

GUIDELINES FOR CARE FOR PEOPLE WITH HEART DISEASE



Risk Factor Management Many deaths from heart disease can be prevented by knowing and managing risk factors that can lead to a heart attack. If you have a family history of heart disease, have high blood pressure, smoke, have high cholesterol, have diabetes, or are overweight, you may be at increased risk for heart disease or a heart attack. Even though some risk factors, like family history, cannot be changed, you can change many others. Know your risk factors and talk with your health care team at each visit about reducing your risk of heart disease.



Smoking Cessation Cigarette smoking is the number-one risk factor for heart and blood vessel disease. When you quit smoking, your risk of heart disease goes down. One year after you quit, your risk of heart disease caused by smoking will be greatly reduced. If you smoke, talk with your doctor about ways to help you quit.



Lipid Profile High levels of lipids, or fat, in the blood can lead to a heart attack. A simple blood test can measure the level of lipids in your blood. A lipid profile will measure the amount of total cholesterol, good cholesterol (HDL), bad cholesterol (LDL) and triglycerides. By knowing your lipid levels, you and your doctor can develop a plan to reduce your risk of a heart attack. You should have your lipids checked at least once a year or at your doctor's direction.



Blood Pressure Reading High blood pressure (hypertension) can lead to heart attack, heart failure or kidney failure. Know your blood pressure reading. If your blood pressure is high, your doctor may prescribe medication to reduce your blood pressure. You should have a thorough blood pressure check at least once a year. The American Heart Association recommends blood pressures of less than 130/85 for people who have heart disease and less than 130/80 for people with diabetes.



Diabetes Screening People with undiagnosed diabetes are at risk for heart disease, a heart attack, stroke and other complications. Amazingly, almost five and a half million Americans have diabetes but are currently undiagnosed. The American Diabetes Association recommends that all people age 45 years and older should be tested for diabetes annually.



Nutrition The American Heart Association recommends a low-fat, low-cholesterol, low-salt eating plan for people with heart disease. Check with your health care team to see if your current eating plan follows these recommended guidelines to keep your heart healthy.



Depression Management Talk to your doctor if you have feelings of sadness, hopelessness, helplessness or other symptoms of depression reviewed on page 24. Depression can be the result of a physical problem, and treatment for depression CAN help.



Flu Vaccine For people who have heart disease, the flu can be much more serious than for people without heart disease. A flu vaccine each year can help you avoid most kinds of flu, or reduce the symptoms if you do get the flu.



Pneumonia Vaccine Like the flu, pneumonia can be a serious problem for people with heart disease. Having a pneumonia shot before the age of 65 can lessen your chance of developing pneumonia. If it has been more than five years since you had a pneumonia shot and you are over 65, talk to your doctor about a revaccination.

GUIDELINES FOR CARE FOR PEOPLE WITH HEART DISEASE (continued)



History and Physical Exam An annual physical exam is important to maintain a healthy heart. Reviewing your recent medical history with your doctor at each visit is critical to staying healthy. Make sure you let your doctor know of any changes in your health or daily routine, including chest discomfort, weight change, swelling in your ankles and feet, and your ability to do daily activities or exercise.



Medicines to Discuss with Your Doctor

- **Aspirin Therapy** Studies have shown that aspirin may help reduce your risk of having a heart attack. Talk with your doctor about the advantages of taking aspirin.
- **Beta Blockers** These medications decrease blood pressure, decrease the work of your heart and can help prevent irregular heartbeats. Beta blockers are given for a variety of conditions such as palpitations, high blood pressure or heart failure, or after a heart attack or heart surgery.
- **ACE Inhibitors** These medications decrease the work of your heart and lower blood pressure. ACE inhibitors are usually given after a heart attack or for treating heart failure.
- **Statins** These medicines lower bad cholesterol (LDL), help increase good cholesterol (HDL), and may be helpful for people with cardiac problems, even if cholesterol levels are not high.

GUIDELINES FOR CARE FOR PEOPLE WITH HEART FAILURE

People with heart failure should also follow the care guidelines for people with heart disease on page 1 and above, in addition to those listed here.



Self-Monitoring of Weight, Blood Pressure and Pulse Daily weight monitoring is a cornerstone in managing fluid buildup that may increase slowly and cause symptoms that require hospitalization. Monitoring your weight can help catch the fluid buildup early to allow your doctor to treat you before hospitalization is needed. Some people will benefit by self-monitoring of their blood pressure and pulse. Ask your physician if blood pressure and pulse monitoring is right for you.



Ejection Fraction Measurement The best way to check your heart function is to measure how much blood the heart pushes out with each beat. The most common test is the 2D echocardiogram, or “echo” for short. This test can help your doctor plan the right treatment for you. This test is also recommended for all patients with heart failure when they are first diagnosed and if there has been a significant change in health status.



Creatinine If you have heart failure, it is important to closely monitor the health of your kidneys. A serum creatinine blood test can pick up early warning signs of kidney problems. This test can also measure for side effects of certain medicines used to treat heart failure. You should have your serum creatinine checked at least once a year.



Electrolytes To function normally, your body needs the right amount of electrolytes such as potassium, sodium and chloride. Too much or too little of any of these can cause your heart to work harder than it needs to. Have your electrolytes checked at least once a year to keep you and your heart in balance.



Liver Function Having heart failure can impact not only your heart but can also affect your liver. Since some medications used to treat heart failure can cause liver malfunction or liver abnormalities, you should have your liver function tested at least once a year.