



Heart failure: basic information

If you have heart failure, it makes sense to learn as much as you can about this condition. Most cases of heart failure can be treated, but you – the patient – play an important part in making sure the treatment works. By learning about the condition, how to monitor your progress, and how to recognize problems, you can make sure your health care provider has the information needed to keep your treatment plan working at its best.

This sheet provides you with some basic information about heart failure. Other, more detailed information is available and may have been provided as well. If there is anything you don't understand about heart failure and its treatment, please ask.

What is heart failure?

First, let's clarify what heart failure is **not**. Heart failure does not mean the heart has stopped or is not doing its job. It does not mean the person with heart failure cannot lead an active life. In fact, the word "failure" is misleading. That is, a person with this condition does not have a heart that has "failed."

Rather, the medical term "heart failure" means the heart muscle's pumping action has become weaker or stiffer than normal. The heart does not pump blood as efficiently as it should. If the heart does not pump efficiently, pressure builds inside the heart chambers. This can cause pressure to build in the lungs as well, and can cause the body to retain fluid in an attempt to boost circulation.

What are the signs and symptoms of heart failure?

Symptoms vary from person to person, but may include:

- shortness of breath (especially during activity or when lying flat)
- swelling of the ankles, legs, or belly
- feeling tired or weak
- weight gain
- dry cough
- loss of appetite
- waking up during the night feeling short of breath

What causes heart failure?

Heart failure can come about from any condition that causes strain or damage to the heart. Some of the common causes are:

- *heart attack* (damage to heart muscle from lack of blood flow)
- *coronary artery disease* (plaques in the arteries that feed the heart muscle)
- *high blood pressure* (which can lead to an enlarged heart that is weaker than normal)
- *valvular heart disease* (leaking or stiffening of the valves that separate the heart's four pumping chambers)
- *diabetes* (which can be associated with high blood pressure or coronary artery disease, both of which can contribute to heart failure)
- *viral infection* (which, in rare cases, can attack and weaken the heart muscle)
- *substance abuse*: (alcohol and/or recreational drugs)

What is the treatment for heart failure?

In some cases, health care providers can aim part of the treatment toward the underlying condition that caused the heart failure. For example, high blood pressure can be treated, or abnormal heart valves may be repaired through surgery.

To treat the heart failure itself, your health care providers depend on a number of approaches, including:

Medications –A number of medications are available. All are focused on decreasing the heart’s workload and increasing its efficiency. Some boost the heart’s pumping action. Others slow and steady the heart rate so that there is less pressure in the circulation and less demand on the heart. Still other medications – known as diuretics – help the body get rid of excess fluid through urination. Make sure you understand the medications your health care provider has prescribed and how to use them. **Never** change your medication schedule without talking with your health care provider.

Diet – Most patients with heart failure need to limit the sodium, or salt, in their diet. Salt causes the body to retain fluid. Excess fluid in the body causes symptoms and increases the workload of the heart. Patients with heart failure need to limit the amount of sodium and fluid in the body in order to decrease the workload on the heart. If you have not already received information on a **sodium restricted diet**, your doctor, nurse, or dietitian can provide written materials for you.

Exercise – An exercise program may help improve the overall efficiency of your body’s most important muscle – your heart. Some patients participate in a structured cardiac exercise program that helps them improve stamina and overall fitness, decreasing some of the symptoms of heart failure. Others do exercise on their own. When you think about exercise, remember that your heart is a large muscle. You are probably already familiar



Medications for heart failure

Your medications probably fall into one or more of these categories. Ask your doctor or pharmacist for more information.

ACE inhibitors/Angiotensin receptor blockers (ARBs) reduce the amount of work your heart has to do to pump blood. They help improve symptoms, may prolong life, and lower the risk that you will have to be admitted to the hospital for your heart failure.

Diuretics help the body get rid of excess fluid. Many diuretics cause a loss of potassium in the urine. Potassium is very important in regulating the heartbeat. Your doctor may prescribe a potassium supplement to take with your diuretic.

Beta blockers reduce the amount of work your heart has to do to pump blood. They may prolong life and lower the risk that you will have to be admitted to the hospital for your heart failure. These medicines may gradually improve your heart’s functioning.

Remember, never skip your heart medication because you are feeling good! These medicines need to be taken regularly to **keep** you feeling at your best.

with programs that strengthen body muscles through exercise. Your heart muscle responds the same way. Be sure to check with your health care provider before starting any new exercise program.

Quitting smoking – If you are a smoker, it's important that you stop smoking right away. Talk with your health care provider about a smoking cessation program that is right for you.

How can I monitor my own condition?

Follow these guidelines to help your health care provider manage your heart failure. By learning the early warning signs of worsening heart failure, many serious problems can be avoided.

Watch your weight – The best way to tell if your body is retaining fluid is to weigh yourself every day. Be sure to use the same scale in the same location, and weigh yourself at the same time each day. It's best to try to weigh yourself first thing in the morning, before you get dressed, after you've gone to the bathroom, and before you've had anything to eat or drink. Use the chart provided with this sheet to record your daily weight. A weight gain of more than 3 or 4 pounds in a week, or more than 2 pounds in a 24 hour period, means you are retaining fluid, and your health care provider needs to be notified.

Manage your medications – Make sure you understand important information about all your medications, and that you always take your medication as prescribed. Some of the most common types of medication taken by patients with heart failure are listed in the box.

For each medicine you are taking, make sure you know the following information:

- the name of each medicine
- how it works
- what dose you are taking
- expected side effects
- unwanted or serious side effects that require medical attention

A chart is provided with this sheet that you can use to record information about the medicine *your* doctor has prescribed.

Watch for signs of worsening heart failure – Know the signs of heart failure, and let your health care provider know if you notice any change. Watch for:

- an increase in shortness of breath, or waking up short of breath
- weight gain
- feeling more tired
- swelling in the ankles, legs, or belly
- discomfort in the chest
- dry cough
- needing more pillows to sleep, or needing to be upright to sleep

What should I bring with me when I visit my health care provider?

Please bring the following to all of your appointments:

- an up-to-date list of your medications, or your actual prescription bottles
- the “self-management record” included with this packet, with your recorded information on your medications, any symptoms you are having, and your daily weight
- a list of any questions you may have

When should I call my health care provider?

Don’t forget that you can make a difference in controlling your heart failure. Taking prescribed medications, restricting salt in the diet, quitting smoking, and participating in an exercise program can all help you feel your best.

Remember, heart failure is a chronic condition. There will be times when it is more “in control” than others. Over time, your heart failure may get worse. For these reasons, it is critically important for you to learn to pay close attention to your body’s signals, and call your health care provider as soon as you notice a change. Watch especially for the symptoms listed in the box. With early treatment, many serious problems can be avoided.

 Always call your health care provider if you notice any of the following:

- an increase in shortness of breath, or waking up short of breath
- weight gain
- feeling more tired
- swelling in the ankles, legs, or belly
- discomfort in the chest
- dry cough
- needing more pillows to sleep or needing to sleep upright

If you have severe shortness of breath or discomfort in the chest that won’t go away, always call 911. Do not travel to the hospital by car.

Please use the “self-management record” included with this packet to record information about your medications and any symptoms you are having, and also to record your daily weight.

Please bring your “self-management record” with you to all of your appointments with your doctor, as well as a list of any questions you may have.