pipes and cigars and smoke exhaled by someone who is smoking.

Anyone around secondhand smoke breathes in the chemicals from the tobacco smoke. Secondhand smoke causes death and disease in people who do not smoke.

No amount of secondhand smoke is safe. The only way to protect your family from secondhand smoke is to live in a smoke-free environment.

How your body heals after quitting smoking

If you smoke, your goal is to quit. The benefits of quitting happen right away and last for many years.

- **8 hours:** The carbon monoxide level in your blood drops to normal. The oxygen level in your blood increases to normal.
- **24 hours:** Your chance of a heart attack decreases.
- **48 hours:** Nerve endings start to grow again. Your senses of smell and taste improve.
- **2 weeks:** Your circulation improves and your lung function increases.
- **1 to 9 months:** Your cough, stuffy nose, and shortness of breath decrease. Your energy level increases.
- **1 year:** Your chance of heart disease is cut in half.

- **5 years:** Your chance of a stroke is the same as a nonsmoker. Your chance of dying from lung cancer is cut in half.
- **5 to 10 years:** Normal cells replace pre-cancerous cells.
- **10 years:** Your risk of cancer, stroke, and heart disease is close to the same of someone who has never used tobacco.
(Source: World Health Organization)

Did You Know?

In 1 year of quitting smoking, your risk of heart disease is reduced by more than half. Quitting also reduces the risk of a second heart attack if you've already had one.

(Source: National Institutes of Health)

Quitting Tobacco Use

Quitting may be hard but it is not impossible. To get help quitting, talk with a member of your health care team.

Preparing to quit

- Instead of looking at quitting as success or failure, remember that every effort to quit is another practice at living your life without tobacco.
- The good news is there are many ways to quit. It's important to choose methods that appeal to you.
- Talk with your health care provider about medicines that may help you quit tobacco.
- Track your triggers to get a better idea of what situations, emotions or both make you want to use tobacco.
- Talk with your family, friends or coworkers about how to support you while you quit. Be specific. See if others would like to quit with you.
- Plan your reward for each day you don't smoke. Keep them easy, and affordable. And above all, do them!

Actually quitting

- Make your home and vehicle a tobacco-free zone. Give yourself a “safe place.”
- Change your environment to help reduce cravings.
 - Get rid of all cigarettes and chewing tobacco.
 - Throw away your ashtrays and lighters.
 - If you’re having withdrawal symptoms or cravings, try to avoid smoke-filled places and people who use tobacco.
- Make a plan for situations that trigger you to use tobacco.
- Think positively. Believe you can quit. Tell yourself: “I can do this!”
- Get enough rest.
- Take it one day at a time. Any step you take without tobacco is going to help you. Small steps are better than nothing!
- Remember: most cravings last only 3 to 5 minutes ... so wait it out! The craving will go away whether you use tobacco or not!

Quitting aids

Medicines are proven to be helpful and increase your chance of long-term success.

Talk with your doctor about which way(s) to quit may help you the most.

- Over-the-counter products include nicotine gum, nicotine lozenge and the nicotine patch.
- Prescription products include Zyban[®], nicotine nasal spray, nicotine inhaler.

Resources for quitting

Allina Health (if you had a recent hospital stay)

- Tobacco Intervention Program at Abbott Northwestern Hospital
— 612-863-1648
- Tobacco Intervention Program at Mercy Hospital
— 763-236-8008
- Tobacco Intervention Program at River Falls Area Hospital
— 715-307-6075
- Tobacco Intervention Services at Allina Health United Hospital – Hastings Regina Campus
— 715-307-6075
- *United Hospital Lung and Sleep Clinic Tobacco Cessation Program
— 651-726-6200
- *Penny George™ Institute for Health and Healing (LiveWell Center) tobacco intervention coaching
— 612-863-5178

Other

- Quit Partner
— 1-800-QUIT-NOW (1-800-784-8669) or quitpartnermn.com
— American Indian: 1-833-9AI-QUIT or aiquit.com
— Spanish: 1-855-DEJELO-YA (1-855-335-3569) or quitpartnermn.com/es
— asiansmokersquitline.org

***There may be a cost to you. Check with your insurance provider.**

- online tobacco cessation support
 - smokefree.gov
- American Lung Association/Tobacco Quit Line
 - 651-227-8014 or 1-800-586-4872
- *Mayo Clinic Nicotine Dependence Center’s Residential Treatment Program
 - 1-800-344-5984 or 1-507-266-1930
- financial aid Nicotrol® inhaler
 - 1-844-989-PATH (7284)
 - pfizerrxpathways.com
- Plant Extracts aromatherapy
 - 1-877-999-4236
 - plantextractsinc.com

What Else You Can Do

There are a few other things you can do to help make your heart healthier:

- Do not drink alcohol.
- Keep all of your clinic and lab appointments.
- Call your health care provider if your weight goes up or if you have any new symptoms.

***There may be a cost to you. Check with your insurance provider.**



Notes or Questions



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