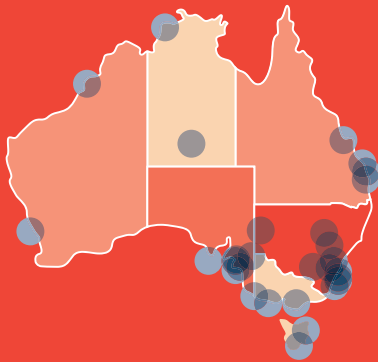
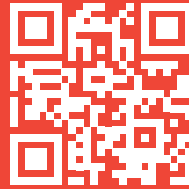


Living with Heart Failure

Please scan the QR code to visit Heart Support Australia's website for additional information and access our online resources to further support your journey.



Being part of Heart Support Australia and sharing your lived experience benefits your heart health in many ways.

A: Level 3/50 Launceston St, Phillip
ACT 2606, Australia

E: office@heartnet.org.au

P: 02 6253 0097

W: heartsupport.org.au



@heartsupportaustralia



@heartsupportaus



@heart-support-australia

Heart Support Australia acknowledges the Traditional Owners and custodians of country throughout Australia and their continuing connection to land, waters, and community. We pay our respect to them and their cultures, and Elders past, present and future.



**KNOW YOUR NUMBERS
TREAT YOUR RISK**

Help reduce the chances of a secondary heart event by knowing your numbers. Visit www.knowyournumberstreatyourrisk.com.au

References:

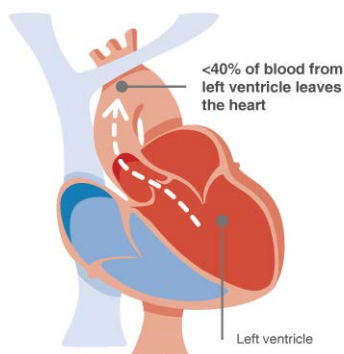
1. Australian Institute of Health and Welfare. Cardiovascular disease. Cat. no. CVD 83. Canberra, ACT: AIHW, 2020. Available at www.aihw.gov.au/getmedia/36485187-b5a4-4db3-b4b5-e79da76dde48/Cardiovascular-disease.pdf.aspx?inline=true [Accessed 26 February 2022]. Search PubMed
2. Atherton, John J., Sindone, Andrew, De Pasquale, Carmine G., Driscoll, Andrea, MacDonald, Peter S., Hopper, Ingrid, Kistler, Peter M., Briffa, Tom, Wong, James, Abhayaratna, Walter, Thomas, Liza, Audehm, Ralph, Newton, Phillip, O'Loughlin, Joan, Branagan, Maree, Connell, Cia, & other, and (2018)
3. National Heart Foundation of Australia and Cardiac Society of Australia and New Zealand: Guidelines for the Prevention, Detection, and Management of Heart Failure in Australia 2018. Heart Lung and Circulation, 27(10), pp. 1123-1208.
3. John W. Ostrominski, Ersilia M. DeFilippis, Kannu Bansal, Ralph J. Riello, Blykem Boskurt, Paul A. Heidenreich, Muthiah Vaduganathan, Contemporary American and European Guidelines for Heart Failure Management, JACC: Heart Failure, 12, 5, (810-825), (2024). <https://doi.org/10.1016/j.jchf.2024.02.020>
4. Bauersachs J. Heart failure drug treatment: the fantastic four. Eur Heart J. 2021 Feb 11;42(6):681-683. doi: 10.1093/eurheartj/ehaa1012. PMID: 33447845; PMCID: PMC7878007.
5. Butler J, Zannad F, Filippatos G, Anker SD, Packer M.. Totality of evidence in trials of sodium-glucose co-transporter-2 inhibitors in the patients with heart failure with reduced ejection fraction: implications for clinical practice. Eur Heart J 2020;41:3398-3401
6. Bassi NS, Ziaieian B, Yancy CW, Fonarow GC.. Association of optimal implementation of sodium-glucose cotransporter 2 inhibitor therapy with outcome for patients with heart failure. JAMA Cardiol 2020;5:1-5.
7. Zannad F, Ferreira JP, Pocock SJ, Anker SD, Butler J, Filippatos G, Brueckmann M, Ofstad AP, Pfarr E, Jamal W, Packer M. SGLT2 inhibitors in patients with heart failure with reduced ejection fraction: a meta-analysis of the EMPEROR-Reduced and DAPA-HF trials. Lancet. 2020 Sep 19;396(10254):819-829. doi: 10.1016/S0140-6736(20)31824-9. Epub 2020 Aug 30. PMID: 32877652. <https://pubmed.ncbi.nlm.nih.gov/32877652/>
8. Morton G, Masters J, Cowburn PJ. Multidisciplinary team approach to heart failure management. Heart 2018;104(16):1376-82. doi: 10.1136/heartjnl-2016-310598

Living with Heart Failure

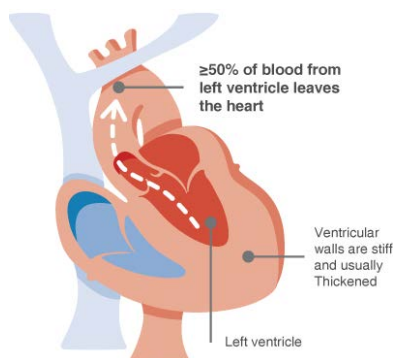
Heart Failure is the leading form of cardiovascular disease in Australia and is a serious and life changing condition.¹ There are many ways to manage heart failure to help you stay out of hospital, live longer and feel better. Understanding your condition and being in control of your symptoms will help you to feel more in charge.

What is heart failure?

Heart Failure with Reduced Ejection Fraction (HFrEF)



Heart Failure with Preserved Ejection Fraction (HFpEF)



Your heart is a muscle which pumps blood and oxygen around your body. Heart failure occurs when your heart pump is not keeping up with the demands made by the body. There are two common forms of heart failure.²

- Heart Failure with Reduced Ejection Fraction (HFrEF)
 - Also known as systolic heart failure, this is when the walls within the left ventricle are weakened and loses its ability to contract normally and cannot create enough force to push enough blood into circulation.
- Heart Failure with Preserved Ejection Fraction (HFpEF)
 - Also known as diastolic heart failure, this is when the walls within the left ventricle become stiff and are unable to relax normally, and therefore unable to properly fill the heart with blood during the resting period between each heartbeat.

How do I know if I have heart failure?

General symptoms of heart failure include

- Shortness of breath when you're resting or on little exertion.
- Swelling of the feet, ankles, legs, abdomen or lower back.
- Fatigue.

Tests to confirm a diagnosis may include

- Electrocardiogram (ECG) to assess your heart rate and rhythm.
- Blood test to measure BNP (B-type natriuretic peptide) as raised levels of this protein can be a sign you're at risk of heart failure.
- Chest X-ray to show an image of your heart and lungs.
- An echocardiogram of your heart.
- An MRI to show detailed pictures of your heart.
- General blood tests to check how well your kidneys are working.

What causes heart failure?

Heart failure can be caused by one or more conditions.³ The most common causes are.

- Heart attack.
- High blood pressure.
- Cardiomyopathy.
- Problems with your heart valves.

Heart failure can also be caused by:

- Viral infections that affect your heart muscle.
- Too much alcohol or recreational drugs.
- An abnormal heart rhythm (arrhythmia).
- Some chemotherapy medications.
- Congenital heart disease.
- Thyroid gland disease.
- Anaemia.

Treatment options for my heart



Take your medications as prescribed

If diagnosed with HFrEF, you should be taking four types of medications known as Four Pillars of Therapy, or, for those with HFpEF, you may be taking a combination of these medications, which, when taken together, benefits the heart and improves your long-term outcome.^{4,5,6,7}

These medications

- Strengthen your heart.
- Control your symptoms.
- Improve your quality of life.
- Prevent your condition from getting worse.
- Improve your life expectancy.
- Treat the cause of your heart failure.

4 Pillars of Therapy^{4,5,6,7}

Beta-blocker

Slow and steady the heart beat.

Mineralocorticoid receptor antagonist (MRA)

Prevent the build up of fluid by blocking a hormone called aldosterone.

Sodium-glucose co-transporter 2 inhibitor (SGLT2i)

Assists the heart cells to work more efficiently and reduce the risk of hospitalisation or death.

Renin-angiotensin-aldosterone system (RAAS) Inhibitors

These widen the arteries which makes it easier for the left ventricle to pump the blood round the body.

You may be given “water tablets” diuretics to get rid of excess fluid.

Ensure your vaccinations for influenza, pneumococcal, COVID-19, shingles and RSV are up to date.

CALL AN AMBULANCE if you have

- Severe shortness of breath.
- Chest pain that doesn't go away in 10 minutes of taking your medication.
- You feel faint or think you may blackout.
- You feel unwell and frightened.

What can I do?

Controlling and managing your heart failure is important via regular check-ups and taking of your medications daily. However understanding a worsening of your condition and identifying these symptoms (listed below) early is key to ensure you can avoid a hospital re-admission by seeing your Cardiologist, GP or Heart Failure Nurse to rectify the problem and improve your treatment.

- Increased shortness of breath.
- Increased swelling in your ankles, feet, or belly.
- Weight gain of more than 2kg in 2 days.
- Unable to lie flat due to shortness of breath.
- Heart palpitations.
- A worsening cough or new cough.
- Fatigue and tiredness more often.

Talking about your heart failure with your health professional

The best thing you can do for your heart failure is to always take your medications. Never stop your heart medications. If you are concerned that they are making you feel unwell see your doctor or pharmacist first.

Questions to ask

- What are the common side effects?
- If I have side effects, can I stop my medications?
- Will I be on medications for life?
- Are there any risk factors that I need to manage?
- Do I need to monitor my fluid, salt or alcohol consumption?
- What can make my symptoms worse?
- How will I recognize if my heart failure is worse?
- Is there an action plan for me when I feel worse?
- When should I go back to my GP or Cardiologist?
- When should I call an ambulance?
- What immunisations am I eligible to have?

Looking after my heart

If you are eligible to attend your local cardiac rehabilitation program we highly recommend this. If you are not, we recommend visiting your Exercise Physiologist who can assist with your exercise and diet in conjunction with your treating Cardiologist and GP.^{3,8}



- Stop smoking.
- Maintain a healthy weight.
- Exercise daily.
- Lower your salt intake.
- Restrict your fluid intake.
- Weigh yourself daily.
- Lessen alcohol intake.
- Manage stress.
- Manage sleep apnoea.

Decrease blood pressure
<130/80mmhg

Decrease bad (LDL) cholesterol
<1.4mmol/l

Control diabetes
HbA1C < 7%