Heart Talk: Living with Heart Failure

Education for Patients, Families and Caregivers

Bring this journal to all provider appointments
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Keeping Your Heart Failure Journal

This book is designed to help you learn to live well with heart failure – this may sound scary, but it doesn’t mean your heart has failed. We want you to learn about your body, the disease, and how to take care of your body.

You can take control over heart failure by eating healthy, exercising, keeping your appointments, and taking your medications correctly. If you do so, you should be able to lead an active and satisfying life!

This booklet provides basic information on heart failure. It will help you:

❤ Understand how to care for yourself.
❤ Learn how to actively work with your provider and nurse to feel better.
❤ Learn how to follow your treatment plan.

### Important Phone Numbers

❤ Cardiologist/Heart Failure Team 
❤ Primary Care Provider 
❤ Case Manager 
❤ Other specialist 
❤ Home Health Agency 
❤ Pharmacy 
❤ Transitional Care Nurse 
❤ Other 
❤ Other

If you have questions about transportation to your Provider’s appointment, speak with:

❤ Bridges and Beyond – 802.747.3710
❤ One to One – 802.775.4318
❤ Medicaid – 802.747.3502
What is Heart Failure?

Your heart is a muscle that pumps blood around your body. Heart failure is a condition where your heart is unable (not strong enough) to pump enough blood around your body to meet the needs of your body. This can lead to a backup of fluid in your lungs and/or your legs and abdomen.

Symptoms of This Are:

❤ feeling short of breath

❤ tiredness and unable to perform daily activities

❤ swelling in your legs, feet and/or abdomen

❤ changes in weight

In managing your heart failure, it is very important to be aware of your symptoms and how they change and why they change.

Types of Heart Failure

Diastolic

Heart Can’t Fill With Enough Blood

Systolic

Heart Can’t Pump Enough Blood

Diastolic Systolic

Heart Can’t Fill With Enough Blood Heart Can’t Pump Enough Blood

Stiff and Thick Chambers

Stretched and Thin Chambers
Can Heart Failure Be Treated?

YES!

Heart Failure Can Be Treated With:

- Medications (*pills*)
- Eating Less Salt
- Weighing Yourself Every Day
- Knowing the Heart Failure Zones

What YOU Can Do!

YOU have an important part in keeping yourself feeling good and out of the hospital.

People with heart failure can live happy lives for many years by following these 6 important steps:

1. Take the medications as prescribed by your provider.
2. Eat less salt.
3. Weigh yourself every day and know the Heart Failure Zones.
4. Go to ALL your provider appointments.
5. Exercise and be active.
6. Avoid alcohol and limit caffeine and do not use tobacco.

Each of these steps is further explained in this booklet. Keep reading!
Step 1: Take Your Medications

It is important to take your medications as prescribed by your provider. Do not stop or start medications without talking to your Heart Failure Team.

Your medicines may change after each provider appointment or when you are in the hospital.

❤️ It can be confusing, so keeping a medication list is very important. Be sure to share this list with all of your providers and bring it to all of your appointments.

❤️ Bring this journal and a pen and paper with you to take any notes or write down any questions you may have.

Patients who take their medicines as prescribed by their provider live longer, feel better, and spend less time in the hospital.

Tip:
- Remember to tell all of your providers about all your medicines, vitamins, and other medications you may get without a prescription at the drug store.
Types of Drugs that are Used in Treating Heart Failure

**Diuretics (Water Pill)**

These medications help your body make more urine and reduces the amount of fluid that can accumulate in your legs, feet, abdomen, and lungs. Many diuretics can cause a loss of potassium in the urine. If you are on this type of medication you might need a potassium supplement.

- Lasix® (furosemide)
- Demadex® (torsemide)
- Bumex® (bumetanide)

**Aldosterone antagonist (Water Pill)**

These medications are another type of water pill that work in a different way but also keep fluid from accumulating. These medications are “potassium sparing” and if you are on one of these diuretics you need to avoid salt substitutes, like NoSalt.

- Aldactone® (spironolactone)
- Inspra® (eplerenone)

**Ace Inhibitors**

These medications relax your blood vessels and make them wider which make your heart’s work load easier and also lowers your blood pressure.

- Vasotec® (enalapril)
- Capoten® (captopril)
- Zestril® (lisinopril)

**ARB’s (Angiotensin Receptor Blockers)**

These medications relax your blood vessels and make them wider which make your heart’s workload easier and also lowers your blood pressure.

- Cozaar® (losartan)
- Diovan® (valsartan)
Types of Drugs that are Used in Treating Heart Failure

Entresto (Combination Pill)

This medication may help ease the workload on your heart by slowing your heart rate down and by lowering your blood pressure.

Beta Blockers

These medications may help ease the workload on your heart by slowing your heart rate down and by lowering your blood pressure.

Digoxin

This medication may improve how well your heart pumps your blood by giving it that extra squeeze to improve blood flow and may improve symptoms of heart failure.
Step 2: Eat Less Salt

Salt is also called “SODIUM” and is found in most foods you eat.

Why do you need to limit the salt (sodium) in your diet?

♥ Salt acts like a sponge and makes your body hold onto water.
   Eating too much salt can cause you to gain weight, make your legs
   swell and cause fluid to go to your lungs, making it harder to breathe.

How much salt (sodium) can you have each day?

♥ Your Heart Failure Team recommends that you eat less than
2000 mg of salt each day. You can do this by taking the salt shaker
off the table and watching which kinds of food you eat.

Remember 1 Teaspoon Salt = 2300 mg Sodium

Tip:

- Sea salt is still 99.9% sodium chloride (same ingredient
  in regular table salt that makes you retain fluid). Despite
  many claims, it is not good for you!
Reading A Nutrition Label
Sodium = Salt

Here is an example of a nutrition label. Always check to see how many servings are in the container. If you eat a portion larger than the serving size, you end up eating more salt than is listed on the label.

Food Labeling Definitions

<table>
<thead>
<tr>
<th>Terms</th>
<th>Sodium Per Serving</th>
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<tbody>
<tr>
<td>Sodium (salt) free</td>
<td>Less than 5 mg</td>
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<tr>
<td>Very low sodium</td>
<td>35 mg or less</td>
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<tr>
<td>Low sodium</td>
<td>140 mg or less</td>
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<tr>
<td>Reduced sodium</td>
<td>At least 25% reduction of sodium</td>
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<tr>
<td>Unsalted</td>
<td>No salt added during processing</td>
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</tbody>
</table>

Tip:
- Avoid salt substitutes with potassium unless you check with your provider.
Foods High in Salt (Sodium)

These foods should be avoided or limited:

- Salt
- Pickles & Olives
- Pretzels
- Hot Dogs
- Canned Soups & Bullion Cubes
- Crackers
- Popcorn
- Ham & Bacon
- Cheese
- Potato Chips
- Pizza
- Chinese Food & Soy Sauce
- Frozen Dinners
- Sausage & Kielbasa
- Canned Vegetables (low salt okay)
- Deli Meats (Salami, Bologna, Corned Beef, Liverwurst)
- Salad Dressing
- Ketchup
- Pasta Sauce
- French Fries

Limit Sodium Intake to 2000 mg a Day
Fast Foods High in Salt (Sodium)

**Applebee’s®:**
- 1 Serving Size of Boneless Chicken Wings with Sauce, 2300 mg
- 1 Serving Sweet Potato Fries, 1020 mg
- Four-Cheese Mac & Cheese with Honey Pepper Chicken Tenders, 3490 mg

**Burger King®:**
- Whopper with cheese, 1450 mg
- Small Onion Rings, 210 mg

**Denny’s®:**
- Grand Slam, 1570 mg
- Build-Your-Own Veggie Burger, 1720 mg

**Kentucky Fried Chicken®:**
- Original Recipe (1 piece), 1190 mg
- Side of Mashed Potatoes & Gravy, 500 mg
- Side of Coleslaw, 180 mg
- 1 Biscuit, 540 mg
- Side of Macaroni & Cheese, 830 mg

**McDonald’s®:**
- Big Mac, 1040 mg
- Quarter Pounder with cheese, 1190 mg
- Filet O’ Fish, 640 mg
- Small Fries, 160 mg

**Wendy’s®:**
- Chili, 800 mg
- Baconator Double, 2020 mg
- Small Fries, 290 mg

**Tip:**
- Avoid fast foods like pizza, burgers, fried foods, and Chinese food.
Drink the Right Amount of Fluids

Most people with heart failure can drink normal amounts of fluid. Do not restrict your fluids unless your provider or Heart Failure Team recommends that you do.

By staying away from salt and watching your fluid intake in your diet, you can:

- Live longer
- Feel better
- Spend less time in the hospital

If you are on fluid restriction:

- Take an empty container and mark the amount of fluid prescribed for the day. Each time you drink any kind of fluid, pour the same amount of water that you drank back into the empty container. This will help you visualize how much you drink in a day.
Sodium Tracker

The maximum amount of sodium you should eat per day is 2000 mg.

Write down what you eat and how much sodium it has – then add up the total for the day. This will help you to know when you are close to your sodium limit. Remember to include drinks.

<table>
<thead>
<tr>
<th>Day of week</th>
<th>Food Description</th>
<th>Sodium amount in mg</th>
<th>Total for Day</th>
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Step 3: Weigh Yourself

Remember to:

❤️ Weigh yourself at the same time every day
❤️ After urinating and before having anything to eat or drink
❤️ Wear the same amount of clothing
❤️ Use the same scale on a hard surface

Tell Your Heart Failure Team

When you gain

❤️ 3 pounds in one day or
❤️ 5 pounds in one week

Your Dry Weight = __________________

Tip:

▪ Be aware of what your “dry weight” is – your weight without extra fluid. Ask your heart failure provider to help you determine that number.
▪ As your condition improves, your dry weight may change.
Monitor Your Symptoms
How Do You Feel?

Keep These Things in Mind:

♥ When your body holds extra fluid (water), your weight goes up.
♥ Weight gain from fluid can start up to two weeks before you feel other symptoms.

Weigh Yourself Every Day.

Reminders:

♥ Keep track of your weight using the Heart Failure Zones on next page.
♥ Bring the Heart Failure Journal to ALL of your provider (PCP) appointments.
# Heart Failure Zones

**Use These Zones to Help Manage Your Heart Failure.**

<table>
<thead>
<tr>
<th>Everyday</th>
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| • Weigh yourself in the morning before breakfast, write down and compare to yesterday’s weight.  
• Take your medicine as prescribed.  
• Check for swelling in your feet, ankles, legs and stomach.  
• Eat low-salt food. This is very important.  
• Balance activity and rest periods. |  |

<table>
<thead>
<tr>
<th>Symptoms you have...</th>
<th>What to do...</th>
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</table>
| **Green Zone:** Goal | • Keep up the good work!!  
• Take your medications  
• Eat less salt  
• Weigh yourself every day |
| • No shortness of breath = breathing easy  
• No weight change overnight nor over the last week  
• No swelling of feet, ankles, legs or abdomen  
• No chest pain |  |
| **Yellow Zone:** Warning Signs | **TAKE ACTION TODAY**  
• Weight gain of 3 pounds in 1 day or 5 pounds or more in one week  
• More shortness of breath – breathing harder  
• Harder to breathe lying down – the need to sleep in a chair  
• More swelling in your feet, ankles, legs or abdomen  
• Feeling more tired  
• New or unusual coughing  
• Dizziness |  |
| • You might need to take extra medication.  
• Call your Heart Failure Team to find out what you should do:  
Phone#:  
____________________  
Provider’s Name:  
____________________ |  |
| **Red Zone:** Emergency | **TAKE ACTION NOW**  
• Hard time breathing  
• Struggling to breathe even at rest  
• Chest pain or discomfort  
• Have a fast or uneven heart rate |  |
| • Call 911 for an ambulance right away. |  |
Are You in the Correct Heart Failure Zone?

Use this chart \textit{(or a calendar)} to keep track of your weight and see which zone you are in each day. If you are in \textcolor{red}{Red} or \textcolor{orange}{Yellow} Zone, call \underline{____________________} Immediately!

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<th>Week # _______</th>
<th>Weight</th>
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Step 4: Go to Your Provider’s Appointment

♥ Do not be afraid to talk to your provider or Heart Failure Team about any questions or concerns you may have.

♥ Always ask someone if you don’t understand something, or if you feel something is “just not right.”

♥ Your providers and Heart Failure Team are there to help and support you.

Tips For Your Appointments

♥ GO TO ALL OF YOUR SCHEDULED APPOINTMENTS

♥ Bring a friend or family member

♥ Bring all medications or a medication list to all provider appointments

♥ Bring this journal and a pen and paper with you to take any notes or write down any questions you may have

♥ Stay up-to-date on your flu and pneumonia vaccinations

Heart failure can be managed.
Your provider needs to see you often to keep you well.
Step 5: Exercising and Keeping Active

- In general, exercising, having sex and driving are OK.
- Make sure to talk to your provider about what kind of exercise is safe or good for you.

Rest to Reduce Your Symptoms:

- Frequent short rests to conserve your energy are important in managing your symptoms.
- Simplify activities so they require less energy
- Decide what activities are important to you, and what could be done by someone else

Tip:

- Gradually increase your exercise sessions based on your endurance and symptoms.
- Find an activity you enjoy such as walking, cycling, swimming or yoga, or mix it up.
- Try to get some low-level aerobic exercise every day, even if just for a few minutes. Frequency and duration of activity is more important than intensity.
Step 6: Avoid Alcohol & Limit Caffeine
Do NOT Use Tobacco

Alcohol:
Alcohol can make your heart failure worse. It can also affect your medicines.

Caffeine:
Caffeine is usually OK in moderation (always check with your provider). If allowed, have no more than:

♥ 1 or 2 cups per day

Tobacco Use:
♥ If you smoke (cigarettes or cigars), please STOP!

• It is bad for anyone, but especially for those with heart failure
• It makes the heart work harder
• It can lead to heart attacks

♥ Ask your provider, Heart Failure Team or nurse about help to quit smoking
Tobacco Cessation Workshops

Regional Coordinator – Sarah Cosgrove, Respiratory Therapist, Master Level Tobacco Treatment Specialist:
802.747.3768, desk line 802.776.5508

Groups Plus Nicotine Replacement Therapy Products
(patches, gum or lozenges double your chances of a successful long term quit)

We Offer the Following:

Ongoing Groups – Drop in at Any Point Throughout the Month
1. Mondays 4:30-5:30pm Physiatry conference room at Rutland Regional Medical Center, 160 Allen St, Rutland, VT
2. Tuesdays 11am-12noon Rutland Heart Center, 12 Commons St, Rutland, VT
3. Tuesdays 5-6pm Castleton Community Center, 2108 Main Street, Castleton, VT

Weekly Group – In Your Workplace or Provider’s Office
(series of four – 1 hour sessions over four weeks; minimum of 5 participants signed up to hold group)
- Free eight weeks’ worth of Nicotine replacement products (patches, gum & lozenges) with participation in groups
- Information about other medication options
- Ongoing support after you’ve quit or if you have a “slip”
- Referrals & links to free 802 Quits Vermont Tobacco Cessation resources
  1. Quit Line phone counseling, 1-800-QUIT-NOW (784-8669)
  2. Quit Online services – http://802quits.org/online-quit-help/

How do the Tobacco Cessation Groups Work?

Your Tobacco Cessation specialist will help you decide on a quit plan
- Groups or one to one counseling with a tobacco cessation specialist
- Which quit aides will be best for you- nicotine replacement therapy patches, gum or lozenges or maybe none
- Review the first steps in getting ready to quit
  - Understanding nicotine addiction
  - Identifying triggers and forming small step action plans to avoid triggers
  - Management of nicotine withdrawal symptoms
  - Proper use of nicotine replacement therapy products
  - Stress reduction and relaxation skills
  - Identifying positive support systems
- Providing tools to distract you during a craving such as ways to keep busy, tools such as stress balls, straws, mints, lollipops and toothpicks
- Providing follow up through group programs, or by phone, to provide support to help problem solve and keep you on track at 3, 6 and 12 months after quit date
Make These Steps a Permanent Part of Your Life

Following these steps your provider or Heart Failure Team recommends will help you stay out of the hospital. You can stay active and enjoy life by following their advice.

1. Take the medications prescribed by your provider and Heart Failure Team
2. Eat less salt
3. Weigh yourself every day and know the Heart Failure Zones
4. Go to ALL of your provider appointments
5. Get exercise as directed
6. Avoid alcohol and limit caffeine and do not use tobacco

Patients who follow these steps live longer, feel better, and spend less time in the hospital.
Preparing an Advance Directive

Talk with your family and your healthcare team about your feelings and care wishes.

A legal document called an **Advanced Directive** or **Living Will** can help your family and medical team in medical emergencies if you are unable to make known your wishes. Everyone should have Advanced Directives.

An Advanced Directive can include:

- A “medical durable power of attorney” *(someone you name to make medical decisions when you cannot)*
- Cardiopulmonary (CPR) instructions or Do Not Resuscitate (DNR)

Your Advance Directives will be kept in your medical record. Advance Directives can be changed or revoked at any time, should your wishes change.

If you do not have Advance Directives, but would like to draw some up during your hospital stay, a specially trained staff member from our Community Health Team can help you. They can also assist you in making changes to an existing document.

If you have questions or are ready to complete your advance directive, make an appointment today with one of our trained volunteers by calling 802.776.5502.
Thank You

Your healthcare team would like to say “Thanks to each of you for taking the time to read this material.”

By following the instructions in this book, we believe you will be able to live a healthier and better life. It is our desire that you use this book as a guide to help you learn more about your disease or disorder, medications, diet and benefits of exercise.
This journal was designed with the collaboration of these community partners: