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## LIVING WITH HEART FAILURE



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## Living with Heart Failure

You have been diagnosed with heart failure, but you are not alone. There are more than 10 million Indians with heart failure.<sup>1</sup> Fortunately, with advances in treatment, you may live longer and enjoy a good quality of life. This booklet has been designed as a guide to help you understand your condition better. We hope it will help you manage your condition well and live successfully and long with heart failure.

Read on...

Please note:

This booklet should not replace and/or substitute the interactions with and advice you get from your doctor/s, and if you have any concerns about your condition, you should discuss these with your doctor/s at the earliest opportunity.

## What is Heart Failure?

The normal healthy heart is a strong, muscular pump a little larger than a fist. It pumps blood to the lungs and all body tissues. The body depends on the heart's pumping action to deliver oxygen-and nutrient-rich blood to the body's cells. When the cells are nourished properly, the body can function normally.<sup>2</sup>

Heart failure is a condition in which the heart cannot pump efficiently enough to meet the body's need for blood. Contrary to its name, heart failure does not mean the heart has failed completely<sup>3</sup>. It is a term used to describe a heart that cannot keep up with its workload due to which the body may not get the oxygen that it needs.<sup>2</sup>

Heart failure symptoms usually develop over time as heart becomes weaker and pumps less blood than the body needs. Initially the body tries to compensate in different ways which may mask the problem but does not solve it. Heart failure continues and worsens until these substitute processes no longer work. The body's compensation mechanisms help explain why some people may not become aware of their condition until years after their heart begins its decline (It's also a good reason to have a regular checkup with a doctor).<sup>2</sup>

Heart failure is called congestive heart failure when fluid builds up in various parts of the body. Heart failure usually results in an enlarged heart.<sup>4</sup>

## What happens in Heart Failure?<sup>4</sup>

- Heart does not pump enough blood
- Blood backs up in veins
- Fluid builds up in body, causing swelling in your feet, ankles and legs. This is called "edema"
- Fluid builds up in lungs. This is called "pulmonary edema"
- Body does not get enough blood, food and oxygen

## What are the signs and symptoms of Heart Failure?<sup>4</sup>

- Shortness of breath, especially when lying down or exercising
- Tired, run-down feeling
- Coughing or wheezing, especially when lying down or exercising
- Swelling in feet, ankles and legs
- Weight gain from fluid buildup
- Confusion or can't think clearly
- Needing 2 or more pillows at night or having to sleep in the chair

## What are the causes of Heart Failure?

Heart failure is more likely to happen as we age (seen on an average at around 40 years of age)<sup>1</sup>, but anyone can develop heart failure, which is a serious, long-term (chronic) condition. The vast majority of the time this is due to the heart muscle being damaged because it is getting a poor blood supply. This can happen when there has been a heart attack, or history of high blood pressure, which has affected the heart .<sup>4,5,6</sup>

### Other causes include<sup>6,7</sup>:

- A virus has affected the efficiency of your heart
- The heart's rhythm isn't normal
- Abnormality in structure of the heart which is there due to genetic reasons
- The valves in the heart are damaged
- Excessive alcohol intake
- Smoking
- Obesity
- Recreational drugs
- Some chemotherapy medication (e.g., – medicines given for cancer)
- In rarer cases, there is a form of heart failure associated with pregnancy

## How is Heart Failure diagnosed?

After evaluating clinically, the doctor will do certain tests to confirm the diagnosis. This would include the following<sup>8</sup>:



A physical examination – Weight, blood pressure, chest and lungs examined with a stethoscope



Certain blood tests – Blood examined to confirm abnormalities, if any, of heart and kidney



Chest X-ray – To find out if the heart is enlarged and if any fluid is present in the lungs



An electrocardiogram – To find out your heart rhythm, frequency of beats and if any earlier heart attacks occurred



An echocardiogram – To find out the thickness of the heart muscle and pumping capacity



An exercise stress test – To find out if blood supply is reduced in arteries and how much you can exercise



Biomarkers – A specific blood test may have been taken which measures something called natriuretic peptides (a type of hormone produced by the heart), levels of which indicate that you may have heart failure<sup>9</sup>

## What does ejection fraction mean?

The ejection fraction (EF) is an important measurement in determining how well the heart is pumping out blood and in diagnosing and tracking heart failure.

Echocardiogram measures the ejection fraction.<sup>10</sup> A normal heart's ejection fraction may be between 50 and 70. A measurement under 40 may be evidence of heart failure or an enlarged heart .<sup>10</sup>

## How is Heart Failure managed?

Heart failure caused by damage to the heart that has developed over time can't be cured. But it can be treated, quite often with strategies to improve symptoms.

## Lifestyle changes<sup>11</sup>:

- Maintaining an active lifestyle should be a goal
- Mild to moderate exercise under the guidance of the medical team is usually safe and encouraged. You may be prescribed a walking program or perhaps cardiac rehabilitation
- It is also important that you avoid cigarettes, alcohol, and recreational drugs
- Limiting salt (sodium) and fluids (water, sodas, coffee, soups, etc.) will help avoid fluid buildup. A low-salt diet is suggested for patients, often limited to 2000 mg of sodium per day

## Tips<sup>11</sup>:

- Restrict fluids to <2 liters or less per day
- Weighing daily is a guide to keeping fluid balance stable
- It is important to keep a log of weight, blood pressure and symptoms. A weight gain of 2 to 3 pounds in 1 day or 5 pounds in 1 week should be reported



## Medications:

Research has shown that certain medications, often in combination, can help prolong life and improve symptoms. It is important to take medications as prescribed.

Medications include the following <sup>7</sup>:

- Diuretics – Help keep off fluid. Also, known as water pills
- ACE Inhibitors – Reduce workload and help reduce heart remodeling. Remodeling is when the heart tries to get stronger by becoming bigger
- Beta Blockers – Reduce the work on the heart
- Aldosterone Antagonists – Help keep off fluid and reduce heart remodeling
- Digoxin – Helps strengthen the heart
- Vasodilators (hydralazine/isosorbide) – Help your blood vessels relax. This makes it easier for the heart to pump blood

It is critically important that you take your medications as directed by your doctor to optimize the benefits of these drugs in the treatment of heart failure. Medications when taken regularly have a positive effect on health and well-being. Some of the medications take a little time to get used to but it is important to persevere and generally you will adapt to them in no time. If you continue to struggle, do speak to the treating doctor.

## Tips on taking medications:

- Take medicines as directed. Do not miss medications
- Lot of medications will be prescribed. Each has a role to play
- Even if there are side effects do not stop medicines without discussing with the doctor
- Oversee one's own medication
- It can be a slow process to get to the dose of a medication that works best, have patience
- Do not take any additional medications without your doctor's advice



## A positive attitude helps

There's no question that this heart condition is serious. However, there is a lot of understanding about the condition and several effective treatments are available and in development. Where possible, try to stay positive and have a can-do attitude – this can help to play an active role in managing the disease well. Research and patient experience show that people who can adapt to their illness and take control of it, have a better quality of life.<sup>12</sup>



## Partnering with your doctor for better outcomes

It is important to try and build an honest and open relationship with your doctor. A few ways in which one could do it are<sup>6,11</sup>:

- Go prepared. Before attending an appointment with the doctor, make a note of any issues being experienced and any questions that need to be discussed.
- Don't worry about asking what one feels may be stupid questions. Do ask in case of any confusion.
- Always carry a list of medications being currently taken and a daily weight and fluid intake log chart.
- If there are certain aspects of life that are particularly important, let the doctor know so they can be taken into consideration when discussing medication and other factors.

## When to approach your doctor?

It is important to keep track of your heart failure symptoms, so that you can recognize when they are getting worse or whether you are developing new ones. You have been provided with a symptom tracker which will help you keep a note of improvement or worsening if any.

## Symptoms indicating urgent attention by a doctor<sup>13</sup>



Chest discomfort or pain that lasts more than 15 minutes that is not relieved with rest or nitroglycerin.



Fainted or passed out.



Severe, persistent shortness of breath.



Trouble sleeping due to difficulty in breathing.



Need to sleep sitting up or on more pillows than usual.



Cough up frothy or pink sputum.



Fast or irregular heartbeats, palpitations, or a "racing heart" that persists and makes you feel dizzy or lightheaded.

## Important to note:

Many people with heart failure can and do learn to manage the symptoms and live full and enjoyable lives.

