



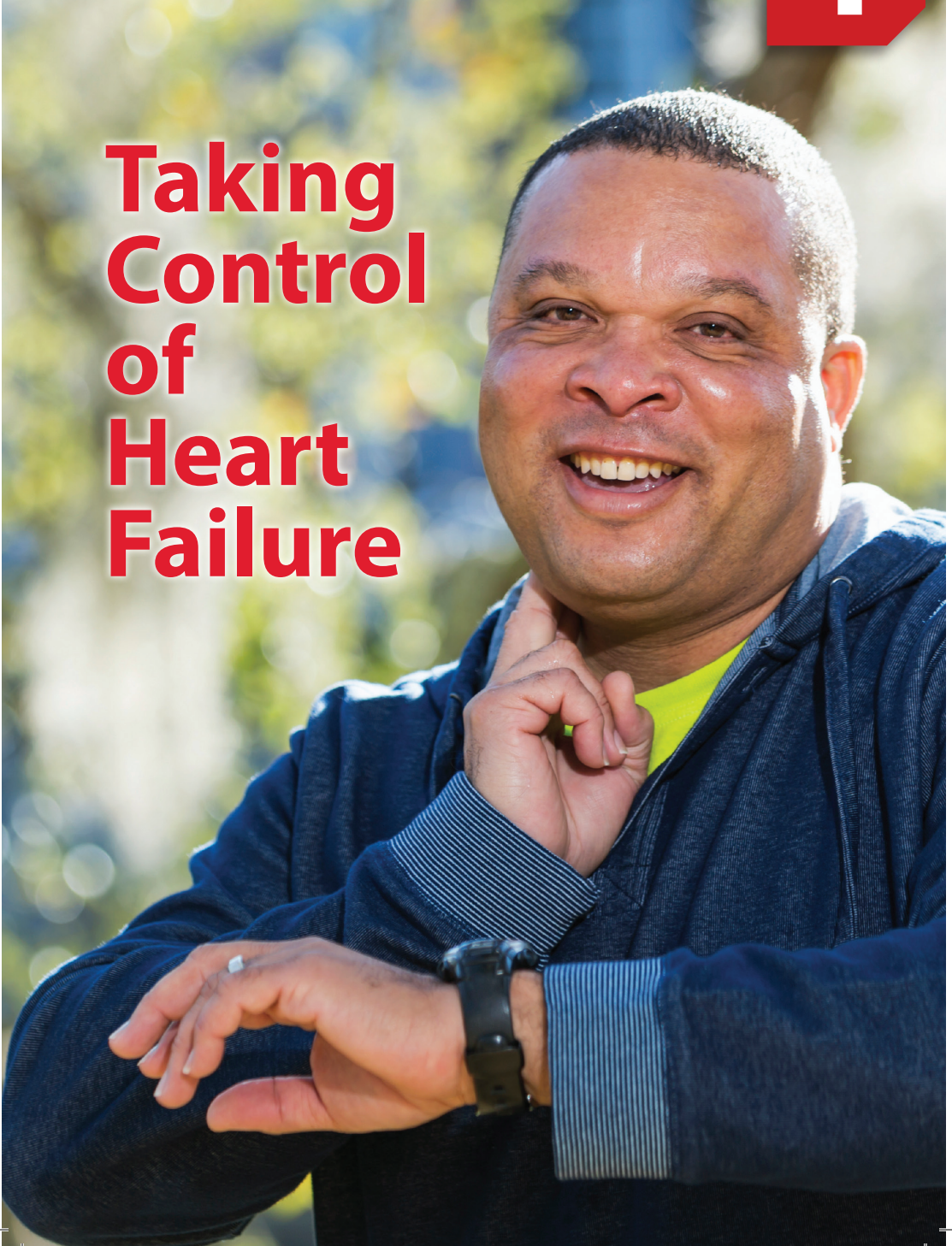
HFSA

HEART FAILURE SOCIETY OF AMERICA

MODULE

1

Taking Control of Heart Failure



Taking Control of Heart Failure

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This booklet was developed under the direction of the Heart Failure Society of America. The booklet is designed as an aid to patients/physicians and sets forth current information and opinions on the subject of heart failure. The information in this booklet does not dictate an exclusive regimen of treatments or procedures to be followed and should not be construed as excluding other acceptable methods of practice. Variations taking into account the needs of the individual patient, resources, and limitations unique to the institution or type of practice may be appropriate.

Important Information

Please write down important contact information in the space below.
You may also want to share this information with family members and friends.

Health Care Provider Treating Me for Heart Failure:

Name _____

Address _____

City _____ State ____ ZIP _____

Phone _____

Fax _____

E-mail _____

Other Important Phone Numbers:

Ambulance, fire department, or emergency services: **911**

Pharmacy _____

Other health care providers:

Taking Control of Heart Failure

What is Heart Failure?

Many people mistakenly believe that heart failure means that the heart has stopped or is about to stop. Heart failure simply means that the heart is not pumping blood through the body as well as it should. As the heart's pumping action weakens, blood and pressure back up into the lungs and make it hard to breathe. Sometimes the heart pumping is normal but there is an increase in pressure inside the heart. This can also cause problems with breathing. Many people with heart failure also have swollen abdomen, legs and feet. That is why heart failure is sometimes called congestive heart failure.

Heart failure is a serious illness that can affect how long you live. You may have heard that some people may die sooner because of heart failure. But with proper medications in the right doses and careful management, you can live longer and feel better.

In most cases, heart failure can't be cured, but it can be brought under control with careful work on your part and partnering with your health care team. Careful management means that you should:

- Take all of the medicines ordered by your doctor or nurse.
- Follow a low-sodium (salt) diet.
- Stop smoking.
- Remain physically active.
- Lose weight if you are overweight.
- Drink alcohol sparingly, if at all.

You should also check yourself every day for signs that your heart failure is getting worse. You should:

- Weigh yourself.
- Look for swelling.

These things may seem hard to do. But your active input in the treatment plan is essential. This series of modules will give you many tips and ideas to make it easier for you to take control of your condition.



Taking Control of Heart Failure

Causes of Heart Failure

Heart failure usually occurs when another problem makes the heart weak or stiff so it doesn't pump or fill normally. A common cause of heart failure is heart attack. The medical term your doctor may use for this cause of heart failure is ischemic cardiomyopathy.

Other non-"ischemic" causes of heart muscle dysfunction (cardiomyopathy) include high blood pressure, infection or inflammation of the heart muscle, lung disease, diabetes, and problems with the heart valves. Drinking too much alcohol for a long time can also cause heart failure.

Sometimes the exact cause of heart failure is not known. Idiopathic dilated cardiomyopathy is the medical term for this type of heart failure. Other dilated cardiomyopathies may be hereditary, which may be important for family members of a patient with dilated cardiomyopathy.

Ask your doctor for the cause(s) of your heart failure. There may be special things you can do to care for yourself, based on the specific reasons for your condition.



Taking Control of Heart Failure

Questions to Ask

The list of questions below can help you talk about heart failure with your doctor or nurse. The answers can help you understand heart failure better. Talking with your doctor or nurse will also help ensure that you are receiving the best possible care.

Always feel free to ask your doctor or nurse questions. You may want to have a family member or friend help you ask questions if you are not comfortable doing it alone.

Remember that an active partnership between you and your doctor and nurse makes for the best health care. You will be working together to make sure you are taking the best medications at the correct doses, making the best lifestyle changes, and addressing issues of how severe your illness is and your goals of care.

Do I have blockages in my coronary arteries?

Reason for asking this question: Coronary artery disease is the most common cause of heart failure. With this disease, blockages in the coronary arteries decrease or cut off the blood supply to portions of the heart muscle. Sometimes it is possible to open the blockages and restore the blood supply to the heart. This may improve heart function and reduce your symptoms. Knowing whether your heart failure is related to blocked coronary arteries can help your doctor plan the best treatment for you.

Is my blood pressure high? Is it under control?

Reason for asking these questions: High blood pressure is a major cause of heart failure. It can also make heart failure worse.

When someone has heart failure, it is wise to reduce the amount of strain on the heart in any way possible. Reducing blood pressure to normal levels is one important way to reduce strain on the heart. It is important for you to know your blood pressure and whether it is under control. That way you and your doctor can make sure it is managed well.

Are my heart valves damaged?

Reason for asking this question: Heart valve damage is another cause of heart failure. Sometimes, valve damage can be repaired so that heart failure improves. Therefore, it is important to know if your valves are damaged.

What is my heart function (ejection fraction)?

Reason for asking this question: Heart function is commonly assessed using a number called the ejection fraction. Some people mistakenly believe their ejection fraction indicates the amount of heart muscle that is still working. The ejection fraction refers to the percentage of blood that is pumped out of the heart each time it beats.

A heart does not pump all of the available blood out each time it beats. A normal heart pumps out or ejects only about 50-65% of the blood inside. If the heart is damaged, the ejection fraction frequently falls below 40%. This is called systolic heart failure or Heart Failure with Reduced Ejection Fraction (HFrEF). However, you can have a normal ejection fraction and still have heart failure. This may be related to a condition called diastolic heart failure or Heart Failure with Preserved Ejection Fraction (HFpEF).

An echocardiogram, an ultrasound of your heart, is the test most commonly used to evaluate heart function. The test will tell your doctor and you about your heart and heart valve function. Another test of heart function involves injecting a very small amount of radioactive material into your blood to produce images of your heart. This test is frequently called a radionuclide or MUGA scan. Your doctor may recommend other tests to identify the cause of your heart failure.

It is important to know your heart function. Doing so helps guide your care. However, once your doctor has evaluated your heart function, it is not necessary to keep testing it.



Taking Control of Heart Failure

Learn More

You can learn more about how to take control of your heart failure by reading the other modules in this series. You can get copies of these modules from your health care provider. Or you can visit the Heart Failure Society of America website at www.hfsa.org.

The topics covered in the other modules include:

- How to Follow a Low-Sodium Diet
- Heart Failure Medicines
- Self-Care: Following Your Treatment Plan and Dealing with Your Symptoms
- Exercise and Activity
- Managing Feelings About Heart Failure
- Tips for Family and Friends
- Lifestyle Changes: Managing Other Chronic Conditions
- Advance Care Planning
- Heart Rhythm Problems
- How to Evaluate Claims of New Heart Failure Treatments and Cures

These modules are not intended to replace regular medical care. You should see your health care provider regularly. The information in these modules can help you work better with your health care provider.

Notes:



About the Heart Failure Society of America, Inc.

In the spring of 1994, a small group of academic cardiologists gathered in New York to discuss the formation of a society that would focus on heart failure. This group had long recognized that the disease was on the rise; yet there was no venue for researchers, trainees, and clinicians to gather to discuss new treatments, research results, and the rise in health care costs associated with heart failure. A society dedicated to heart failure would bring together health care professionals, including researchers, physicians, nurses, and other allied health care professionals, to learn more about the mechanisms of the disease, how best to treat patients, play a role in reducing health care costs, etc. The meeting led to the incorporation of the Heart Failure Society of America, Inc.

The Heart Failure Society of America, Inc. (HFSA) represents the organized effort by heart failure experts from the Americas to provide a forum for all those interested in heart function, heart failure, and congestive heart failure (CHF) research and patient care.