



Lilavati Hospital and Research Centre

More than Healthcare, Human Care



HEART FAILURE CLINIC

PATIENT INFORMATION
BOOKLET

For appointments contact: 82191280422



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CONTACT INFORMATION

Please write down Important contact information in the spaces below:

This book belongs to:

Doctor treating me for heart failure

Name: _____

Tel: _____

Primary Doctor: _____

My current weight is: _____

Allergies/Reactions: _____

Diagnosis: _____

My Surgeries/intervention procedures: _____

The booklet you are receiving has some general information you may find helpful in dealing with your condition, or your loved one's condition.

It is customized to include information on risk factors that may be present and medications you or your family member may be taking or will take at home. Your primary healthcare provider or doctor can answer any questions you may have. Please ask one of the Cardiac Rehabilitation team members if you wish to receive additional information which may not have been addressed in this manual.

Many people with heart failure lead normal, active lives because they take care of themselves by improving their lifestyle and putting into practice some guidelines.

This booklet is designed to help you learn to live well with heart failure. 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, showing up for your appointments and taking your medicines correctly and regularly. 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 doctor and nurse to feel better

Learn how to follow your treatment plan

HEART FAILURE CLINIC

The mission of the Heart Failure (HF) Clinic is:

To provide appropriate:

- Comprehensive, high-quality care to limit disability
- Improve the quality of life of patients with HF through to provide outpatient management in outpatient HF clinics.

Heart failure, also called **Congestive Heart Failure (CHF)**, means your heart does not pump blood as well as it should. This does not mean your heart has stopped working but that it is not as strong as it used to be and fluid builds up in the lungs and other parts of your body. This can cause shortness of breath, swelling in the legs, feet and stomach.

Heart failure starts slowly and can get worse over time. In most cases Heart Failure persists for life. Medicines, regular follow ups will reduce chances of worsening of symptoms.

WHAT CAN CAUSE HEART FAILURE?



INDICATORS OF HEART FAILURE

- Trouble breathing that is worse during exercise or when lying down
- Having a dry cough that does not go away
- Swelling in your ankles, legs and stomach
- Coughing up white frothy sputum
- Feeling restless, tired or weak
- Feeling full quickly when you eat or having a loss of appetite
- Needing 2 or more pillows at night or having to sleep in the chair
- Gaining weight excessively
- Inability to speak complete sentence in one breath

LVEF MEANS EJECTION FRACTION

Your LVEF is the percentage of blood that pumps out of the heart during each beat. It's also a measurement used to see how well your heart is functioning. A low EF is not always associated with symptoms.

Your EF is an important health-related number.

A low EF number can occur if your heart muscle has been damaged as a result of:

- Heart attack
- Long-term, uncontrolled blood pressure
- Heart valve problems
- Heart failure

However, HF can occur in patients with normal LVEF.

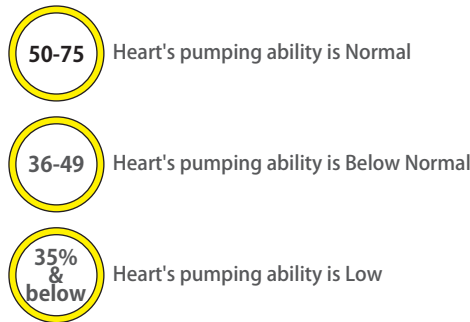


WHAT DOES YOUR EF NUMBER MEAN?

What can you do?

- Ask your doctor if your Echo should be performed.
- If your EF has been measured, ask for your EF number.
- If you have a low EF number (35% and below) ask your doctor if you should see a heart failure specialist.

HEART PUMPING



THE TREATMENT OF HEART FAILURE

The treatment of heart failure typically involves several steps. The steps are listed here and explained later in this booklet

- Weigh yourself daily
- Take your medications exactly as directed
- Follow a low sodium diet
- Restriction on drinking fluids
- Avoid alcohol consumption
- Maintain a normal body weight
- Get regular exercise as advised by your therapist
- Know the warning signs of heart failure
- Stop Smoking
- Keep follow-up appointments.



Patients with heart failure must be closely monitored so it is important to schedule and keep follow-up appointments with your physician or nurse practitioner and rehab specialist.

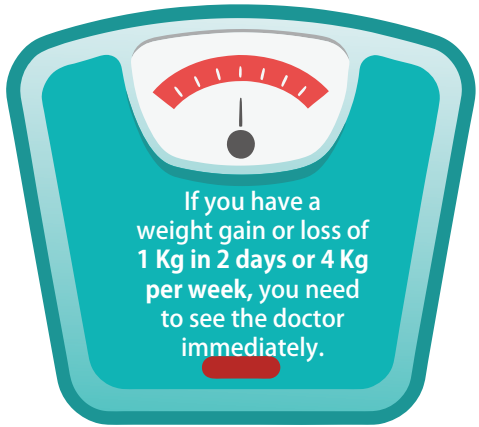
These appointments are important so as your physician or nurse practitioner can closely monitor your condition and the effects of the prescribed medications on you. By seeing your health professional you may be able to prevent repeated hospitalisation

WEIGH YOURSELF DAILY

- At the same time every day (preferably first thing in the morning)
- Without clothes or in lightweight clothing
- After you urinate
- Before you eat breakfast

ALSO, PLEASE REMEMBER:

Write your weight down every day for your records & carry the record with you when you visit your doctor





MEDICATION

**AVOID
PAIN
KILLERS
LIKE**

- IBUPROFEN
- DICLOFENAC
- ACECLOFENAC
- PIROXICAM
- NAPROXEN
- NIMESULIDE
- CELECOXIB

These drugs may have harmful effects on patients with heart failure due to renal damage, increase in sodium water retention, elevated BP.

DIURETICS

- Common Diuretics include:
- FUROSEMIDE
 - TORSEMIDE
 - SPIRONOLACTONE EPLERENONE
 - METOLAZONE

(or combinations of above drugs) may be added to one of the above.)

These medicines reduce your body fluids and make you pass more urine. These drugs may make you feel thirsty. Please limit your fluid intake as recommended by your doctor and dietician Your doctor will need to check your kidney function (BUN and creatinine) and potassium levels intermittently.

Let your doctor know if you have severe weakness, dizziness or leg cramps. During warm weather do not stay in the sun for prolonged period of time. Being in the sun for long period can increase the chance of fainting.

Patients on spironolactone or eplerenone

Women:

Your menstrual cycle becomes irregular

Men:

You may get breast tenderness/swelling or trouble getting an erection

ACE INHIBITORS

ACE Inhibitors help to reduce load on heart, benefit heart remodeling & reduce BP. Remodeling is when your heart tries to get stronger by becoming bigger. While this sounds like a good idea, a bigger heart becomes weaker over time.

Common ACE Inhibitors include: LISINOPRIL / ENALAPRIL / RAMIPRIL / PERINDOPRIL

ACE Inhibitors have been proven to help heart failure patients reduce death risk by 20-40%.

It lowers blood pressure by relaxing your blood vessels. Let your doctor know if you develop a chronic, dry hacking cough as it might be caused by this medication and is common side effect. Get immediate medical attention if your tongue, lips, or face swell. This is a rare event called angioedema. If this does occur, it is usually within the first few doses.

Your doctor will need to check on BUN, Creatinine & Potassium level before starting these drugs & at regular intervals. Do not be alarmed by minor changes in the levels but a rise of more than 30% should be reported.

ARBs

ARB's are similar to ACE inhibitors. They are given when a patient cannot take an ACE inhibitor due to side effects

ARB'S INCLUDE:

- CANDESARTAN
- RBESARTAN
- LOSARTAN
- VALSARTAN
- OLMESARTAN
- TELMISARTAN

These drugs reduce load on heart, benefit heart remodeling & reduce BP

BETA-BLOCKERS

Beta-blockers used in heart failure include:

- CARVEDILOL
- METOPROLOL SUCCINATE
- BISOPROLOL

These drugs reduce the workload of your heart and slow your heart rate. They have been proven to increase the life span of heart failure patients



However these drugs may make you feel tired, weak or dizzy when first started. Your body usually adjusts to this over the first couple of weeks. Continue to take them as they will help you live longer.

For men:

May make it more difficult to obtain an erection.

TALK TO YOUR DOCTOR IF THIS OCCURS.

ARNI - Sacubitril - Valsartan is a new therapeutic advance in treatment of HF. It is started at low doses and gradually uptitrated to maximum tolerated doses. This drug can

1. Reduce systolic BP and hence BP should be monitored at home.
2. Alter potassium and Creatinine levels - which should be measured regularly.

SGL T2i:- These drugs were first introduced for diabetes. They are now mainstay of treatment of HF. Genital hygiene should be observed when using these drugs.

ALCOHOL

You should not drink alcohol at all. It damages heart cells and can further weaken your already-weak heart muscles

It is very important that you honestly discuss how much you have been drinking with your doctor or your clinic nurse. They can help you with tips and services to stop drinking.



Alcohol is not for people with heart failure
This includes beer or wine as well as hard liquor

DIET

- Salt (sodium) can make your body hold on to too much water and make your heart work harder.
- A moderate 2 gram (2000 mg) per day diet restriction is essential
- One teaspoon of table salt contains about 2300 mg of sodium
- High amounts of sodium are found in many canned, pickled, convenience, packaged, processed and fast foods.
- Remember, salt is an acquired taste and it can be unlearned.

Sodium is present in high quantity in all preserved or packaged foods. It can be present as Sodium Chloride [common salt, Sodium Citrate, Mono Sodium Glucamate

Eat fresh foods, Avoid Fast food, Avoid food with sauces. Most Ketchups, pickles, cheese, packaged butter, chips, farsan and aerated bottled drinks have high sodium content

