

CHF News: Take It To Heart



A monthly newsletter for REACT study patients

Issue #1

Welcome to the REACT Study

Welcome and thank-you for participating in the REACT study. The REACT study is designed to examine different ways of improving the use of ACE inhibitors, an important group of medicines for the treatment of CHF. REACT will also study the effects of providing different levels of teaching and support to people who are living with CHF.

Your participation will help us learn more about the management of this condition. This, in turn, may help others with CHF. In addition, you may benefit personally by learning more about CHF and the ways to manage it. As a result, you may feel better.

You have probably already received the first telephone call from your research coordinator who will call you every month to see how you are feeling and to ask you about the effects of your medication. You will also be asked about the number of physician visits, emergency room visits and hospitalizations. To help you remember these events, it is very important that you record them in your Patient Diary as they happen. You are encouraged to ask your research coordinator questions or express concerns you may have about your condition or medication. Your research coordinator is there

to help you.

Finally, here is what you can expect from the CHF News: Take It To Heart newsletter, which you will receive every month. Each issue will feature important information about diet, medication, exercise and other topics that will help you manage your condition. You can also read about other people living with CHF. There will be important tips on using your medication properly so that you achieve the greatest benefit. And be sure to try out some of the low salt recipes! We hope that you find this newsletter helpful and enjoyable reading.

Facts About CHF

Feature Article

By Dr. Kari Olson
Pharmacist and Cardiology Research Fellow, University of Alberta

You have been diagnosed with congestive heart failure, or CHF, as it is commonly referred to, and you probably have many questions about your condition. This issue of *CHF News: Take It To Heart*, the REACT study patient newsletter, will answer some of the most common ones.

What is CHF?

CHF develops when your heart cannot pump blood through the body as well as it should. Whatever the cause, the heart muscle is too weak to do its job. This results in an inadequate supply of blood and oxygen to all the body's organs.

In addition, a weak heart doesn't empty every time it contracts, so blood collects in the heart and lungs and becomes backed up in the rest of the body. This causes swelling and other characteristic symptoms of heart failure.

How common is CHF?

You are definitely not alone. The Canadian Heart and Stroke Foundation estimates that there are about 330,000 Canadians with CHF and approximately 500,000 who have heart failure but don't know it. CHF appears to be twice as common in men as in women. Also, the incidence increases with age.

What causes CHF?

There are many different causes of heart failure:

- high blood pressure (especially if left untreated for a long period of time)
- heart attack
- heart valves that do not work properly

- infections in your heart
- heavy use of alcohol over a long period of time
- certain medication

Speak with your doctor to find out what caused you to develop heart failure.

What symptoms of heart failure might I experience?

Symptoms of heart failure depend on how well your heart pumps and how well you control the factors that worsen symptoms. The most common symptoms include:

- tiredness
- weakness
- sudden weight gain due to fluid build-up
- trouble breathing, especially when physically active or lying down, and sometimes at night
- cough
- swelling in the legs and feet
- loss of appetite
- nausea
- bloating of the stomach

What kind of tests might my doctor order?

Your doctor may use a number of tests to diagnose CHF and then to evaluate your treatment. In addition to a medical exam and blood tests, your doctor may ask for:

Chest X-ray: shows the size of the heart (CHF causes it to become larger) and can be used to see if there is fluid in the lungs.

Echocardiogram (echo): is an ultrasound, showing the heart's pumping action, its size and how well the heart valves are working.

Electrocardiogram (ECG/EKG): records the electrical activity of the heart, shows how fast your heart is beating and if it is beating regularly.

MUGA Scan: measures how well your heart is working.

Stress Test: determines how well your heart works under pressure. There are different kinds of stress tests. Some require that you exercise by walking on a treadmill.

What can I do to manage my CHF symptoms?

Fortunately, there are many things that you can do to help your heart and limit the symptoms of heart failure:

- limit salt in your diet
- limit the amount of fluid you take in daily
- avoid alcohol and smoking
- get plenty of rest
- weigh yourself daily and record any changes in weight or symptoms
- exercise as recommended by your doctor
- take your medication as prescribed
- talk to your doctor or pharmacist before taking any non-prescription medicine or herbal product to ensure that they don't affect your condition or interfere with your prescribed medication

Each of these items will be reviewed in more detail in other issues of *CHF News: Take It To Heart*.

Why have I been prescribed medication?

There are numerous medications that can be used to manage congestive heart failure. Please refer to your CHF information binder for the list of those that have been prescribed for you, and feel free to ask your doctor, pharmacist, or nurse for any further information.

Generally, patients with symptoms of CHF are prescribed a diuretic (water-pill) to remove excess fluid from the lungs and body. By taking this medication, most patients find it easier to breathe and more comfortable to walk and to exercise.

Other types of medication often prescribed for CHF patients include digoxin, beta-blockers (BB) and angiotensin converting enzyme inhibitors (ACE-I). While these medications may control your symptoms, they also provide additional benefits. Digoxin can reduce the number of times you need to be admitted to hospital. Many studies have shown that beta-blockers and ACE inhibitors can also reduce the number of times a patient needs to be admitted to hospital and that they can reduce death rates. Not surprisingly, ACE inhibitors and beta-blockers are very important components in the treatment of CHF.

If you are not sure whether you are receiving treatment with digoxin, ACE inhibitors, beta-blockers or diuretics, ask your pharmacist, physician or nurse.

Where can I get more information about CHF?

Name	Phone Number	Web site
Heart and Stroke Foundation of Canada	(613) 569-4361	www.hsf.ca
Heart and Stroke Foundation of British Columbia	1-888-473-4636	www.hsf.bc.ca
Heart and Stroke Foundation of Alberta	(780) 451-4545	www.hsf.ab.ca
Heart and Stroke Foundation of Saskatchewan	1-888-473-4636	www.hsf.sk.ca
American Heart Association	1-800-AHA-USA1	www.amhrt.org



**Caution:
SALT
AHEAD!**

By Pamela Monkhouse
Clinical Dietitian, University of Alberta Hospital

As a patient with CHF, you should try to limit your sodium (salt) intake to 2 to 3 grams (2000 to 3000 mg) per day. This can be difficult to do if you are not aware of the sodium content of foods. To help you make the right dietary choices, here is a short list of foods and their sodium content:

Pasta Sauce

Prego Brand: 1 cup serving contains 1,510 mg (1.5 g) of sodium. A better choice would be:

President's Choice "Too Good to be True": 540 mg of sodium / cup, or Classico's "Spicy Red Pepper": 570 mg of sodium / cup.

You could also make your own pasta sauce, using the recipe provided in the "Cook To Your Heart's Content" column of this issue.

Vegetable Juices

Tomato Juice: 658 mg of sodium / 6 fluid ounces.

V8 Juice: 553 mg of sodium / 6 fluid ounces.

A better choice would be a raw tomato: 11 mg (1 raw).

Pickles

One large pickle (3 3/4") has 833 mg of sodium.

A better choice is a cucumber: 1 mg per 1/2 cup.



HEARTWISE ADVICE

**Get to
know your
medication**

Your medication is designed to help you. You should know its name, strength and the time to take it. But that's not enough. It is also important to know why you are taking a certain medication and what to expect from it. Be prepared for possible

side effects and learn how to avoid or treat them. Get to know as much as you can about your medication and you will become more confident to take charge of your health!

HEARTFELT PROFILES



I am 75 years of age and a retired senior accounting clerk. I have had CHF for roughly 14 years. I say "roughly" because it took a while to diagnose, since I had other health problems whose symptoms overlapped with the CHF symptoms. The cause of my CHF is difficult to determine although I did have rheumatic fever at age 19. However, no one has suggested that there was a possible connection.

I am presently on 11 different medications and I do not follow a special diet. At the advice of my doctor, I have my medication controlled carefully depending on blood levels. I weigh myself

regularly and try to restrict my fluid intake. At the beginning, I carried on with as many normal activities as I could after sessions of carefully monitored exercises at the hospital. Mostly, this involved walking, bicycling and lifting hand weights. Now, I try light exercise with diminishing ability and rest when I feel exhausted.

With time, it was becoming evident that my lifestyle had to change. Approximately five years ago, I started to notice that my worst times seemed to follow

sexual activity, and the urge diminished as my condition worsened. My wife does not feel deprived due to surgery that removed her uterus and ovaries, so we are compatible in that respect. We also had to give up long walks, out-of-town shuffleboard competition and going away from home except for short distances. This does cause some disappointment.

What is most frustrating is my lack of appetite even though I'm hungry. Although my wife

prepares food as I instruct her, very often it does not go down easily and even comes back up, particularly meat, which I can't seem to eat. It's been necessary to have *Ensure* daily to compensate. I am not a "drinker" but I enjoy a bit of wine and the odd cocktail. These I've had to forgo in an effort to rid me of nausea, in case that has anything to do with it. On very few occasions, I have a half ounce for an uplift.

I try to keep my spirits up to the best of my ability. I attend church and see friends and family regularly. To my fellow CHFers, I say: "Live for today. Tomorrow may bring us all great news."

COOK TO YOUR HEART'S CONTENT



PIZZA SAUCE

6 oz	can tomato paste (no salt added)	200 mL
1/2 cup	water	125 mL
1 tbsp	oregano	15 mL
1 tbsp	basil	15 mL
1 tsp	dried parsley	5 mL
1/2 tsp	garlic powder or 2 garlic cloves	2 mL
1/4 tsp	black pepper	1 mL
2 tbsp	vegetable oil	25 mL
1 tbsp	onions, finely chopped	15 mL
1 tsp	white sugar	15 mL
2 tbsp	fresh lemon juice	25 mL

Per 1 tbsp (15 mL):

calories	19	sodium	5 mg
protein	trace	potassium	82 mg
fat	1 g	phosphorus	8 mg
carbohydrate	2 g		

Combine all ingredients in a saucepan. Mix well. Bring to a boil, then let simmer for 10 minutes. Makes enough sauce for two round pizzas. Freezes well.

*Yields 1 1/3 cups (325 mL).

TOMATO SAUCE: add 2 cups (500 mL) unsalted, canned or fresh tomatoes.

From "Low Sodium Savvy" by L. Kerr, M. Kennedy, *Clinical Dietitians, Nephrology and Renal Transplant Program, University of Alberta Hospital*

If you would like to purchase a copy of this cookbook, please contact:
 Cara Stark – Phone 780-407-1565, Fax 780-407-6015,
 Address 5B1.07 Walter Mackenzie Centre, 8440-112 street
 Edmonton, Alberta, T6G 2B7. Cost: \$9.95 (includes GST and shipping)



CHF can be managed, especially if you, the patient, take an active role. Give some special attention to yourself, and **DO REACT** to your body's needs:

Do weigh yourself each day
Observe and record any signs and symptoms of CHF

Rest

Exercise

Avoid salty foods and limit fluids in your diet

Contact your doctor if you feel unwell

Take your medication regularly