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This book is designed to help you understand and follow your heart failure treatment. The six chapters can be read in any order. You may want to share this book with your loved ones or with people who give you support.

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You Can Live Well with Heart Failure!

You have been given this book because you have heart failure. This may sound scary, but it doesn’t mean your heart has failed. In fact, with the right treatment, heart failure can be controlled. And you can feel and live better, with fewer symptoms and fewer trips to the hospital. This book will help you understand heart failure and treatment. And, it will teach you to take care of yourself so you feel your best. The book won’t replace visits with your healthcare team. But it will help you work more closely with them and take better care of yourself between visits.

What Is Heart Failure?

When you have heart failure, your heart doesn’t pump as well as it should. Because of this, some parts of your body may not get enough blood and oxygen. These problems lead to the symptoms you feel.

How Does Heart Failure Feel?

You may have many heart failure symptoms, or only a few. Here are the most common symptoms:

• Shortness of breath, wheezing, or coughing when you exert yourself

• Feeling weak or tired after little effort

• Problems breathing when you’re lying flat, or the need to sleep in a recliner or propped up on pillows

• Waking up at night coughing or short of breath

• Rapid weight gain

• Swelling in the hands, abdomen, ankles, or feet

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The Impact on Your Daily Life
Heart failure touches all parts of your life. Symptoms may keep you from doing daily activities or things you enjoy. Actions that used to be simple, such as climbing a flight of stairs, may now be much harder. You may not have the energy to spend time with friends and loved ones. There’s no easy way to solve these problems. Heart failure is a chronic (ongoing) health problem, and there’s no magic cure. But with medication, changes to your diet, and other forms of treatment, heart failure can be controlled. So you’ll be able to do more of the things that matter to you.

Your Role in Treatment
Heart failure treatment means more than just medication. You’ll also need to eat less salt, weigh yourself daily, and manage your symptoms. Your job is to follow your prescribed treatment as best you can. To do this, you need to learn how heart failure affects your body. And you must work closely with your healthcare team to keep heart failure under control. With practice and patience, you can take care of yourself, reduce symptoms, and feel much better. This book will help you understand how.

Using This Book
This book is not homework. It’s a tool to help manage heart failure treatment. The book has spaces for you to write details about your health. Doing this will help you stay on top of your care. Keep this book so you can refer to it whenever you need to.

Notes for Family and Friends
If you’re a family member, friend, or caregiver to someone with heart failure, your support means a lot. This book can help you, too. Use it to learn about heart failure and what you can do. Throughout the book, look for notes like this. They will give you ideas for ways you can help.
Understanding Heart Failure

The heart is a muscle. It pumps oxygen-rich blood to all parts of the body. When you have heart failure, the heart can’t pump as well as it should. Blood and fluid may back up into the lungs, and some parts of the body don’t get enough oxygen-rich blood to work normally. These problems lead to the symptoms you feel.

How a Healthy Heart Pumps Blood

As the heart beats, blood constantly moves through it. The heart muscle must pump out (eject) enough of this blood to keep the body healthy. Oxygen-poor blood (shown with blue arrows) goes through the right side of the heart, to the lungs. Oxygen-rich blood (red arrows) goes through the left side of the heart, to all other parts of the body. Each heartbeat has two steps:

Step 1. The atria (upper chambers) relax and fill with blood entering the heart. At the same time, the ventricles (lower chambers) squeeze to pump blood out of the heart, to the lungs and the body. This part of the heartbeat is called **systole**.

Step 2. The atria squeeze to send blood into the ventricles. The ventricles relax to receive this blood. This part of the heartbeat is called **diastole**. The process starts over with the next heartbeat.

What Is Ejection Fraction?

**Ejection fraction** (EF) measures how much blood the heart pumps out (ejects). This is measured to help diagnose heart failure. A healthy heart pumps at least half of the blood from the ventricles with each beat. This means a normal ejection fraction is around 50% or more.
When You Have Heart Failure

Because of heart failure, not enough blood leaves the heart with each beat. There are two types of heart failure. Both affect the ventricles’ ability to pump blood. You may have one or both types.

**Systolic Heart Failure**
The heart muscle becomes weak and enlarged. It can’t pump enough blood forward when the ventricles contract. Ejection fraction is lower than normal.

**Diastolic Heart Failure**
The heart muscle becomes stiff. It doesn’t relax normally between contractions, which keeps the ventricles from filling with blood. Ejection fraction is often in the normal range.

How Heart Failure Affects Your Body

When the heart doesn’t pump enough blood, hormones (body chemicals) are sent to increase the amount of work the heart does. Some hormones make the heart grow larger. Others tell the heart to pump faster. As a result, the heart may pump more blood at first, but it can’t keep up with the ongoing demands. So, the heart muscle becomes more damaged. Over time, even less blood is pumped through the heart. This leads to problems throughout the body (see page 8).

---

**My Ejection Fraction**

Date: ___________ Ejection fraction: ___________ Test used: ___________
Your Condition
In most cases, heart failure is caused by other health problems. And certain health problems can make it worse. So, your overall health is likely to affect your heart failure treatment.

Causes of Heart Failure
Some common causes of heart failure are listed below. Ask your healthcare provider to help you check off those that apply to you.

- Coronary artery disease (CAD)
- Heart attack
- High blood pressure
- Heart valve disease
- Infection of the heart muscle
- Alcohol abuse
- Side effects of toxic drugs or medications
- Inherited heart problem
- No known cause
- Other: ________________________________

Related Health Problems
You may have health problems that make heart failure harder to control. Your heart failure may even have led to problems in other parts of your body, such as the kidneys. Ask your healthcare provider to help you write in any related health problems here:

________________________________________
________________________________________
________________________________________
________________________________________
________________________________________
________________________________________

You may have had tests, such as an echocardiogram, to help diagnose heart failure and related problems.
Managing Symptoms

Watching how your symptoms change helps you keep heart failure under control. Take action as soon as you notice a symptom getting worse. This helps prevent a problem from becoming serious. You may even avoid a hospital stay. This chapter will help you:

✔ Set baselines to measure your symptoms.
✔ Watch for worsening symptoms.
✔ Know what to do and who to call when symptoms get worse.
Recognizing Heart Failure Symptoms

It’s up to you to pay attention to your body and how you feel, every single day. This way, if a problem occurs, you can get help before it becomes too bad. You need to learn to watch for changes in your symptoms. As long as symptoms stay about the same from one day to the next, your heart failure is stable. But if symptoms start to get worse, it’s time to take action. Work with your healthcare team to get heart failure back under control.

When Your Body Gets Less Blood

Because of heart failure, your heart pumps less blood than normal to the lungs and to the rest of the body. As a result, the kidneys and other organs don’t get the oxygen-rich blood they need. When the kidneys don’t work right, fluid backs up in the lungs and throughout the body. This results in the symptoms shown in the picture to the right.

- **Rapid weight gain** means fluid is backing up in your body. Gaining 2 or more pounds in 1 day, or 5 or more pounds in 1 week, are signs of worsening heart failure.
- **Shortness of breath** is caused by fluid backing up into the lungs. You may get winded during easy activities. Breathing may be harder when you lie flat. At night, you may wake up coughing or short of breath. You may need to sit up to breathe better.
- **Swelling (edema)** means your body is storing extra fluid. This could happen in your hands, abdomen, ankles, or feet. Each person’s body carries water differently. Learn where you tend to swell.
- **Fatigue** occurs when your body doesn’t get enough blood. You may feel more tired and have less energy than usual, even when you’re less active.
Know Your Baselines

The first step to managing heart failure symptoms is getting to know what’s normal for you. How much can you usually do before shortness of breath is a problem? Do your socks and shoes fit comfortably? How much do you weigh? These normal situations (how your symptoms usually feel) are your baselines. Knowing what’s normal for you will help you see when symptoms are getting worse. You’ll know because you won’t feel normal anymore. Write some baselines in the box below. These will help you measure your symptoms.

Watch for Changes

Once you’ve come up with baselines, watch for changes daily. Pay attention to how much you can do today. Is it the same as yesterday? Are your shoes tight? Do you need to use a different belt hole? If today’s symptoms are different from your baselines, you need to take action. The problem won’t go away by itself. So, if you notice even a small change, don’t ignore it. Your healthcare provider is counting on you to call when you think your symptoms are worse. He or she will tell you what to do next. Working together this way helps keep heart failure under control and improves the number of good days you have. It could even keep you out of the hospital.

My Baselines

My belt buckle usually fits into the _________ hole.

I can walk from _________ to _________ before becoming short of breath.

I can climb _________ stairs before becoming short of breath.

Other baselines:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
Daily Symptom Tracking

If you gain weight suddenly, your body is storing extra water. This is a sign of worsening heart failure. Weight gain can be very rapid (in 1 or 2 days) or more gradual (over a week). To know if your body is storing water, weigh yourself every day. You may also be asked to check your blood pressure and heart rate daily.

Weigh Yourself

• Weigh yourself at the same time of day, every day. The reading is most accurate if you weigh yourself soon after you get up in the morning, after urinating but before eating. You don’t need to weigh yourself more than once a day.

• Weigh yourself without clothes. If you do wear pajamas, a robe, or a towel, be sure you wear the same thing every day. Otherwise your weight won’t be accurate.

• Always use the same scale. Make sure the numbers are easy to read. If you don’t have or can’t afford a scale, ask your healthcare team for suggestions.

• Write down your weight each day. Follow the sample on the next page. Keep your weight chart and a pen or pencil near the scale.

• Call your healthcare provider if you gain 2 or more pounds in 1 day, or 5 or more pounds in 1 week.

Remember: It’s best to weigh yourself without clothes. If you do wear something, make sure it’s the same each time.

My Baselines

Weight: ___________  Blood pressure: ___________  Heart rate: ___________
Measure Blood Pressure and Heart Rate

- Put on the blood pressure cuff, following the directions that came with the device. Sit comfortably with your arm supported on a table. Rest quietly for 5 minutes.

- Start the blood pressure device. Wait while your blood pressure is measured. Your heart rate may be taken, too.

- If the reading is very different from usual, wait 5 minutes. Then try again. Ask your healthcare provider what to do if this reading is also different from usual.

My Symptom Chart

A chart such as the one below helps you track your weight, blood pressure, and heart rate. Also write down changes in your symptoms and any notes you think are important. Do this daily. This helps you see if your heart failure is worsening. Bring the chart when you visit your healthcare team.

(A blank copy of this chart appears on page 56.)

<table>
<thead>
<tr>
<th>Baseline Weight: 180</th>
</tr>
</thead>
<tbody>
<tr>
<td>Day</td>
</tr>
<tr>
<td>-----</td>
</tr>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>4</td>
</tr>
<tr>
<td>5</td>
</tr>
<tr>
<td>6</td>
</tr>
<tr>
<td>7</td>
</tr>
<tr>
<td>8</td>
</tr>
<tr>
<td>9</td>
</tr>
<tr>
<td>10</td>
</tr>
</tbody>
</table>
My Action Plan

Now that you know how to manage your symptoms, it’s time to take action! The tips below will help you get started. Check off the items as you complete them. Before long, managing symptoms will become part of your daily routine.

- Set your baselines (pages 9 and 10).
- Ask your healthcare provider what to do if you notice swelling, shortness of breath, or other symptoms.
- Get a scale with numbers that are easy to read.
- Find a good place to keep the scale, where it can stay all the time without needing to be moved.
- Get a blood pressure machine (if blood pressure monitoring has been prescribed).
- Copy the symptom chart on page 56, or make your own. Keep this and a pen or pencil near the scale.
- Weigh yourself daily. Also measure your blood pressure and heart rate (if prescribed). Record the numbers on your symptom chart.
- Take your symptom chart to your next doctor’s appointment.
- Call your healthcare provider if you notice changes in symptoms, no matter how small they seem!

If You Notice Changes

Work out a plan with your healthcare provider for what you should do if you notice worsening symptoms. Start by asking about the changes below. (An expanded version of this chart appears on page 57.)

<table>
<thead>
<tr>
<th>If I notice…</th>
<th>I should…</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weight gain of 2 or more pounds in a day, 5 or more pounds in a week</td>
<td>Call my healthcare provider.</td>
</tr>
</tbody>
</table>

Swelling

Increased shortness of breath
Chapter 2

Following a Low-Sodium Diet

You can help control heart failure by eating less sodium (salt). Eating this way is a lifelong commitment. This means you should be careful about sodium, each and every day. Doing so makes a big difference in your health. This chapter will help you:

✓ Identify high-sodium foods, including those that contain “hidden” sodium.

✓ Adjust your shopping and eating habits.

✓ Limit fluid intake (if needed).
Get Started with a Low-Sodium Diet

Sodium (salt) from food and drinks makes your body store water. This causes swelling and forces your heart to work harder. To help prevent these problems, you have to eat much less sodium than you’re used to. Sodium enters your body in two main ways—from the salt you add to food, and from foods that contain salt and other forms of sodium. To help your heart, you need to cut back on both sources. You don’t have to change your eating habits all at once. But you do have to start today.

Cook Without Sodium

For your tastebuds to adjust, you need to make all of your meals and snacks low sodium. These tips can help you get started:

• Take the saltshaker off the table and stove. Season with fresh herbs, garlic, onion, lemon, or pepper instead. A cookbook can give you ideas for which herbs to use with which foods.

• Don’t salt cooking water. When cooking pasta, add a splash of olive oil to the water instead of salt.

• Eat fresh or plain frozen vegetables. These have much less salt than canned vegetables.

• If you choose to eat high-sodium condiments, dip your fork in instead of pouring them on food.

• Be aware that some salt substitutes contain potassium. This can cause problems with some heart medications. Before trying a salt substitute or seasoning mix, check with your healthcare provider or dietitian to make sure it’s safe for you.

My Sodium Goal

Your healthcare provider will give you a sodium goal to meet each day. This includes sodium found in food as well as salt that you add.

My goal is to eat no more than ___________ mg of sodium per day.
Watch Out for Sodium

Sodium can hide in foods that don’t even taste salty. Sodium is often found in:

• **Canned, processed, and convenience foods**, such as soups, lunch meat, frozen pizza, TV dinners, and vegetable juice.

• **Packaged pasta, noodle, and rice dishes** that contain a flavor packet or have flavoring mixed in.

• **Mixes and seasonings**, such as gravy mix, instant mashed potatoes, cake mix, taco seasoning, and some spice mixes.

• **Salted snacks** such as chips, crackers, popcorn, and pretzels.

• **Sauces and condiments** such as ketchup, soy sauce, barbecue sauce, salad dressing, and pickle relish.

• **Bubbly liquids** such as soda pop and some over-the-counter medicines (tablets that fizz in water).

Leave Sodium at the Store

Most people shop by habit. If this sounds like you, it’s time to turn off the automatic pilot! Avoid impulse buys. Make a shopping list before you go to the store. And start reading food labels (see page 16). The following tips can help while you shop.

• **In the produce section**: Start your shopping here. You’ll find lots of delicious low-sodium foods in this section. (Fresh vegetables and fruits have almost no sodium!)

• **In the frozen food aisle**: Plain frozen vegetables (without sauces) have very little sodium. But frozen meals are often high in sodium.

• **In the snack food section**: These foods are often high in sodium. Look for low-salt versions of favorite snacks.

• **In the canned and packaged food aisles**: Remember, these are often high in sodium. If you buy canned vegetables, look for varieties without added salt.

• **At the meat counter**: Look for fresh fish, chicken, and meat. Avoid anything that’s cured or smoked. Even frozen meat can have added sodium. If you’re not sure, ask for help.
Using Food Labels to Meet Sodium Goals

Food labels can be very helpful as you try to meet your daily sodium goal. Read them while you shop. Then put high-sodium foods back on the shelves! You can also use the information on food labels to track how much sodium you eat in a day.

How to Read Food Labels

The label below is from a can of soup. Get a package or can out of your cupboard. How does it compare to this one?

<table>
<thead>
<tr>
<th>Nutrition Facts</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Serving size</strong></td>
</tr>
<tr>
<td><strong>Servings per container</strong></td>
</tr>
<tr>
<td><strong>Amount Per Serving</strong></td>
</tr>
<tr>
<td>Calories</td>
</tr>
<tr>
<td>Calories from fat</td>
</tr>
<tr>
<td>Total Fat</td>
</tr>
<tr>
<td>Saturated Fat</td>
</tr>
<tr>
<td>Trans Fat</td>
</tr>
<tr>
<td>Cholesterol</td>
</tr>
<tr>
<td>Sodium</td>
</tr>
<tr>
<td>Total Carbohydrates</td>
</tr>
<tr>
<td>Dietary Fiber</td>
</tr>
<tr>
<td>Sugars</td>
</tr>
<tr>
<td>Protein</td>
</tr>
</tbody>
</table>

**Ingredients:** Chicken broth, carrots, cooked white chicken meat (white chicken meat, water, salt, sodium phosphate, isolated soy protein, modified cornstarch, cornstarch), potatoes, celery, rice, monosodium glutamate. Contains soy.

The serving size is the basis for all values on the label. In this case, 1 serving is 1 cup (half a can of soup). If you eat the whole can (2 servings, or 2 cups), you have to double all the numbers on the label.

Sodium is given in milligrams (mg). How does this number compare to your daily goal?

1. **Sodium free** or **salt free** means less than 5 mg per serving.
2. **Very low sodium** means 35 mg or less per serving.
3. **Low sodium** means 140 mg or less per serving.
4. **Reduced sodium** or **less sodium** means at least 25% less sodium than the standard version. (This could still be too much sodium for you. Look at the label.)
5. **Light in sodium** means 50% less sodium than the standard version. (This could still be a lot, so read the label.)
6. **Unsalted** or **no salt added** means no salt is added to the product during processing. (The product could still contain sodium. Be sure to check the label.)
7. **Healthy** and **natural** have no nutritional meaning. Don’t be fooled into thinking that foods labeled this way must be good for you.

Percent daily value gives the percentage of the standard recommended amount per day. If this is over 25%, the food probably contains too much sodium for you.

Check the ingredients list for salt. Also watch for high-sodium ingredients such as sodium phosphate, brine, monosodium glutamate (MSG), baking soda, and any other ingredient that has “sodium” in its name.
Sodium By the Numbers

Food labels tell you how much sodium is in a serving. But a meal usually includes a few different foods. To know how much sodium you’re getting, you have to do a little math. (You may want to keep a calculator handy!)

Add It Up
To figure out how much sodium is in a meal, add up the parts. Here’s a sample meal:

<table>
<thead>
<tr>
<th>Item</th>
<th>Sodium (mg)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 slices (3 oz) chicken breast, skinless</td>
<td>65</td>
</tr>
<tr>
<td>2 slices whole-wheat bread</td>
<td>299</td>
</tr>
<tr>
<td>1 slice (3/4 oz) American cheese</td>
<td>328</td>
</tr>
<tr>
<td>1 large lettuce leaf</td>
<td>1</td>
</tr>
<tr>
<td>2 slices tomato</td>
<td>4</td>
</tr>
<tr>
<td>1 Tbsp mayonnaise, low fat</td>
<td>90</td>
</tr>
<tr>
<td>1 dill pickle (medium size)</td>
<td>930</td>
</tr>
<tr>
<td>1 cup apple juice</td>
<td>7</td>
</tr>
</tbody>
</table>

**TOTAL:** 1,724 mg

What Can You Subtract?
To reduce the sodium in this meal, leave out or replace the items highest in sodium:

<table>
<thead>
<tr>
<th>Item</th>
<th>Sodium (mg)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 slices (3 oz) chicken breast, skinless</td>
<td>65</td>
</tr>
<tr>
<td>2 slices whole-wheat bread</td>
<td>299</td>
</tr>
<tr>
<td>1 slice (3/4 oz) Swiss cheese</td>
<td>54</td>
</tr>
<tr>
<td>1 large lettuce leaf</td>
<td>1</td>
</tr>
<tr>
<td>2 slices tomato</td>
<td>4</td>
</tr>
<tr>
<td>1 Tbsp mayonnaise, low fat</td>
<td>90</td>
</tr>
<tr>
<td>No pickle</td>
<td>0</td>
</tr>
<tr>
<td>1 cup apple juice</td>
<td>7</td>
</tr>
</tbody>
</table>

**TOTAL:** 520 mg

When you add up the parts of your meal, you’ll see where you can cut back. This is only one meal out of the day. How does the total compare to your daily goal (page 14)?

Watch the Bottom Line
Get in the habit of adding up your meals. (Use the meal chart on page 58.) Subtract sodium where you can. This will help you get closer and closer to your goal. If one meal has more sodium than half of your daily goal, look for ways to reduce it. Think about what you’ve already eaten and what else you plan to eat. If one meal is high in sodium, your other meals that day can be lower so you’ll still meet your goal.
How Much Sodium Is in There?

Knowing how much sodium is in a product can help you decide if you should eat it. Look on this chart for foods you often eat. (Sodium content can vary by brand, so always check the label, too.) Lower-sodium choices in each group are listed first. The colored areas contain foods with more than 140 mg of sodium per serving. Numbers are rounded to the nearest 5 mg.

<table>
<thead>
<tr>
<th>Food</th>
<th>Serving Size</th>
<th>Sodium</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beans, pinto, dried, prepared without salt</td>
<td>1/2 cup</td>
<td>less than 2 mg</td>
</tr>
<tr>
<td>Peanut butter, unsalted</td>
<td>2 tablespoons</td>
<td>10 mg</td>
</tr>
<tr>
<td>Beans, kidney, canned, no salt added</td>
<td>1/2 cup</td>
<td>15 mg</td>
</tr>
<tr>
<td>Peanut butter, salted</td>
<td>2 tablespoons</td>
<td>150 mg</td>
</tr>
<tr>
<td>Beans, pinto, canned</td>
<td>1/2 cup</td>
<td>350 mg</td>
</tr>
<tr>
<td>Beans, refried, canned</td>
<td>1/2 cup</td>
<td>380 mg</td>
</tr>
<tr>
<td>Cheese, Parmesan, grated</td>
<td>1 tablespoon</td>
<td>95 mg</td>
</tr>
<tr>
<td>Yogurt, plain or flavored</td>
<td>1 cup</td>
<td>100–150 mg</td>
</tr>
<tr>
<td>Cheese, Cheddar</td>
<td>1 oz</td>
<td>175 mg</td>
</tr>
<tr>
<td>Most fresh fruits and vegetables</td>
<td>1 serving</td>
<td>0–20 mg</td>
</tr>
<tr>
<td>Corn, frozen</td>
<td>1/2 cup</td>
<td>less than 5 mg</td>
</tr>
<tr>
<td>Tomatoes, canned, unsalted</td>
<td>1/2 cup</td>
<td>30 mg</td>
</tr>
<tr>
<td>Peas, green, frozen</td>
<td>1/2 cup</td>
<td>70 mg</td>
</tr>
<tr>
<td>Juice, vegetable, low sodium</td>
<td>1 cup</td>
<td>140 mg</td>
</tr>
<tr>
<td>Tomatoes, canned</td>
<td>1/2 cup</td>
<td>180 mg</td>
</tr>
<tr>
<td>Corn, canned</td>
<td>1/2 cup</td>
<td>360 mg</td>
</tr>
<tr>
<td>Peas, canned</td>
<td>1/2 cup</td>
<td>390 mg</td>
</tr>
<tr>
<td>Juice, vegetable, regular</td>
<td>1 cup</td>
<td>620 mg</td>
</tr>
<tr>
<td>Pizza, cheese, frozen</td>
<td>4 oz</td>
<td>400–1,000 mg</td>
</tr>
<tr>
<td>Macaroni and cheese, prepared</td>
<td>1 cup</td>
<td>730 mg</td>
</tr>
<tr>
<td>Rice dish mix, prepared</td>
<td>1 cup</td>
<td>800–1,400 mg</td>
</tr>
<tr>
<td>Pea soup mix, dry, prepared</td>
<td>3/4 cup</td>
<td>915 mg</td>
</tr>
<tr>
<td>Fried chicken, fast food</td>
<td>1 piece</td>
<td>520–840 mg</td>
</tr>
<tr>
<td>Hamburger, fast food</td>
<td>1</td>
<td>475–1,000 mg</td>
</tr>
<tr>
<td>Chicken noodle soup, canned</td>
<td>1/2 cup</td>
<td>890 mg</td>
</tr>
<tr>
<td>Ramen noodle soup</td>
<td>1 package</td>
<td>830–1,300 mg</td>
</tr>
<tr>
<td>Food</td>
<td>Serving Size</td>
<td>Sodium</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>--------------------</td>
<td>----------------</td>
</tr>
<tr>
<td>Rice, white or brown, cooked</td>
<td>1 cup</td>
<td>less than 20 mg</td>
</tr>
<tr>
<td>Pasta</td>
<td>2 oz uncooked</td>
<td>less than 20 mg</td>
</tr>
<tr>
<td>Tortilla, corn</td>
<td>1 medium</td>
<td>40 mg</td>
</tr>
<tr>
<td>Bread, whole-wheat</td>
<td>1 slice</td>
<td>120–140 mg</td>
</tr>
<tr>
<td>Rice noodles</td>
<td>2 oz uncooked</td>
<td>130 mg</td>
</tr>
<tr>
<td>Bread, white</td>
<td>1 slice</td>
<td>120–250 mg</td>
</tr>
<tr>
<td>Tortilla, flour</td>
<td>1 medium</td>
<td>210 mg</td>
</tr>
<tr>
<td>Bread, rye</td>
<td>1 slice</td>
<td>215 mg</td>
</tr>
<tr>
<td>Egg, boiled</td>
<td>1</td>
<td>60 mg</td>
</tr>
<tr>
<td>Cod, baked</td>
<td>3.5 oz</td>
<td>75 mg</td>
</tr>
<tr>
<td>Hamburger patty, broiled</td>
<td>3.5 oz</td>
<td>75 mg</td>
</tr>
<tr>
<td>Chicken, roasted</td>
<td>3.5 oz</td>
<td>80 mg</td>
</tr>
<tr>
<td>Sardines, canned</td>
<td>2 medium</td>
<td>120 mg</td>
</tr>
<tr>
<td>Chicken, batter-fried</td>
<td>3.5 oz</td>
<td>290 mg</td>
</tr>
<tr>
<td>Bacon</td>
<td>2 slices</td>
<td>290 mg</td>
</tr>
<tr>
<td>Tuna, light, canned</td>
<td>3 oz</td>
<td>300 mg</td>
</tr>
<tr>
<td>Hot dog</td>
<td>1</td>
<td>460 mg</td>
</tr>
<tr>
<td>Ham</td>
<td>3.5 oz</td>
<td>950–1,500 mg</td>
</tr>
<tr>
<td>Nuts, mixed, unsalted</td>
<td>1 oz</td>
<td>0 mg</td>
</tr>
<tr>
<td>Popcorn, popped, unsalted</td>
<td>1 cup</td>
<td>40–65 mg</td>
</tr>
<tr>
<td>Ice cream, vanilla</td>
<td>½ cup</td>
<td>55 mg</td>
</tr>
<tr>
<td>Cookie, chocolate chip</td>
<td>1</td>
<td>55 mg</td>
</tr>
<tr>
<td>Cookie, peanut butter</td>
<td>1</td>
<td>100 mg</td>
</tr>
<tr>
<td>Tortilla chips</td>
<td>1 oz, about 10 chips</td>
<td>150 mg</td>
</tr>
<tr>
<td>Potato chips</td>
<td>1 oz, about 10 chips</td>
<td>170 mg</td>
</tr>
<tr>
<td>Nuts, mixed, salted</td>
<td>1 oz</td>
<td>250 mg</td>
</tr>
<tr>
<td>Pretzels, salted</td>
<td>1 oz</td>
<td>485 mg</td>
</tr>
<tr>
<td>Mustard (yellow)</td>
<td>1 teaspoon</td>
<td>65 mg</td>
</tr>
<tr>
<td>Barbecue sauce</td>
<td>1 tablespoon</td>
<td>130 mg</td>
</tr>
<tr>
<td>Ketchup</td>
<td>1 tablespoon</td>
<td>180 mg</td>
</tr>
<tr>
<td>Salsa</td>
<td>1 tablespoon</td>
<td>220 mg</td>
</tr>
<tr>
<td>Soy sauce</td>
<td>1 tablespoon</td>
<td>1,230 mg</td>
</tr>
<tr>
<td>Salt</td>
<td>1 teaspoon</td>
<td>2,400 mg</td>
</tr>
</tbody>
</table>
What Can You Choose Instead?

Lots of foods can give you the taste or texture you crave—without overloading you with sodium! Here are a few switches you can make. Start by making one change per day. Work up to one change per meal. Of course, what you choose depends on your taste. Can you think of other low-salt switches for foods you often eat?

<table>
<thead>
<tr>
<th>If You Often Eat</th>
<th>Try Instead</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Packaged breakfast pastries or frozen waffles</td>
<td>• Toasted raisin bread</td>
</tr>
<tr>
<td>• Salted butter</td>
<td>• Jam</td>
</tr>
<tr>
<td>• Flavored oatmeal, grits, or other instant cooked cereal</td>
<td>• Plain cooked cereal with cinnamon or fresh fruit</td>
</tr>
<tr>
<td>• Vegetable juice</td>
<td>• Fruit juice or low-sodium vegetable juice</td>
</tr>
<tr>
<td>• Frozen hash browns</td>
<td>• Fresh hash browns, or a low-sodium frozen brand</td>
</tr>
</tbody>
</table>

**Breakfast**

| • Dill pickles                                                                 | • Cucumber slices dipped in vinegar              |
| • Peanut butter                                                                | • Unsalted peanut butter                        |
| • Lunch meat or salami                                                         | • Baked chicken or turkey, sliced               |
| • Processed cheese (American)                                                  | • Natural cheese (such as Swiss), in smaller amounts than usual |
| • Noodle soup with flavor packet                                               | • Plain noodles with your own seasoning or homemade soup |
| • Potato salad or coleslaw                                                     | • Garden salad with low-sodium dressing         |
| • Saltine crackers                                                             | • Low-sodium crackers                           |
| • Chips or fries                                                               | • Unsalted pretzels, nuts, or chips             |
| • Candy bar with nuts and caramel                                              | • Plain chocolate bar                           |

**Lunch**
### If You Often Eat vs. Try Instead

<table>
<thead>
<tr>
<th>Dinner</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Table salt (for cooking)</td>
</tr>
<tr>
<td>• Garlic salt (for cooking)</td>
</tr>
<tr>
<td>• Soy sauce (for cooking)</td>
</tr>
<tr>
<td>• Bottled salad dressing</td>
</tr>
<tr>
<td>• Frozen or boxed potatoes</td>
</tr>
<tr>
<td>• Boxed rice mix</td>
</tr>
<tr>
<td>• Canned vegetables or beans</td>
</tr>
<tr>
<td>• Ham</td>
</tr>
<tr>
<td>• Smoked turkey</td>
</tr>
<tr>
<td>• Sausage</td>
</tr>
<tr>
<td>• Canned or bottled spaghetti sauce</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Try Instead</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Lemon, garlic, pepper, spices, low-sodium spice mixes</td>
</tr>
<tr>
<td>• Garlic powder or fresh garlic</td>
</tr>
<tr>
<td>• Sesame or peanut oil</td>
</tr>
<tr>
<td>• Olive oil, vinegar, and herbs</td>
</tr>
<tr>
<td>• Boiled or baked potatoes</td>
</tr>
<tr>
<td>• White or brown rice with your own seasoning</td>
</tr>
<tr>
<td>• Frozen, fresh, or low-sodium canned vegetables or beans</td>
</tr>
<tr>
<td>• Roast pork</td>
</tr>
<tr>
<td>• Roast turkey or chicken</td>
</tr>
<tr>
<td>• Hamburger patty</td>
</tr>
<tr>
<td>• Homemade sauce (no salt added)</td>
</tr>
</tbody>
</table>

### Notes for Family and Friends

Following a low-sodium diet is a huge change that affects almost everything your loved one eats. This change may be hard, but it’s very important. Your support can make following a low-sodium diet a bit easier. Here are ways you can help:

- **Keep sodium content in mind if you cook for your loved one. Get a low-sodium cookbook and choose recipes together.**
- **Go shopping together. Help with reading food labels and selecting low-sodium foods.**
- **When you go out to eat, choose a restaurant with low-sodium options (see page 22 for ideas).**
- **Remember, a low-sodium diet is healthier for everyone. Make some of the same changes to the way you eat. Your heart will thank you!**
Dining Out

When you eat out, never be afraid to ask how food is prepared. And plan ahead. If you’re going out for dinner, eat less sodium than usual for breakfast, lunch, and snacks. This way you can still meet your sodium goal for the day.

**American Food**
- Order grilled chicken or fish (without breading) instead of fried.
- Have a side salad or baked potato instead of french fries.
- At the salad bar, stick with fresh vegetables. Use oil and vinegar dressing. Canned and pickled items and low-fat dressings are often high in salt.
- Get your hamburger with condiments on the side. Add only small amounts.

**Asian Food**
- Steamed dishes (such as vegetables) have the least sodium.
- Instead of eating a whole dish, eat half with a lot of steamed rice. This way you get half as much sodium.
- Use sodium-free soy sauce. If you don’t have any on the table, ask your server.
- Ask for food with sauce on the side. Dip food into sauce instead of pouring sauce on top.
- Ask that food be prepared without MSG.

**Italian Food**
- Avoid dishes that have a lot of cheese or cheese sauce. Don’t add Parmesan to pasta or pizza. Also, ask for pizza to be made with half the usual amount of cheese. Or check the menu for cheeseless varieties.
- Order pasta or pizza with fresh vegetables such as broccoli, spinach, and mushrooms, instead of salty meats such as pepperoni or sausage.

**Mexican Food**
- Fajitas are a good choice because you add your own fillings. Have them with vegetables, chicken, chile peppers, and only a pinch of cheese.
- Eat soft flour or corn tortillas instead of chips, and go light on the salsa.
- Mexican cheese, beans, and rice have a lot of salt. Get these on the side (or not at all).

**Fast Food**
Fast food can be very salty. Of course, french fries have a lot of salt. But so can foods you may not expect, such as breakfast biscuits, milkshakes, and even some salads. Your best bet is to eat at fast food restaurants only once in a while, if at all. If you do have fast food now and then, make sure to choose lower-sodium options. Most fast food restaurants have a nutrition list of the foods they serve. This can help you make low-sodium choices. Ask for this list at the counter. It may also be on the restaurant’s website.
If You’re Told to Limit Fluid

In some cases of heart failure, fluid intake must be limited to help prevent the body from storing too much water. Do this *only* if your healthcare provider tells you to. “Fluid” includes anything that is liquid at room temperature, such as ice cream and soup.

Tips for Limiting Fluid

- Fill a container with the same amount of water as your daily fluid goal. Each time you have any kind of fluid, pour out the same amount of water from the container. This will help you know when you’ve reached your daily limit.

- Chill drinks to make them more refreshing.

- Suck on frozen lemon wedges or ice to quench thirst.

- Drink only when you’re thirsty.

- Rinse your mouth with water, but don’t swallow it.

- Chew sugarless gum or suck on hard candy to keep your mouth moist.

My Fluid Goal

If you need to limit fluid intake, your healthcare provider will tell you how much you can have each day. Fill in your goal below.

I can have ____________ of fluid a day.

What About Alcohol?

You may be told to reduce the amount of alcohol you drink, even if you don’t need to limit other fluids. Too much alcohol damages the heart muscle. If your heart failure was caused by alcohol, you will likely be told to drink none at all. In other cases, alcohol might be okay in small amounts. Ask your healthcare provider if you need to limit alcohol or avoid it completely.
Sodium Quiz

1) The label to the right is from a package of flavored noodles. How much sodium is in half a package? How about the whole package?

2) Do the noodles contain any high-sodium ingredients? Which ones?

3) You’re planning spaghetti with tomato sauce and sausage for dinner. How can you lower the sodium content?

Answers:

1) 900 mg in half a package (1 serving); 1,800 mg in the whole package (2 servings).

2) Salt, monosodium glutamate, sodium caseinate, disodium guanylate, disodium inosinate.

3) Substitute ground turkey for sausage. Make homemade sauce without added salt, using fresh or sodium-free canned tomatoes, garlic, and herbs. Or, buy a low-sodium variety of sauce. Don’t add salt to cooking water. Have the sauce on the side, or put half as much sauce as normal on your pasta, to cut the sodium in half. Don’t add Parmesan cheese, or use only half as much as usual.

My Action Plan

Following a low-sodium diet is one of the most important things you can do to control your symptoms and help your heart. Now that you know what you need to do, take action! Start by trying one tip below. When you’ve accomplished this, try another.

- Take the saltshaker off the table. Replace it with a bottle of salt-free herb mix (without added potassium).
- Get a cookbook with low-sodium recipes. This can give you ideas for meals that are healthy AND tasty.
- Start your food shopping in the produce section. (Remember, fresh vegetables and fruits have almost no sodium!) Choose at least 3 fresh items before moving on.
- Remove high-sodium foods from your pantry or cabinets. Donate these to charity or give them to a friend.
- Practice reading labels at the grocery store. Compare the labels of two or more brands to help you decide which to buy.
- Keep a log of all the sodium you eat for at least 3 days (see page 58). Look for ways you can reduce sodium from your daily meals.

Chapter 3

Taking Medication

Most people with heart failure take several types of medication. Each type helps your heart in a different way. You may take medications for other health problems, too. This chapter will teach you:

✓ Which heart failure medications you’re taking and why.
✓ Questions you should ask your healthcare provider or pharmacist.
✓ Tips for taking medications.
Heart Failure Medications

Some heart failure medications help you live longer by improving the way your heart pumps. Others relieve symptoms and help keep you out of the hospital. Common heart failure medications are listed below. With your healthcare provider’s help, write in the names of the medications that you have been prescribed.

<table>
<thead>
<tr>
<th>Types of Medication</th>
<th>What They Do</th>
</tr>
</thead>
<tbody>
<tr>
<td>❑ <strong>ACE Inhibitor</strong></td>
<td>- Lowers blood pressure and decreases strain on the heart. This makes it easier for the heart to pump and improves blood flow.</td>
</tr>
<tr>
<td>Name:</td>
<td></td>
</tr>
</tbody>
</table>
| ❑ **Angiotensin Receptor Blocker (ARB)** | - Lowers blood pressure and decreases strain on the heart. This makes it easier for the heart to pump and improves blood flow.  
  - May be prescribed instead of an ACE inhibitor. |
| Name:                       |                                                                                                                                              |
| ❑ **Beta-Blocker**          | - Lowers blood pressure and slows heart rate. It does this by altering hormones (body chemicals) that are damaging the heart (see page 5).  
  - May strengthen the heart’s pumping action over time. |
| Name:                       |                                                                                                                                              |
| ❑ **Diuretic**              | - Helps rid the body of excess water, which reduces swelling and may improve breathing. Less fluid to pump means the heart doesn’t have to work as hard.  
  - Also called “water pills.” |
| Name:                       |                                                                                                                                              |
| ❑ **Aldosterone Antagonist** | - Alters hormones that are damaging the heart, decreases strain on the heart.  
  - Given for advanced heart failure. |
| Name:                       |                                                                                                                                              |
| ❑ **Digoxin**               | - Slows heart rate, helps heart pump more blood with each beat. So, more oxygen-rich blood travels to the body.    |
| Name:                       |                                                                                                                                              |
| ❑ **Hydralazine and Nitrate** | - Lowers blood pressure and decreases how hard the heart has to work.  
  - Two separate medications used together. May come in one “combination” pill. |
| Name:                       |  

• Lowers blood pressure and decreases how hard the heart has to work.
• Two separate medications used together. May come in one “combination” pill.
If You Have Side Effects
Some heart medications can cause side effects. Ask your healthcare provider and pharmacist what you should expect from your medications. They may know of ways to prevent or reduce side effects.

<table>
<thead>
<tr>
<th>Possible Side Effects</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low blood pressure (may make you dizzy); dry cough; change in kidney function; too much potassium in the body; swelling of mouth, lips, or tongue.</td>
<td>Dose will start low and increase slowly over time. Get medical help right away if mouth, lips, or tongue become swollen. While on this medication, you will have lab tests to monitor potassium levels and kidney function.</td>
</tr>
<tr>
<td>Low blood pressure (may make you dizzy); change in kidney function; too much potassium in the body; swelling of mouth, lips, or tongue (rare).</td>
<td>Dose will start low and increase slowly over time. Get medical help right away if mouth, lips, or tongue become swollen. While on this medication, you will have lab tests to monitor potassium levels and kidney function.</td>
</tr>
<tr>
<td>Low blood pressure (may make you dizzy); low heart rate; depression; tiredness; sexual dysfunction. Heart failure symptoms may be worse at first, but will improve over time.</td>
<td>Dose will increase as your body gets used to the medication. Don’t stop taking this medication suddenly. Call your healthcare provider if you have side effects.</td>
</tr>
<tr>
<td>Frequent urination; loss of potassium, magnesium, or sodium from body; kidney problems; low blood pressure (may make you dizzy); high blood sugar; gout; impotence; dehydration.</td>
<td>Amount you take changes depending on how much fluid is stored in your body. Potassium supplement may be prescribed (only take one if told to do so by your healthcare provider).</td>
</tr>
<tr>
<td>Changes in kidney function; low blood pressure; breast swelling, tenderness, or enlargement (in men and women); too much potassium in the body.</td>
<td>Potassium levels need to be monitored while on this medication. If levels are high, you may be told to avoid or limit high-potassium foods.</td>
</tr>
<tr>
<td>If drug level too high: slow heart rate; yellow-tinted vision; loss of appetite; stomach pain; nausea or vomiting; diarrhea; heart rhythm problems; tiredness or weakness.</td>
<td>Call your healthcare provider if you have side effects. Levels of this medication may need to be checked.</td>
</tr>
<tr>
<td>Low blood pressure (may make you dizzy); fast heart rate; headache; lupus; swelling in the legs; nausea and vomiting; flushing.</td>
<td>Call your healthcare provider if you have side effects.</td>
</tr>
</tbody>
</table>
Taking Your Medication

Taking too much or too little medication can harm your heart. Follow all of your healthcare provider’s instructions. Even if you feel fine, don’t stop taking your medications or change your dosage unless your healthcare provider tells you to.

Know What You’re Taking

Many people take three or more heart failure medications. You should know certain details about each. This helps you take them correctly and safely. Ask your healthcare provider or pharmacist about anything you don’t understand or that seems wrong. For instance, if you get a refill and the pills don’t look like before, talk to the pharmacist before taking them. For each medication, ask:

- What is the medication’s name? (Find out the brand name as well as the generic name, if any.)
- Why am I taking this? What does it do?
- How often should I take this? At what time of day?
- How much of the medication should I take? What’s my dosage?
- What should I do if I miss a dose?
- Should I expect any side effects from this medication? What should I do if I have them?
- Do I need to follow any special instructions while taking this? Are there any activities, foods, or other medications I should avoid while taking this?
- How long should I keep taking this? When I run out, should I order more?

Be Aware of Drug Interactions

Some over-the-counter medications, herbs, and supplements can interfere with your prescriptions. For example, some pain relievers cause problems with some heart medications. These include nonsteroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen and naproxen. Read the warning labels and instructions for everything you take. To be safe, show your medication list (page 59) to the pharmacist every time you buy prescription or over-the-counter medications, herbs, or supplements.
Tips for Taking Medications

Keeping track of medications can be hard, especially when you take a lot of them. These tips can help:

- **Set up a schedule.** You could take your medication every morning with breakfast, or right before you go to bed at night. Some pills may need to be taken at certain times of day or with food. Ask your healthcare provider or pharmacist if this is true for any of yours.

- **Refill prescriptions when you still have plenty of pills left.** Some suppliers, such as mail order pharmacies, may take longer to fill your prescription.

- **Use a pillbox to organize medications.** You can buy one at a grocery store or pharmacy. Different styles and sizes are available. Buy one that meets your needs.

- **If you need help, ask.** Taking medication can be confusing. Get help from a family member or friend to prevent making a dangerous mistake.

Putting your medications in a pillbox helps keep them organized.

Notes for Family and Friends

Taking medications can be hard to deal with. Your loved one may feel sad or angry about taking so many pills. You can make this easier by helping with the tips above.
My Medication List

Keep a list of all the medications you take. Share this with any doctor, dentist, pharmacist, or other healthcare provider you see. Medications and dosages will likely change as your healthcare team finds what works best for you and your heart. Be sure to keep your medication list up to date. Add any new medication or changes to your dosage as they’re made. See page 59 for a blank chart you can fill in.

Your List Should Include:

- **Generic name.** All medications have a generic name. This name is based on the ingredients in the medication.
- **Brand name.** Some medications also have a brand name. This is a name given to the medication by its manufacturer.
- **Strength (dose).** This is the amount of the medication that you take each time. It’s often measured in milligrams (mg).
- **Quantity per dose.** This is how many pills you take each time.
- **How often to take.** This is how often you take the prescribed dose.
- **Purpose of medication.** This is what the medication does (why you’re taking it).
- **Notes.** Use this space to fill in any special instructions for this medication (such as “take at bedtime”). You can also write in the healthcare provider who prescribed the medication, side effects to watch out for, and when to refill the medication.

My Action Plan

The tips below can help you keep track of your medications. Try one or two of these tips first. When you’ve accomplished these, try a few more. As you get used to taking your medications, it will become easier.

- Go to the pharmacy and buy a pillbox that meets your needs.
- Make filling your pillbox part of your weekly routine.
- Fill out the medication list on page 59. Get help from a family member, a friend, or your healthcare provider if needed.
- Make copies of your medication list. Keep a copy in your wallet. Post a copy in the room where you keep your medicine.
- Bring your medication list to doctor’s appointments.
- Make a list of any over-the-counter medications, herbs, or supplements you take. Show this list to your healthcare provider or pharmacist.
- Ask your pharmacist about side effects that can be caused by your medications.
Chapter 4

Living with a Chronic Condition

Heart failure may create new concerns and challenges in your life. When these problems are addressed, you’ll feel better and life will be more enjoyable. This chapter will help you:

✓ Keep up with activities that matter to you.
✓ Take care of your emotional health.
✓ Prepare for the future.
Enjoying Your Life

Having heart failure doesn’t mean you can’t go out and enjoy yourself. But you may need some extra preparation. When your daily routine is disrupted, it’s easier to forget about sodium goals, taking medication, and weighing yourself. You may also try to do more than your body can handle, and wind up too tired. To feel your best, plan ahead and keep your treatment in mind.

Following Your Diet

Keeping up a low-sodium diet can be hard when you’re away from home, especially at parties and during holidays. Remember, you’re out to have fun with others, not just to eat. Choose low-sodium snacks such as fresh fruit and vegetables. (Avoid dip, though—it’s often high in salt.) If you’re going to a potluck, bring your own low-sodium dish. Be polite but firm about saying “no” if someone tries to push food on you. For example: “That looks great, but my doctor says I can’t eat salt.”

Having Enough Energy

You may not have as much energy as you used to. It’s common to push yourself too hard when out with friends or on vacation. But you’ll feel better if you pace yourself, listen to your body, and know your limits. Only do as much as you can comfortably do. And rest when you need to. Think of ways to save energy so you won’t get too tired. In the airport, you could use an electric cart to get from the ticket counter to the gate. And you could take a taxi if you’re too tired to walk back to your hotel after dinner.
Traveling
It’s fine for you to travel. You just have to plan ahead. The checklist below can help you prepare for a trip. Be sure to give yourself plenty of time to take care of these issues.

<table>
<thead>
<tr>
<th>My Travel Checklist</th>
<th>While Traveling</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Before Traveling</strong></td>
<td><strong>Stick to your low-sodium diet. Even on vacation, remember your sodium goal.</strong></td>
</tr>
<tr>
<td>❑ Bring enough medication to last your whole trip and a few extra days.</td>
<td>❑ Wear a medical ID bracelet. This should list your medical conditions and any medications you’re allergic to.</td>
</tr>
<tr>
<td>❑ Pack your medications in your carry-on bags. This way you’ll have them if you get separated from your luggage.</td>
<td>❑ Get up and move around if you’re sitting for long periods of time, such as on a plane. Every hour, take a walk up and down the aisles. This helps keep blood moving in your legs.</td>
</tr>
<tr>
<td>❑ Bring a list of your medications. You can photocopy the one on page 59.</td>
<td>❑ Weigh yourself every day (if you can). Your baseline may change if you’re not using your usual scale. If so, use your weight on the first day as your baseline.</td>
</tr>
<tr>
<td>❑ Take extra copies of prescriptions, just in case you need to order more. Ask your healthcare provider if there’s any other paperwork you should carry with you.</td>
<td>❑ Watch for changes from baselines, such as your shoes feeling tighter than normal, or becoming short of breath after less activity. This is extra important if you’re not able to weigh yourself daily.</td>
</tr>
<tr>
<td>❑ Talk to your healthcare provider about what you should do if you notice changes in your heart failure symptoms while traveling.</td>
<td>❑ Take medication at the same time as usual, even when you’re in a new time zone. (If you live on the East Coast and take medication at noon, also take it at noon when you visit the West Coast.)</td>
</tr>
<tr>
<td>❑ Ask your healthcare provider if you need to avoid high-altitude areas. (High altitudes can make breathing harder.) Make sure it’s okay for you to fly.</td>
<td>❑ Other:</td>
</tr>
<tr>
<td>❑ Call your health insurance company. Make sure you’ll be covered where you’re going.</td>
<td>❑ Other:</td>
</tr>
<tr>
<td>❑ Other:</td>
<td></td>
</tr>
</tbody>
</table>
Your Emotional Health

It’s normal to feel sad or down at times. Coping with a chronic health problem is hard. To make heart failure and treatment more manageable, just focus on one day at a time. Don’t be afraid to ask others for help when you need it. The tips on these pages can help you feel better emotionally. And, they’ll help you maintain healthy relationships with friends and loved ones.

Staying in Control

To manage heart failure, you’ll need to make a lot of changes. Sometimes you may feel like you don’t have control over your life or your health. Learning how to follow your treatment plan can help you regain some control. These suggestions may help, too:

- **Keep doing the things you enjoy,** such as favorite hobbies. If you stay busy with things you like to do, your mood will improve and life will be more enjoyable.

- **Stay involved with friends and family.** Try not to withdraw from the people around you, even if you’re finding it hard to talk to them. They can be good sources of support.

- **Take an active role in your care.** Bring up questions or concerns with your healthcare team. If treatment isn’t meeting your needs, other options may be available.

- **Join a support group.** It may be easier to talk to people who know firsthand what you’re going through.
Staying Intimate

You may be concerned about your sex life. It’s normal to worry about how much your heart can handle. You’ll be glad to know that having heart failure doesn’t mean you have to give up being intimate. Keep the following in mind:

- Concerns about your health and your body might keep you from being close to your partner. Talk about your feelings. Don’t be afraid to talk to your healthcare provider, too.

- Sex may be more comfortable if you wait until you’re rested. Use positions that require less energy, such as lying on your side or your back. If you feel discomfort during sex, stop and rest.

- Ask your healthcare provider if you need to take any special precautions before or during sex.

- It’s okay if you don’t feel like having sex. You can show your love in other ways. Try hugging, giving a back rub, or just telling your partner how much you care.

If You Can’t Become Aroused

When you’re dealing with a chronic health problem, it’s not unusual to have trouble becoming aroused. Erectile dysfunction is fairly common in men. In many cases, medication can improve sexual function. For women, products such as estrogen cream and lubrication can make sex more comfortable. Talk to your healthcare provider.

Depression Can Be Treated

Coping with heart failure takes a lot of effort. This can affect how you feel. Some medications can change your mood, too. Having heart failure doesn’t mean you have to feel bad all the time, though. Talk to your healthcare provider or a therapist if you feel down most days, or are having problems with appetite or sleep. These are signs of depression. Treatment can help you feel better. When depression is under control, your overall health may also improve.
Coping with Stress

Heart failure can be stressful. Getting used to treatment, following a low-sodium diet, and dealing with symptoms can all be sources of stress. How you react to life’s ups and downs makes a big difference to your health. That’s why you must learn to cope with stress. You can’t rid your life of all stress. But you can choose how to respond.

Take Time to Relax

Stress can make you feel worried, anxious, or sick. It can even hurt your heart. To help reduce stress, make an effort to relax your body and your mind. Set aside some time each day to relax. This is time just for you. Sit or lie down in a quiet place. Try listening to soft music or relaxation tapes. Some activities can help you unwind, too. You could try yoga or tai chi, meditate, pray, or just read a good book. Can you think of other activities that help you relax?

Relaxation Techniques

The techniques below help relax your body and mind. This helps with stress and takes some strain off your heart. You may want to do these techniques for a few minutes daily.

Deep Breathing

1. Sit or lie on your back so you feel at ease. Relax your neck and shoulder muscles.
2. Breathe in slowly and deeply through your nose.
3. Pucker your lips as if to blow out a candle. Breathe out slowly. Try to breathe out for twice as long as you breathed in.
4. Repeat these steps a few times. As you do, you will become more and more relaxed. You can also do visualization at the same time.

Visualization

1. Picture yourself feeling warm and relaxed in a peaceful setting. Use your senses to fill in the details. If you imagine a tropical beach, listen to the waves crashing on the shore. Feel the sun on your face. Smell the salt air. Dig your toes in the sand.
2. Try to hold this image in your mind. If other thoughts enter your mind, relax and refocus on your peaceful setting. Let the invading thoughts fall away. Concentrate on your breathing.
Common Concerns

Recognizing and talking about a problem are the first steps to reducing stress and feeling better. Here are some common concerns that may be causing you stress:

• **Changes in energy levels.** What you can do, how you feel, and even your mood may change daily. Explain this to the people in your life. If you can’t do something, ask a family member or friend for help. A neighbor or community group may be able pitch in. Or maybe you can hire someone to help. Ask your healthcare provider or a social worker about low-cost services.

• **Money.** You may worry about healthcare costs. Start to deal with this by making a household budget. Get help from people who know you well. You may also want to talk to a financial planner. You can find one through your bank, senior services, or the phone book.

• **Changes in symptoms.** As part of treatment, you should weigh yourself and watch your symptoms every day. When symptoms change, you may worry about your health. Remember: Watching symptoms helps you be in control. If symptoms change, you can get the help you need right away. Work with your healthcare team to understand why your symptoms change and what you can do when this happens.

• **The future.** The people closest to you will want to discuss how the care you’ll need may change with time. Talk over options, such as single-story housing, in-home care, and assisted living.

Set Priorities

Try not to worry about the things you can’t do. Instead, do the things you think are most important. Also, look for ways to do tasks with less effort. Setting priorities helps ease the load on days you don’t feel as well. This ensures you’ll have more energy and be able to do what you want. Ask yourself these questions:

• Do I really need to do this today? If the answer is “yes,” take care of that task first. But keep in mind the answer can often be “no.”

• Can I change this appointment or social event to a time when I’m feeling better?

• What do I need help with? Is there someone else who can do it?
Setting and Meeting Goals

You may feel overwhelmed by what you need to do to keep heart failure under control. Don’t try to do everything at once. Accept that change takes time. Changes may be easier to manage, though, when you work toward small, realistic goals.

Set Realistic Goals

To reach your treatment goals, start small. Set goals you can really achieve. As you work toward goals, track your progress in a notebook or diary. The charts in chapter 6 can also help you meet treatment goals. When you reach a goal, reward yourself! This will help you stay motivated.

Take It Step by Step

Sometimes it helps to break big goals into smaller ones. For instance, one of your goals may be to eat only as much sodium as your healthcare provider recommends (page 14). Work toward this little by little. Here’s an example of how small, realistic goals can add up to big success:

1. **Start by leaving salt out of your food.** Take the saltshaker off the table. If you have a container of salt in the cupboard, throw it away. Buy a few no-salt spice mixes. Also follow the tips on page 14 for cooking without sodium. When you’re comfortable with these changes, move on to your next small goal.

2. **Next, cut back on high-sodium foods.** Use food labels and the chart on pages 18–19 to see which of the foods you often eat are highest in sodium. Slowly phase these out of your meals. Use the samples on pages 20–21 or your own ideas, to swap high-sodium foods with healthier ones. Don’t try to stop eating all high-sodium foods at once. Instead, be realistic about what you can do.

3. **Use the sodium log on page 58 to track your progress.** Add up all the sodium you eat in a day. Do this at least once a week. Watch how much your daily sodium intake goes down.

4. **Look for patterns in your eating habits.** If you’re having trouble reducing sodium, your sodium log can show where you’re getting hung up. If you need help, show the logs to a family member or friend, your healthcare provider, or a dietitian. Sometimes an outside perspective can help.

5. **When you get down to your daily sodium goal, celebrate!** Reward yourself for a job well done. Go to the movies or a ball game with friends. Or, get a new blouse or a book you’ve been wanting to read. How else can you reward yourself?
Make Change Work for You
To reach your goals, you’ll probably need to adjust your lifestyle. Everyone makes changes a little differently. Do whatever works best for you. These tips can help change go more smoothly:

- **Expect new emotions.** It’s common to resist or feel angry or scared about having to change. You’re not alone. Share your feelings with your healthcare team and people close to you.

- **Prepare yourself for slow, steady progress.** Change doesn’t happen overnight. When you make changes little by little, though, they add up. You may not see the benefits of treatment right away. But over time you’ll feel better, spend less time in the hospital, and be able to do more in your daily life.

- **Get support.** You don’t have to go it alone. Get support from family and friends as you try new things. Tell the people in your life how they can help you reach your goals. You might want to join a support group. There you can talk with others who have many of the same concerns, fears, and goals.

---

**What’s Stopping Me?**
It’s easy to think of reasons why change is hard. Try to face your fears and excuses head-on. What’s stopping you from reaching your goals? Write down anything that comes to mind. Be as specific as you can. For each barrier to change, try to think of at least 2 possible solutions.

<table>
<thead>
<tr>
<th>Change I want to make:</th>
<th>Change I want to make:</th>
<th>Change I want to make:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Become more active.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>What’s stopping me:</strong></td>
<td><strong>What’s stopping me:</strong></td>
<td><strong>What’s stopping me:</strong></td>
</tr>
<tr>
<td>Afraid my heart isn’t</td>
<td>Afraid my heart isn’t</td>
<td>Afraid my heart isn’t</td>
</tr>
<tr>
<td>strong enough.</td>
<td>strong enough.</td>
<td>strong enough.</td>
</tr>
<tr>
<td><strong>Possible solutions:</strong></td>
<td><strong>Possible solutions:</strong></td>
<td><strong>Possible solutions:</strong></td>
</tr>
<tr>
<td>Ask my healthcare provider about activities that are safe for me. Ask a friend to take short walks together.</td>
<td>Ask my healthcare provider about activities that are safe for me. Ask a friend to take short walks together.</td>
<td>Ask my healthcare provider about activities that are safe for me. Ask a friend to take short walks together.</td>
</tr>
</tbody>
</table>
Dealing with Sleep Problems

If you’re not sleeping well, there are many possible reasons. Many people with heart failure also have sleep apnea, a condition that causes snoring and brief periods of not breathing. Age, certain medications, and not getting enough exercise can also affect sleep. Be sure to tell your healthcare provider if you’re having sleep problems.

Tips for Sleeping Better

If shortness of breath keeps you awake, your healthcare team needs to know. Tell them if you can’t lie flat or need to sleep propped up on pillows. And if nighttime shortness of breath worsens, bring this to the team’s attention. If you have other sleep problems (not related to shortness of breath), these tips may help:

- Do deep breathing (page 36) in bed. This will relax you and help you fall asleep.
- Don’t drink caffeine any later than noon.
- Try to go to sleep and wake up around the same time every day. This helps your body establish a sleep cycle.
- Avoid napping. This can affect your sleep cycle.
- Pull window shades down. If the room isn’t dark enough, get blackout shades.
- Keep pets out of the bedroom if they bother you at night.
- Wear comfortable, loose pajamas.
- If you take medications at bedtime, talk to your doctor about changing this. The medications may be keeping you awake.

If You Have Sleep Apnea

Your doctor may prescribe a CPAP (continuous positive airway pressure) or BiPAP (bilevel positive airway pressure) device. The machine sends a gentle flow of air through a nasal mask while you sleep. This air goes through your nose and into your lungs, keeping airways open.

Tips for Using CPAP and BiPAP

- If your mask doesn’t fit or feel right, talk to your doctor or the vendor about adjusting it or trying a new one.
- If you have allergies or other problems that block your nose, get those treated. These devices work best if your nose is clear.
- If the device doesn’t feel good or work well at first, don’t stop using it. Ask your doctor or someone from your medical equipment company for ways to help make it work for you.

An airflow device may be needed if you have sleep apnea.
Notes for Family and Friends

Being close to someone with heart failure will likely mean some changes in your own life. You may be called upon to serve as a helper, caregiver, or source of support. Remember to take care of yourself, too. Heart failure can be stressful on you, as well as on your loved one.

To Help Your Loved One

It can be hard to watch someone you love coping with a chronic health problem. Here are some things you can do:

• Learn as much as you can about heart failure and your loved one’s health. This will help you know what to expect.

• Join your loved one for visits with the healthcare team. Ask any questions you have. Make sure you understand your role in treatment.

• Try to be patient. When someone you love isn’t able to do all the things he or she used to, it’s common to become angry or frustrated. Your loved one likely feels the same way. Talk about these feelings.

To Help Yourself

It’s important to help and support your loved one, but don’t forget to focus on yourself, too. Taking care of someone you love takes a huge amount of effort. These suggestions may help ease the load:

• Recognize that many aspects of your loved one’s health are out of your control. You can help and be supportive, but you can’t make heart failure go away.

• Take time out for yourself. The relaxation techniques on page 36 may help.

• Accept help from others. This can give you a much-needed break.

• Stay aware of how you react to stressful situations. Think before you respond. If you’re upset, take a deep breath, count to 10, or take a walk around the block to calm down.

• Seek help from a support group for caregivers. The resources listed on page 61 may be useful.
Preparing an Advance Medical Directive

You may still have many good years ahead of you. But heart failure can eventually make you very sick. You can plan for this with an advance medical directive. This is a legal form that lists the medical care you’d want if you could no longer express your wishes. Preparing this now can reduce stress about the future—for yourself, your caregivers, and your loved ones.

Writing Down Your Wishes

To get started, think about what type of treatment you’d want if you couldn’t speak for yourself. Then, write down your wishes. There are two ways to do this (described below). Some states allow only one kind of advance directive. Some let you do both kinds. And some put both on the same form.

A durable power of attorney lets you name an agent to decide on treatment for you. He or she can only decide on your treatment when you can’t express your wishes yourself. You don’t have to be about to die. If you can’t speak for yourself but are still likely to recover, your agent could speak for you then, too.

A living will lets you state which treatments you would or would not want near the end of your life. It often applies only if you won’t live without medical treatment. A living will takes effect only when you are no longer able to express your wishes.

Choosing Your Agent

Your agent could be a family member, close friend, minister, priest, or rabbi. (In most states, it can’t be your healthcare provider.) Name one agent, and one or two alternates. They will serve as backup if your first agent can’t be reached. Your agent should be an adult over age 18 whom you trust. He or she should know what you want and support your treatment choices.

Notes for Family and Friends

Your loved one may ask you to serve as his or her agent. This is a big responsibility. Your duty is to see that your loved one’s wishes are followed—even if those wishes are not what you would want. In some cases, this may mean making a hard decision based on what your loved one has told you. Make sure you know:

• What you need to do, as your loved one’s agent. If you want, you can talk to your loved one’s healthcare provider about your role.

• What your loved one wants in certain situations. If possible, this should be put in writing. You may need to ask questions to understand what your loved one really wants. But be prepared to listen and respect his or her wishes.
Weighing Your Treatment Options

What treatments would you want if your life were about to end? Your wishes might change depending on your overall health and chance of recovery. Some treatment options are described below. These treatments can usually be chosen or refused at any time. In most cases, you can also try a treatment, then decide to stop it. (This may vary, depending on state laws.) Your healthcare provider can tell you more about these treatments. Make sure your agent knows how you feel about each option.

• CPR (cardiopulmonary resuscitation) tries to restart your heart and lungs if they stop working.

• A respirator keeps you breathing. Air is pumped into your lungs through a tube that’s put in your windpipe.

• Tube feeding provides you with food and fluids through a tube or IV. It is given if you can’t chew or swallow.

• A kidney (dialysis) machine cleans your blood when your kidneys can no longer work on their own.

• Hospice care means comfort care. Hospice nursing staff may help with bathing or provide food and fluids by mouth. This care is given during the last stages of an illness.

• Strong pain medication can be given to help keep you comfortable.

If You Don’t Want CPR

What if your heart and lungs stopped working while you were a patient in a hospital or nursing home? Would you want CPR? If not, talk to your healthcare provider about a DNR (Do Not Resuscitate) order. This tells a healthcare provider or paramedic not to perform CPR.
What’s Most Important to You?

When you’re busy coping with daily life, it can be hard to see the big picture. Think about what matters to you. This will help you set priorities, manage daily life, and plan for the future. Read each statement below. How important is it for you to do each of these things? Put a checkmark in the column that best describes your feelings.

<table>
<thead>
<tr>
<th>I want to:</th>
<th>IMPORTANCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Care for myself.</td>
<td></td>
</tr>
<tr>
<td>2. Get out of bed every day.</td>
<td></td>
</tr>
<tr>
<td>3. Continue with favorite hobbies or activities.</td>
<td></td>
</tr>
<tr>
<td>4. Have energy to enjoy my children and grandchildren.</td>
<td></td>
</tr>
<tr>
<td>5. Go out on my own.</td>
<td></td>
</tr>
<tr>
<td>6. Spend time with family and friends.</td>
<td></td>
</tr>
<tr>
<td>7. Travel and see new places.</td>
<td></td>
</tr>
<tr>
<td>8. Manage my own expenses.</td>
<td></td>
</tr>
<tr>
<td>10. Feel less anxious about my health.</td>
<td></td>
</tr>
<tr>
<td>11. Stay in my home as long as I live.</td>
<td></td>
</tr>
<tr>
<td>12. Live without a lot of pain.</td>
<td></td>
</tr>
<tr>
<td>13. Live without needing machines or medical devices to keep me alive.</td>
<td></td>
</tr>
<tr>
<td>14. Live as long as I can.</td>
<td></td>
</tr>
<tr>
<td>15. Die peacefully and quickly if I’m very sick and have no chance of getting better.</td>
<td></td>
</tr>
</tbody>
</table>

Other things that are important to me:

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
Chapter 5

Steps for a Healthier Heart

Even though you have heart failure, you can help prevent other heart problems. Doing so will help you feel better and make your heart healthier. This chapter will help you:

✓ Stay active to give your heart the exercise it needs.

✓ Cut down on foods that clog arteries and lead to heart attack and stroke.

✓ Quit smoking for good.
Stay Active to Help Your Heart

You may think having heart failure means you should be less active. This isn’t true. In fact, when you have heart failure it’s extra important to stay active. Aerobic activities, such as walking, help exercise the heart. When you’re active you’ll have more energy, feel less tired, and have fewer symptoms. Even adding a little activity to your daily routine can help your heart.

See Your Healthcare Provider

Talk to your healthcare provider about how active you should be. He or she will help you set up a safe activity plan that meets your needs. Ask about types of exercises or activities you can try. Also ask if you need to take any special precautions due to heart failure or other health problems.

Choose Your Activity

Think about the activities you discussed with your healthcare provider. Choose the ones that appeal to you. You’re more likely to stay active if you’re having fun!

- Walking is a good way to get oxygen moving through the body. You can walk outdoors or indoors, such as around the house or at a shopping mall.

- Swimming, water aerobics, and light gardening are other options that might work for you.

- If you’re too short of breath to do other types of activity, try chair exercises, such as moving your arms and legs while sitting.

- A cardiac rehabilitation program may be an option. This is a supervised exercise program that takes place in a medical center. It can help you feel more confident about how much your heart can handle. Ask your healthcare provider if you qualify.
Get Moving
Stay as active as feels comfortable. Do as much as you can as long as you don’t feel tired or short of breath. Here are some tips:

• Make activity a regular part of your day. Plan activities like a walk around the block. You may enjoy walking with friends or a family member.

• Pace yourself. If you’re too short of breath to speak a full sentence, you’re pushing yourself too hard.

• Remember your baselines (page 9). Compare how much you can do today to how much you did yesterday. This lets you know if your heart failure is worsening.

Stay Safe
Follow these guidelines to stay safe during activity:

• Wear supportive shoes with padded soles and arch support.

• Wear a medical ID bracelet that lists your health problems and any medications you’re allergic to.

• If you feel fatigued or short of breath, stop and rest. Return to the activity when you feel better.

• Be aware of what’s happening around you. Exercise with a friend—there’s safety in numbers. Keep a cell phone with you in case of an emergency.

Signs of Overexertion
Stop what you’re doing and get medical help if you have:

• Pain, discomfort, burning, tightness, heaviness, or pressure in your chest.

• Unusual aching in your arm, shoulders, neck, jaw, or back.

• A racing or skipping heartbeat.

• Shortness of breath that’s worse than normal or doesn’t improve with rest.

• Extreme tiredness.

• Lightheadedness, dizziness, or nausea.
Adding Activity to Your Day

You may be surprised to see how small activities add up. How can you work activity into your daily routine? How can you make it more enjoyable? The suggestions below may lead to some ideas of your own.

Make Activity Part of Your Day…

❑ Go to your favorite store and walk up and down the aisles. (This may be easier if you push a shopping cart while you walk.)

❑ Stretch your arms and legs while watching TV.

❑ Park your car a little farther from a store and walk the rest of the way.

❑ Plan ahead to take short walks during the day.

❑ Add up the minutes of activity you do or steps you take in a day (see the next page).

Try your own ideas:

………………………………………………………………………………………………………………………………………………

………………………………………………………………………………………………………………………………………………

………………………………………………………………………………………………………………………………………………

………………………………………………………………………………………………………………………………………………

…And Make It Fun!

❑ Visit with friends by walking around the neighborhood together.

❑ Take your dog for a walk in the park.

❑ Listen to a comedy tape or favorite music while doing household chores.

❑ Walk through a museum, mall, or zoo with your family.

❑ Bowl, fish, or golf with friends.

❑ Read a book or magazine while you ride an exercise bike.

Try your own ideas:

………………………………………………………………………………………………………………………………………………

………………………………………………………………………………………………………………………………………………

………………………………………………………………………………………………………………………………………………

………………………………………………………………………………………………………………………………………………
A Pedometer Makes Every Step Count

A pedometer is a small device that keeps track of how many steps you take. You can clip it to your belt and go about your daily routine. At the end of the day, the pedometer shows your total number of steps. This is an easy way to track daily activity. Use a pedometer to set small goals for yourself. Try walking a few more steps every day. With every step, you’re doing a little extra to help your heart.

My Activity Log

A log like the one below can help you track how much you do in a day. You may be surprised by how it adds up! Look at the samples below. Then try tracking your own activity for a few days. Set goals of a few more minutes or steps each day or each week. A blank activity log appears on page 60.

<table>
<thead>
<tr>
<th>Date:</th>
<th>What I Did</th>
<th>Total Minutes of Activity</th>
<th>Total Steps per Day</th>
</tr>
</thead>
<tbody>
<tr>
<td>June 5</td>
<td>Walked to church — 10 minutes</td>
<td>28 minutes</td>
<td>4,054</td>
</tr>
<tr>
<td></td>
<td>Walked home — 10 minutes</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Pulled weeds in garden — 8 minutes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>June 6</td>
<td>Played catch with grandkids — 10 minutes</td>
<td>30 minutes</td>
<td>4,105</td>
</tr>
<tr>
<td></td>
<td>Vacuumed — 10 minutes</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Walked dog — 10 minutes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>June 7</td>
<td>Went grocery shopping — 20 minutes</td>
<td>33 minutes</td>
<td>4,183</td>
</tr>
<tr>
<td></td>
<td>Put away laundry — 13 minutes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

My Activity Goals

Minutes per day: ________________  Steps per day: ________________
Heart-Healthy Eating

The most important eating change you can make is to reduce sodium (chapter 2). But other foods can also cause heart problems. Foods high in cholesterol and certain fats can clog arteries. This could result in a heart attack or stroke. Cutting down on these foods will help protect your heart. Not everyone with heart failure needs to eat this way. Ask your healthcare provider or dietitian if you should follow these guidelines.

Choose Fats Wisely

Your body needs some fats to stay healthy. But eating too much of certain fats is bad for your heart. Try to choose the healthier fats and avoid unhealthy ones.

<table>
<thead>
<tr>
<th>Type of fat</th>
<th>Choose</th>
<th>Limit</th>
<th>Avoid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unsaturated fat</td>
<td>Saturated fat</td>
<td>Trans fat</td>
<td></td>
</tr>
<tr>
<td>Nuts, seeds, fish, avocados, some vegetable oils (such as olive, canola, and soy)</td>
<td>Animal foods such as beef, pork, or high-fat dairy</td>
<td>Snack foods, french fries and other fast food, shortening, most margarines</td>
<td></td>
</tr>
</tbody>
</table>

What you should do

- Eat unsaturated fat some of the time. For instance, cook with olive or canola oil instead of butter.
- Eat as little saturated fat as you can. To cut down, choose fat-free milk and lean meats, chicken, or fish.
- Avoid foods with trans fat. Check for it on food labels and on the ingredients list in the form of hydrogenated oils.

My Fat and Cholesterol Goals

If you have been told to limit fat and cholesterol, work with your healthcare provider to set daily goals for the following:

Total fat: _______ g  Saturated fat: _______ g  Dietary cholesterol: _______ mg
What About Cholesterol?

Cholesterol is a waxy, fatlike substance. Your body needs some cholesterol to stay healthy. But too much can clog arteries and cause heart problems. Cholesterol is absorbed into the blood from foods, such as egg yolks, organ meats, and fatty animal products. Cutting down on these helps lower the amount of cholesterol in your blood and reduces your heart attack risk.

Slim Down Your Meals

Just as you’re learning to cook with less salt, you can also learn to cook with less fat and cholesterol. Some foods may taste a little different at first, but you’ll get used to them. Try the following:

- Bake, steam, microwave, or broil foods instead of frying.
- Cook with olive oil, canola oil, or trans-fat-free margarine instead of butter or normal margarine.
- Before cooking, trim fat from meat and remove the skin from chicken.
- Chill soups and stews. Skim off the fat before reheating and serving.
- Try using half as much cheese as a recipe calls for. Or less! (Doing this will help you meet your sodium goal, too.)
- Remember that foods marked “low fat” can be high in sodium. Read food labels carefully so you can stick to your sodium goal.

What About My Weight?

Being overweight increases the work your heart has to do. It also raises your risk of many other health problems. (This is not the same as gaining a few pounds of water weight.) If you’re overweight, work with your healthcare provider or a dietitian to set safe eating and weight loss goals.
Quitting Smoking
If you smoke, quitting is one of the most important changes you can make. Quitting reduces your chances of heart attack and other health problems. And after you quit you may feel better, have more energy, and notice less shortness of breath. Quitting smoking isn’t easy, but millions of people have done it. You can too!

Have a “Quit Plan”
Quitting takes patience and a plan. You’ll boost your chances of success by forming a “quit plan” ahead of time. Plan when you’ll quit, how you’ll deal with urges to smoke, and who you’ll ask for support. You may also want to set a quit date (the day you’ll put your plan in motion).

Track Your Triggers
Do certain emotions, such as frustration, trigger your urge to smoke? How about specific people or places? Knowing the situations that make you want to smoke can help you avoid them in the future. For one day, write down each time you smoke or have the urge to smoke. Record the time of day and what you were doing just before you had the urge. Do you see any patterns? Think about ways you can avoid or deal with these triggers.

Notes for Family and Friends
Your loved one will need lots of support to quit smoking. Here’s what you can do:
• Encourage your loved one to talk to you when faced with the urge to smoke.
• Believe in your loved one’s ability to quit. Saying “I know you can do it” goes a long way.
• If you’re a smoker, offer to quit, too. If you’re not ready to quit, at least don’t smoke in front of your loved one or keep cigarettes in the house.
Choose a Quit-Smoking Product to Help

Using a quit-smoking product makes you much more likely to quit for good. Some products are available over the counter. Others are by prescription only. Talk to your healthcare provider about these products. He or she can help you make a decision about which to try.

<table>
<thead>
<tr>
<th>Over the Counter</th>
<th>How It Works</th>
<th>Length of Treatment</th>
<th>Possible Side Effects</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nicotine Patch*</td>
<td>• Gives you nicotine through the skin at a constant rate</td>
<td>Take smaller and smaller doses over</td>
<td>• Skin rash, itching</td>
</tr>
<tr>
<td></td>
<td>• Ask your doctor about combining the patch with nicotine gum or nasal spray</td>
<td>about 2 months</td>
<td>• Insomnia</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Nausea</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Dry mouth</td>
</tr>
<tr>
<td>Nicotine Gum*</td>
<td>• Gives you nicotine through the mouth</td>
<td>Take smaller and smaller doses over</td>
<td>• Sore mouth or jaw</td>
</tr>
<tr>
<td></td>
<td></td>
<td>about 2 to 3 months</td>
<td>• Indigestion</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Dizziness, nausea</td>
</tr>
<tr>
<td>Nicotine Lozenges*</td>
<td>• Gives you nicotine through the mouth</td>
<td>Take smaller and smaller doses over</td>
<td>• Sore mouth</td>
</tr>
<tr>
<td></td>
<td></td>
<td>about 3 months</td>
<td>• Belching</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Dizziness, nausea, weakness</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>By Prescription Only</th>
<th>How It Works</th>
<th>Length of Treatment</th>
<th>Possible Side Effects</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nicotine Nasal Spray*</td>
<td>• Gives you nicotine through the nose</td>
<td>Use for 3 to 6 months</td>
<td>• Irritated nose, eyes, throat</td>
</tr>
<tr>
<td></td>
<td>• Works more quickly than other nicotine products</td>
<td></td>
<td>• Coughing, sneezing</td>
</tr>
<tr>
<td>Nicotine Inhaler*</td>
<td>• Nicotine is breathed in through the mouth (similar to a cigarette)</td>
<td>Use for up to 6 months</td>
<td>• Mouth and throat irritation</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Coughing</td>
</tr>
<tr>
<td>Bupropion SR</td>
<td>• Reduces withdrawal symptoms and urges</td>
<td>Start 2 weeks before you quit, then</td>
<td>• Insomnia</td>
</tr>
<tr>
<td></td>
<td>• Does not contain nicotine</td>
<td>take for 2 to 6 months</td>
<td>• Dry mouth</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Shakiness</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Skin rash</td>
</tr>
</tbody>
</table>

All products conflict with certain other medications or medical conditions. If you have questions, ask your pharmacist or doctor.

*These products contain nicotine. Don’t smoke while using a nicotine product. Doing so could give you a dangerous overdose of nicotine.
My Action Plan

When you make heart-healthy choices, you’ll be healthier and feel better. The tips below can help you get started. Check off the ones you’d like to try.

Staying Active

When you’re active, you’ll have more energy to spend quality time with your family and friends.

❑ Talk to your healthcare provider about safe activities you can do.
❑ Ask a friend to be your walking buddy.
❑ Do a little more activity today than you did yesterday.
❑ Put aside time each week to share an activity with a family member or friend.
❑ Use a pedometer to count all the steps you take in a day. Set a goal of taking a few more steps each day.

Heart-Healthy Eating

Heart-healthy eating is good for the whole family—especially children and grandchildren, since it helps them develop good habits.

❑ Use margarine without trans fat instead of regular margarine or butter.
❑ Get help from a dietitian to plan heart-healthy meals for yourself and your family.
❑ Use low-fat or fat-free milk in your coffee or tea instead of cream or half-and-half.
❑ Choose fish over red meat.
❑ Read food labels to choose products with the least saturated fat and cholesterol. (Don’t forget to watch for sodium, too!)

Quitting Smoking

After you quit smoking, you won’t be putting the people around you at risk of secondhand smoke. If you have family members or close friends who smoke, your success may motivate them to quit, too.

❑ Write a letter to say “good-bye” to your cigarettes.
❑ Join a smoking cessation class or ex-smoker’s support group.
❑ Talk to your healthcare provider about over-the-counter or prescription medications to help you quit.
❑ Tape a picture of your kids or grandkids to your pack of cigarettes to remind you of a good reason to quit.
❑ Make a list of the reasons you want to quit smoking. Put this where you’ll see it often (such as on the refrigerator or the bathroom mirror).
Chapter 6

Heart Failure Toolkit

This chapter gives you tools to manage heart failure on a daily basis. Make copies of the charts so you can use them more than once.

MY HEART CARE CONTRACT

I, __________________________, am committed to caring for my health. I will follow my heart failure treatment plan, pay attention to my symptoms, and work closely with my healthcare team to keep heart failure under control.

_____________________________  ______________________________
Signature                      Date

_____________________________  ______________________________
Witness signature              Date
# My Symptom Chart

Use this chart to track your weight, blood pressure, and heart rate every day. Also keep track of changes in symptoms or any special notes. Bring it with you when you visit your healthcare team. (The chart contains enough space for two weeks. Make extra copies before you fill it out the first time.)

**Week starting: __________________________**

<table>
<thead>
<tr>
<th>Day</th>
<th>Weight</th>
<th>Blood Pressure</th>
<th>Heart Rate</th>
<th>Change in Symptoms / Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mon</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tue</td>
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<td></td>
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<td>Wed</td>
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<td>Sat</td>
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<td>Sun</td>
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<td>Mon</td>
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<td>Sat</td>
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<tr>
<td>Sun</td>
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</tbody>
</table>

**My Baselines**

Weight: ________ Blood pressure: ____________ Heart rate: ____________

Make extra copies of this chart before you use it the first time.
## Symptom Action Plan

Talk to your healthcare provider about what to do in case of worsening symptoms.

<table>
<thead>
<tr>
<th>If I notice…</th>
<th>I should…</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weight gain of 2 or more pounds in 1 day, or 5 or more pounds in 1 week</td>
<td></td>
</tr>
<tr>
<td>Swelling (shoes or rings don’t fit, change in belt size)</td>
<td></td>
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<tr>
<td>Increased shortness of breath with activity</td>
<td></td>
</tr>
<tr>
<td>Unable to lie flat or breathe comfortably in bed</td>
<td></td>
</tr>
<tr>
<td>Decreased urination</td>
<td></td>
</tr>
<tr>
<td>Feeling much more tired than usual</td>
<td></td>
</tr>
<tr>
<td><strong>Symptom:</strong></td>
<td></td>
</tr>
</tbody>
</table>
**My Sodium Log**

Use this log to track your sodium intake. If your healthcare provider wants you to track other information (such as fluid, fat, or carbohydrates), use the “Notes” section.

Date: __________________________

<table>
<thead>
<tr>
<th>Meal</th>
<th>Food Eaten</th>
<th>Amount</th>
<th>Sodium (mg)</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breakfast</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Snack</td>
<td></td>
<td></td>
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<tr>
<td>Lunch</td>
<td></td>
<td></td>
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<tr>
<td>Snack</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dinner</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Snack</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total Sodium:**

**My Sodium Goal:** __________ mg per day

Make extra copies of this chart before you use it the first time.
# My Medication List

Use this chart to keep track of all your medications. Any time your healthcare provider prescribes a medication, tells you to stop one, or changes a dosage, record the change here. Share this list with any new healthcare provider you visit. Keep a copy in your wallet or purse. (Photocopy this chart before you write on it the first time.)

<table>
<thead>
<tr>
<th>Generic Name</th>
<th>Brand Name (if any)</th>
<th>Strength (dose)</th>
<th>Quantity per Dose</th>
<th>How Often to Take</th>
<th>Purpose</th>
<th>Notes / Date</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

List all over-the-counter medications, vitamins, minerals, herbs, and supplements you take:

________________________________________________________________________
My Activity Log
Use this chart to keep track of the minutes of activity you do each day.

<table>
<thead>
<tr>
<th>Date:</th>
<th>What I Did</th>
<th>Total Minutes of Activity</th>
<th>Total Steps per Day</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

**My Activity Goals:** ____________ minutes per day  ____________ steps per day

Make extra copies of this chart before you use it the first time.
Resources

These resources can help you and the people close to you learn more about heart failure, treatment, and how to cope with a chronic health problem.

American Association of Cardiovascular and Pulmonary Rehabilitation
www.aacvpr.org

American Association of Heart Failure Nurses
www.aahfn.org

American Association of Retired Persons
888-687-2277
www.aarp.org

American Heart Association
800-242-8721
www.americanheart.org/heartfailure

Heart Failure Online
www.heartfailure.org

Heart Failure Society of America
www.abouthf.org

Medicare Hotline
800-633-4227

Mrs. Dash
(low-sodium recipes and cooking tips)
www.mrsdash.com

My Pill Box
(for help organizing medications)
www.mypillbox.org

National Coalition for Women with Heart Disease
202-728-7199
www.womenheart.org

Needy Meds
(for help paying for medications)
www.needymeds.com

Smokefree.gov
877-448-7848
www.smokefree.gov

Well Spouse Association
(for family members and other caregivers)
800-838-0879
www.wellspouse.org

More Information Is Only a Click Away!

The websites listed above are only a few of many great online resources. Use a search engine (such as www.google.com) to look up “heart failure,” “low-sodium recipes,” “quitting smoking,” or any other topic you want to know more about. If you find sites you like, you can add them to your browser’s Favorites menu so they’re easy to find again. Or write the site’s address (called a “URL”) below. If you don’t use the Internet at home, many public libraries have free access. A librarian can help you get started.

Site name: __________________________________________________________
URL: ________________________________________________________________

Site name: __________________________________________________________
URL: ________________________________________________________________
Glossary of Terms

**ACE (angiotensin converting enzyme) inhibitor** A heart failure medication that stops the body from making angiotensin. As a result, the body’s blood vessels expand. This lowers blood pressure and decreases strain on the heart.

**Aldosterone antagonist** A heart failure medication that blocks the effects of aldosterone (a hormone that can make heart failure worse). It helps decrease hospital visits.

**Angiotensin** A substance in the blood that makes blood vessels tighten. This raises blood pressure and makes the heart work harder. Some heart failure medications prevent angiotensin from working.

**ARB (angiotensin receptor blocker)** A heart failure medication that lowers blood pressure and decreases strain on the heart. It does this by blocking angiotensin. It may be prescribed for some patients instead of ACE inhibitors.

**Atria** The heart’s upper chambers (singular: atrium). Oxygen-rich blood coming from the lungs enters the left atrium. Oxygen-poor blood coming from the body enters the right atrium.

**Atrial fibrillation** A heart rhythm problem that occurs when the atria beat very quickly and unevenly. During atrial fibrillation, the heart can’t pump blood effectively.

**B-type natriuretic peptide (BNP)** A hormone that’s made when the heart is overworked. BNP can be measured with a blood test. This test may be done to help diagnose heart failure.

**Baseline** A number or statement that helps show what’s normal for you. Establishing baselines can help you manage heart failure symptoms on a daily basis.

**Beta-blocker** A heart failure medication that affects hormones that make the heart pump too fast. This lowers blood pressure, prevents heart attacks, and slows heart rate.

**Cardiomyopathy** A disease of the heart muscle that can weaken the heart and hinder its ability to pump. It can lead to heart failure.

**Chronic** Lifelong or ongoing. A chronic condition, such as heart failure, can be managed with treatment but not cured.

**Congenital health problem** A health problem that is present at birth. Sometimes it’s an inherited problem. Heart failure can be due to a congenital heart defect.

**Congestive heart failure** Another term for heart failure. “Congestive” refers to the fluid that backs up in the body.

**Decompensated heart failure** When heart failure is out of control. It may result in severe swelling, shortness of breath, and other serious symptoms.
**Diastolic heart failure** When the heart muscle becomes stiff. The ventricles don’t relax normally, which keeps them from filling with blood. Even if your ejection fraction is normal, you can be diagnosed with diastolic heart failure based on your symptoms. Also called “diastolic dysfunction” or “heart failure with preserved systolic function.”

**Diuretic** A heart failure medication that helps rid the body of excess water. This makes breathing easier and reduces swelling. Also called “water pills.”

**Echocardiogram** A test that uses ultrasound waves to show the structure and movement of the heart muscle. This shows how well the heart pumps. It also shows if the heart is enlarged, the thickness of the heart’s walls, and valve problems. It may be done to help diagnose heart failure. Also called “echo.”

**Edema** Swelling that occurs when the body is storing extra water. It can be a sign of worsening heart failure. Edema may occur in the abdomen, hands, wrists, legs, ankles, or feet.

**Ejection fraction (EF)** A measure of how much blood the heart pumps out with each beat. This number helps show if you have heart failure. Normal EF is around 50% or more.

**Electrocardiogram** A test that records the way electrical signals travel through the heart. Small pads (electrodes) are placed on your chest, arms, and legs. Wires connect the pads to an electrocardiogram machine, which records your heart’s signals. This shows the pattern of your heartbeat. Also called “ECG” or “EKG.”

**Hydralazine** A medication taken in combination with a nitrate. Together, they lower blood pressure and decrease the heart’s work.

**Idiopathic** No known cause. Heart failure can have idiopathic (unknown) causes.

**Nitrate** A medication taken in combination with hydralazine. Together, they lower blood pressure and decrease the heart’s work.

**Sodium** A substance found in salt and many foods. When you have heart failure, sodium should be avoided to prevent the body from storing extra fluid. Sodium is “hidden” in many foods that don’t even taste salty. It’s also listed on food labels. Some high-sodium ingredients that may be listed on food labels include sodium phosphate, baking soda, and monosodium glutamate (MSG).

**Systolic heart failure** When the heart muscle becomes weak and enlarged. The weakened muscle can’t squeeze hard enough to eject blood out of the ventricles. As a result, less blood may be pumped out of the heart. With systolic heart failure, the ejection fraction tends to be lower than normal. Also called “systolic dysfunction.”

**Ventricles** The heart’s lower chambers. They squeeze to push blood out of the heart. Oxygen-poor blood leaves the right ventricle to go to the lungs. Oxygen-rich blood leaves the left ventricle to go to the rest of the body.
My Healthcare Team

Keep the names and phone numbers of your healthcare providers handy. This way it’s easier to contact them when you need to. Make sure your family and caregivers know where to find this information if needed.

Primary healthcare provider:

_________________________________________ Phone number: ________________________

Pharmacist:

_________________________________________ Phone number: ________________________

Other members of my healthcare team:

_________________________________________ Phone number: ________________________

_________________________________________ Phone number: ________________________

_________________________________________ Phone number: ________________________

_________________________________________ Phone number: ________________________

Use this space to write questions you want to ask at your next appointment:

_________________________________________

_________________________________________

_________________________________________

_________________________________________