



American
Heart
Association.

HEALTHIER LIVING WITH HEART FAILURE

Managing Symptoms and Reducing Risk

heart.org/HF

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Healthier Living With Heart Failure

Heart failure is a serious, long-term (chronic) condition that affects 6.7 million adults in the U.S. But you can still have a full, active life by following your health care team's instructions on treatment and making needed changes in diet, physical activity and lifestyle. (See page 10 for a list of your health care team members.)

HOW THIS WORKBOOK CAN HELP

You can use this interactive workbook by itself or as support for a facility-based cardiac rehabilitation program. Either way, this guide will teach you skills to reduce your chance of future problems related to cardiac risk. It will also help you:

- Understand the factors that put you at risk for heart failure and worsening heart failure.
- Learn ways to manage and reduce your risk of heart failure.
- Track changes in your risk factors over time.
- Set and meet realistic goals.
- Know when to contact your health care team members about a problem.



YOUR LEARNING STYLE

This self-care guide is designed to support your learning style. You can choose the topics in the order that makes sense to you. You can cover a little or a lot in one session. You can view or print the information and watch videos and animations. It's all up to you.

GUIDING YOUR WAY

Throughout this workbook, use these interactive features to enhance your learning experience:



PRINT. Print materials that can help you manage your condition. To use this feature, install the free Adobe Acrobat Reader (<http://get.adobe.com/reader/>).



PLAY. Play videos and animations by pressing the play button on or near the images.

This workbook is not a substitute for professional medical care. Only your health care professional can diagnose or treat a medical problem.

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 **Emergency Contacts**

Name _____ Date Created _____ Date Updated _____

Title	Name	Phone	Email
Primary Care Doctor			
Cardiologist			
Nurse			
Family			
Friends			
Pharmacist			
Medical Center			
Registered Nurse			
Nurse Practitioner			
Heart Failure Clinic			

 **Print this Emergency Contacts list and fill in the phone numbers of people you may need to reach quickly. Carry it with you. Update the list as needed. Share a copy with your caregiver and family members.**

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What Is Heart Failure?

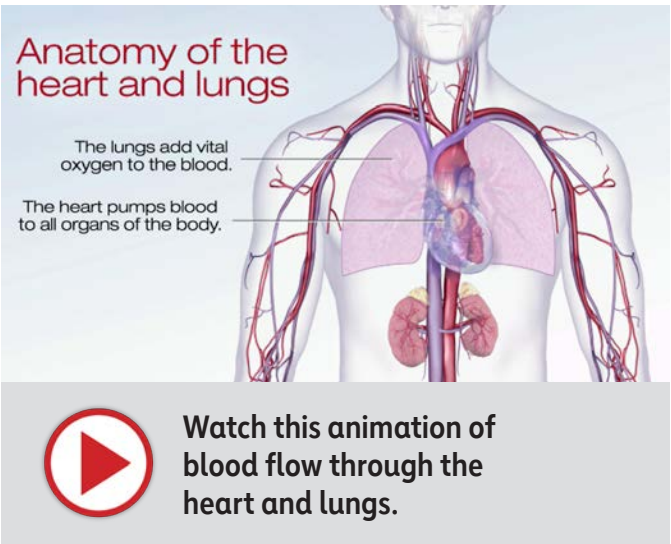
Heart failure means that your heart is not pumping blood as well as it should. As a result, your body isn't getting enough of the oxygen-rich blood it needs to function properly.

HOW THE NORMAL HEART WORKS

The heart is a strong, muscular pump a little larger than a fist. Its job is to pump the right amount of blood to all body parts. This process is called **circulation**.

The heart has four chambers. The two upper chambers are called **atria**. The two lower chambers are called **ventricles**.

The heart pumps blood to the lungs and all the body's tissues. For the heart to function properly, the four chambers must beat in an organized way. Heart valves help control the direction of blood flow and open and close with the pumping action of your heart chambers. This allows blood to flow out of the chambers when they open and refill with blood when they close. Under normal conditions, a healthy heart has more than enough pumping ability to circulate blood properly.



WHEN YOU HAVE HEART FAILURE

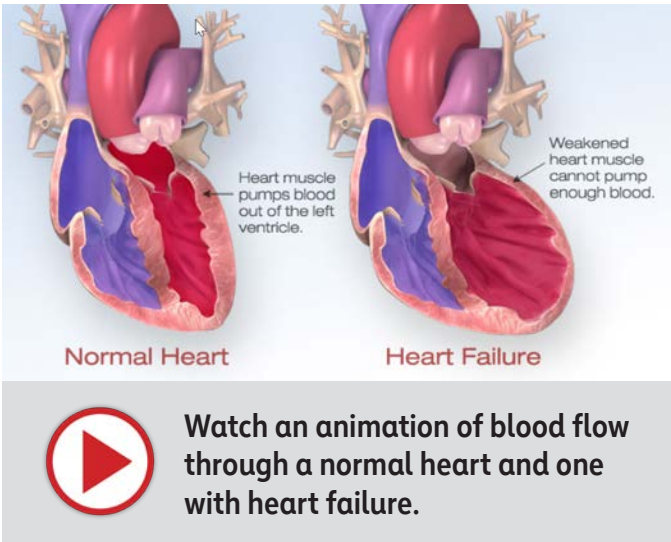
Heart failure is a chronic (lifelong) condition in which the heart muscle isn't able to pump enough blood through the heart to meet the body's needs for blood and oxygen. The heart can't keep up with its workload.

Heart failure can involve the heart's left side, right side or both sides. It most often affects the left side first.

LEFT-SIDED HEART FAILURE

The two types of left-sided heart failure are:

- **Systolic failure:** The left ventricle loses its ability to contract normally. The heart can't pump with enough force to push enough blood into circulation. This is heart failure with reduced ejection fraction, or HFrEF.
- **Diastolic failure:** The left ventricle loses its ability to relax normally because the muscle has become stiff. The heart can't properly fill with blood during the resting period between each beat. This is heart failure with preserved ejection fraction, or HFpEF.



RIGHT-SIDED HEART FAILURE

Right-sided or right ventricular heart failure usually occurs because of left-sided failure. When the left ventricle fails and can't pump enough blood, increased fluid pressure is transferred back through the lungs, damaging the heart's right side. When the right side loses pumping power, blood backs up in the body's veins.

CONGESTIVE HEART FAILURE

Congestive heart failure requires quick medical attention. The heart becomes weakened and cannot pump enough blood for the body's needs. This causes veins to back up as more blood is flowing into the heart and less blood is flowing out of the heart. This causes congestion in the body's tissues, resulting in shortness of breath and swelling. Sometimes, fluid collects in the lungs and interferes with breathing, especially when a person is lying down.

Causes of Heart Failure

Heart failure is most often caused by atherosclerotic disease (such as of the coronary, cerebral and peripheral blood vessels). Atherosclerosis of the body's blood vessels happens when arteries become narrowed by the buildup of fatty deposits called plaque.

Lifestyle factors that increase the risk of heart attack, stroke and peripheral vascular disease, such as smoking, being overweight and lack of physical activity, can also contribute to heart failure.

UNDERSTANDING YOUR RISK FACTORS

Having one or more of these risk factors greatly increases your risk of heart failure:

- **Coronary artery disease.** When cholesterol and fatty deposits build up in the heart's arteries, less blood can reach the heart muscle. This buildup is known as **atherosclerosis**. The result may be chest pain (**angina**). Or, if blood flow becomes totally blocked, a heart attack may result.
- **High blood pressure (HBP).** When pressure in the blood vessels is too high, the heart must pump harder than normal to keep the blood circulating. This takes a toll on the heart. Over time, the chambers get larger and weaker, resulting in heart failure.
- **Type 2 diabetes.** People with diabetes tend to develop HBP and atherosclerosis from elevated lipid levels in the blood. Both of these conditions have been linked to heart failure.



- **Metabolic syndrome.** If you have three or more of these five risk factors, you have metabolic syndrome:
 - Large waistline (abdominal obesity)
 - High blood pressure
 - High fasting triglycerides
 - Low HDL (good) cholesterol
 - High fasting blood sugar

Metabolic risk factors affect the heart and contribute to developing heart failure.

Additional risk factors include age, race, lack of physical activity, smoking, alcohol or drug abuse, serious lung disease or infections and certain types of radiation and chemotherapy.

Other conditions that can cause heart failure include:

- **Past heart attack.** A heart attack occurs when an artery that supplies blood to the heart muscle becomes blocked. The loss of oxygen and nutrients carried by the blood damages the heart's muscle tissue. The damaged heart tissue doesn't contract as well, which weakens the heart's ability to pump blood.
- **Abnormal heart valves.** Heart valve problems can result from disease, infection (endocarditis) or a defect present at birth. When the valves don't open or close completely during each heartbeat, the heart muscle must pump harder to keep the blood moving. If the workload becomes too great, heart failure results.
- **Congenital heart defect.** If the heart and its chambers don't form correctly, the healthy parts have to work harder to make up for it.
- **Heart muscle disease.** Any damage to the heart muscle — whether because of drug or alcohol use, viral infections or unknown reasons — increases the risk of heart failure.
- **Obstructive sleep apnea.** Sleep apnea puts extra stress on your heart while you sleep and leads to increased blood pressure or worsening of heart failure symptoms.

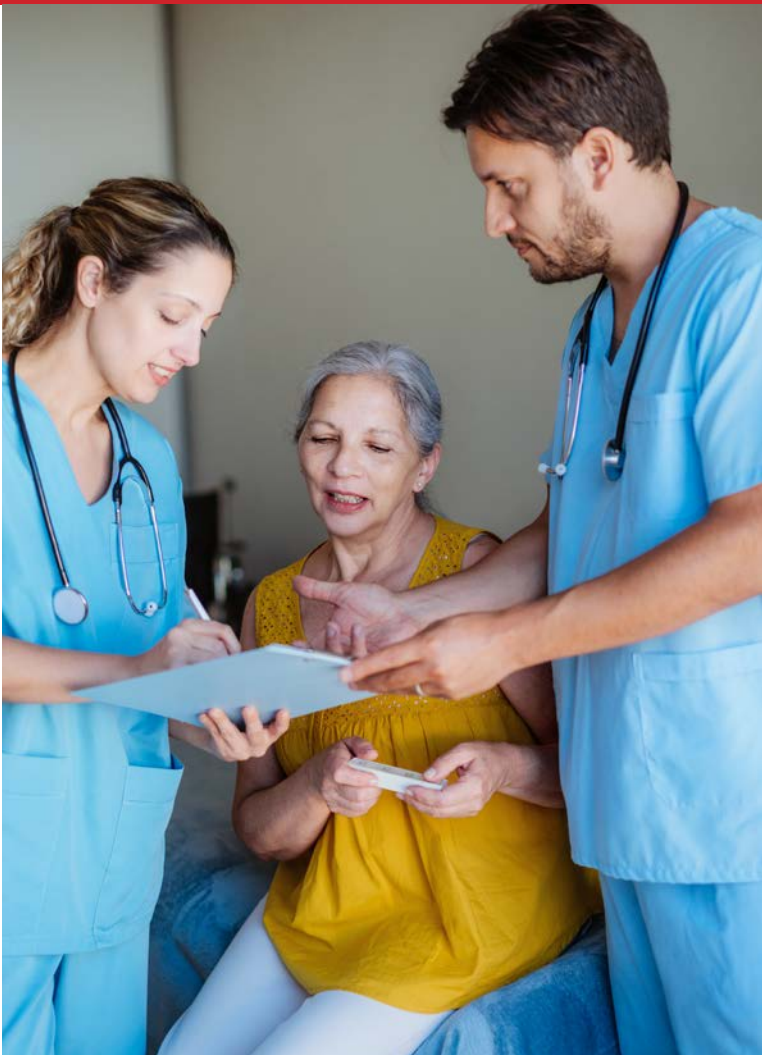
Other less common causes of heart failure may include:

- **Overactive thyroid (hyperthyroidism)**
- **Low red blood cell count (severe anemia)**
- **Iron overload**

Members of Your Health Care Team

It's important to develop good relationships with all members of your health care team. Keep them informed about symptoms or changes in your condition so they can help you. Your health care team may include:

- **Primary care doctors** provide routine care.
- **Cardiologists** diagnose and treat heart problems.
- Other doctors include **surgeons and other specialists**.
- **Clinical nurse specialists, nurse practitioners and physician associates** provide care, perform tests and provide education and counseling.
- **Physical and occupational therapists** assist with physical and skill-related rehab.
- **Dietitians** teach heart-healthy eating and help develop meal plans.
- **Mental health professionals** help patients and families deal with emotional stress, anxiety or depression.
- **Social workers and case managers** help with legal, financial and other issues, such as understanding insurance coverage.
- **Pharmacists** fill prescriptions and help you better understand your medications.



1. Prepare for Your Visits

- **Make a list of questions**
- **Make a list of all medicines**
- **Bring list to every appointment**



Watch this video to learn more about communicating with your health care team.

Going to Cardiac Rehabilitation

One of the best things you can do for yourself is to get into a cardiac rehabilitation (**rehab**) program. Everything you need to get and stay healthy is in one place. Medical staff is on hand at all times. Rehab can do a lot to help you on the road to better heart health and reduce your chances of future heart problems.

WHAT IS CARDIAC REHAB?

Cardiac rehab is a medically supervised program to help heart patients recover and improve overall physical, mental and social function. The goal is to stabilize, slow or even reverse the progression of heart failure. This can help reduce the risk of heart disease, another cardiac event or death.

Cardiac rehab programs usually provide:

- A medical evaluation to figure out your needs and limitations
- A physical activity program tailored to your needs and limitations
- Counseling and education to help you understand your condition and how to manage it
- Support and training to help you return to work or your normal activities
- Counseling on modifying risk factors through diet and nutrition and the use of prescribed medications



The Effects of Heart Failure

The effects of heart failure can be felt throughout the body. You're likely to have one or more of the following symptoms:

EDEMA

If you have heart failure, your heart doesn't pump blood with enough force. This means that not enough blood is pumped out of the heart with each heartbeat. Then, because the heart isn't emptying as it should, blood returning from the body can't enter the heart and backs up in the veins. This forces fluid from the blood vessels into other tissues, causing swelling (**edema**). Edema can occur in the feet, ankles, legs and fingers, as well as in the abdomen and in other tissues and organs. As a result, weight gain is common. (Note: Not all edema is caused by heart failure.)

PULMONARY EDEMA

The heart's left side receives oxygen-rich blood from the lungs. The heart then pumps this blood to the rest of the body. When the heart's left side isn't pumping well, blood backs up in vessels of the lungs. Sometimes fluid is forced out of the lungs into the breathing spaces. This is called **pulmonary edema**. Pulmonary edema often leads to shortness of breath and a lack of stamina (energy).

Call your cardiologist or primary health care professional if you have new or worsening edema. Signs of too much fluid in your body include feeling that your shoes, pants or rings are too tight.



SHORTNESS OF BREATH

A very common symptom of heart failure is shortness of breath (**dyspnea**). It may be caused by fluid in the lungs or poor heart function. Shortness of breath is most often a problem during physical activity. But it can also happen during rest. Sometimes it comes suddenly at night, making it very hard to breathe unless you get up and move around. You may need several pillows to raise your upper body so you can breathe more easily.

FATIGUE

Another effect of heart failure is **fatigue** (tiredness). You feel tired because your tissues and organs aren't getting enough oxygen and nutrients. You may feel sleepy after eating, feel weak in the legs when walking and get short of breath while being active.

Call your cardiologist or primary health care professional if you have shortness of breath after mild to moderate physical activity or while resting. These are signs your heart failure may be getting worse. Other signs include sudden episodes of shortness of breath, needing to use extra pillows when you lie down, wheezing or an "asthma" attack.

Call 911 or your emergency response number if you:

- Feel lightheaded or as if you might pass out (known as **syncope**).
- Have a fluttering or racing heart (known as a **palpitation**).
- Feel sudden chest pain or sudden chest heaviness.

Any of these could mean your heart failure is getting worse or that you're having a heart attack.



OTHER EFFECTS OF HEART FAILURE

In addition to the symptoms listed on the previous pages, here are some other ways to tell that your heart might not be working the way it should be:

- Coughing or wheezing
- Lack of appetite or nausea
- Confusion or impaired thinking
- Increased heart rate or irregular heartbeat

PERSISTENT COUGHING OR WHEEZING

Similar to shortness of breath, coughing or wheezing is caused by the backup of fluid into the lungs. The resulting cough can produce white or pink blood-stained mucus.

LACK OF APPETITE OR NAUSEA

The digestive system receives less blood, which can disrupt the normal digestive process. This can also lead to a feeling of abdominal fullness or nausea.

CONFUSION OR IMPAIRED THINKING

Changing levels of certain things in the blood, such as sodium, can result in reduced blood flow to the brain, which can cause confusion. You may have memory loss and feel disoriented.

INCREASED HEART RATE OR IRREGULAR HEARTBEAT

To make up for the loss in pumping ability, the heart may start to beat faster. This can lead to heart palpitations, which may feel as though the heart is racing or throbbing.

Keeping Track of Your Symptoms

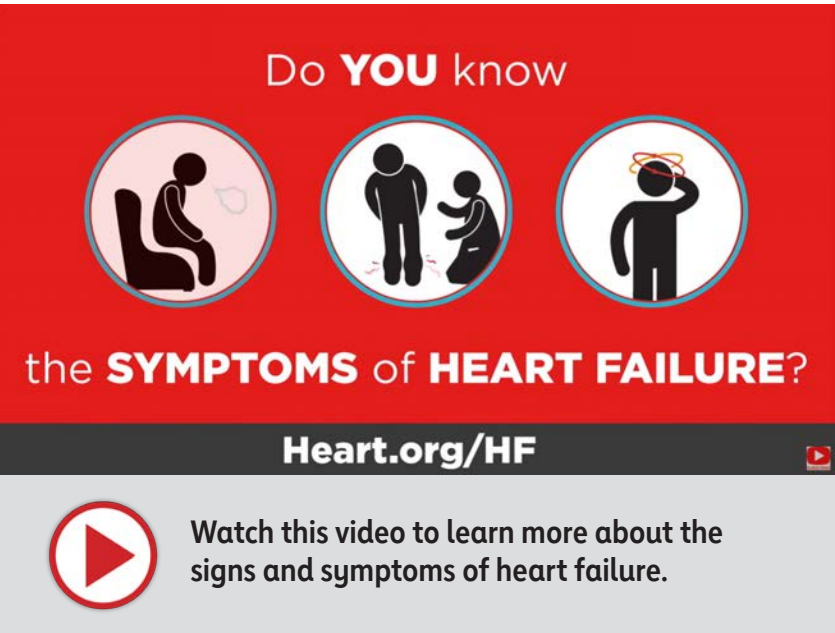
Heart failure requires you and your family or caregivers to pay close attention to any changes in your symptoms. If you notice anything new, or a sudden worsening of a current symptom, contact your cardiologist or primary health care professional right away. Also, be sure to learn to recognize the signs of a heart attack.

WHAT TO TRACK

Your health care team will tell you which heart failure symptoms you should track. The most common are blood pressure, heart rate, weight and fluid intake. You may also be asked to monitor or limit your sodium intake and keep track of oxygen use or diuretic (“water pill”) use.



Print a copy of this Self Check Plan to track your heart failure symptoms daily. Be sure to share it with your health care team.



Eating a Heart-Healthy Diet

When you have heart failure, what and how you eat affects your heart health. Eating a heart-healthy diet can help you feel better and manage your symptoms. A heart-healthy diet is rich in vegetables, fruits, whole grains, legumes (peas and beans), skinless poultry, fish and fat-free or low-fat dairy products. It's also important to limit or avoid red and processed meats, saturated and trans fats, added sugars and sodium.

REDUCING SODIUM (SALT)

Excess salt may play a part in water buildup. With more fluid in the blood vessels, the heart must work harder. Over time, this fluid buildup can cause shortness of breath and edema.

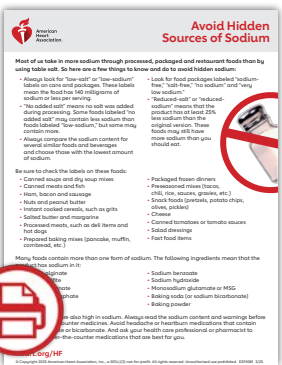
You may be told to lower your sodium intake. The specific limit depends on your health. People with milder forms of heart failure may consider reducing the amount of sodium in their diet to 1,500 milligrams (mg) a day or less. If you have more severe heart failure, talk with your health care professional about your individual needs. Based on your condition, there may be additional limits on your sodium intake.

One teaspoon of salt contains 2,300 mg of sodium. But the largest amount of sodium comes from processed, packaged and restaurant foods. Foods from just about every category make up a large percentage of sodium in the average diet in America: sandwiches; rice, pasta and grain dishes; burgers and tacos; pizza; meat, poultry and seafood dishes; and soups.

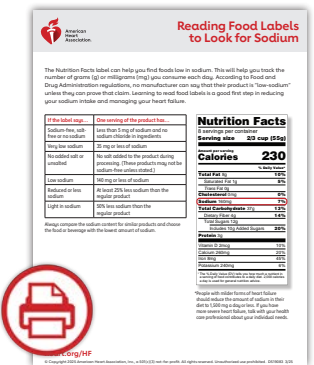
You may have to work hard to limit foods with a lot of sodium.

AVOIDING SODIUM WHILE SHOPPING

It's one thing to take the saltshaker off the table at home. However, many packaged foods, canned goods and other grocery items are high in sodium. Learning to read the Nutrition Facts label on packaged foods can help you choose foods with less sodium.



This PDF lists foods that are **hidden sources of sodium** to limit or avoid when grocery shopping. Print it and take it to the store.



Print this sheet to learn to use the **Nutrition Facts label** on packaged foods to help look for low-sodium products at the store.

TIPS FOR REDUCING SODIUM AT HOME

- Take the saltshaker off the table. This can help your tastebuds adjust to cutting out the salty flavor.
- Use spices and low-salt seasonings for flavor.
- Use fresh vegetables and fruits instead of canned and processed foods when possible.
- Rinse canned vegetables and tuna with water before eating.
- Read the Nutrition Facts label to learn the sodium content of foods you buy. Look for serving size and sodium per serving.
- Look for low-sodium versions of your favorite foods.
- Choose over-the-counter heartburn and headache medications that don't contain sodium bicarbonate or sodium carbonate.
- Talk to your health care professional before using salt substitutes. These can have extra potassium, which may be dangerous for some conditions.



REDUCING SALT WHEN EATING OUT

- Ask for dressings and sauces to be served on the side instead of mixed with food. Then you can control how much you use.
- Choose foods that are fresh (such as salads) over frozen or prepared foods when possible.
- Ask the waiter to make sure your food is prepared without salt or MSG.
- Watch out for foods from vending machines; many are high in sodium.
- Avoid most dips, chips, salsa, pizza, soups and foods with a lot of sauce.
- Take your own fruit or other healthy choices when you go to events.



Watch this video to learn more about avoiding high-sodium meals when eating away from home.

Limiting Saturated and Trans Fats and Added Sugars

In addition to avoiding foods high in sodium, it’s important to limit your intake of saturated fats and added sugars and avoid trans fats.

- **Saturated fat:** These fats mostly come from animal sources, such as meats and full-fat dairy products. They’re also in tropical vegetable oils such as coconut, palm and palm kernel oil. These fats are usually solid at room temperature.
- **Trans fat:** These fats are in hydrogenated and partially hydrogenated oils and some animal products. They’re often in hard margarine, vegetable shortening, commercially baked goods and prepared foods such as french fries.
- **Added sugars:** These are sugars and syrups added to foods during processing, preparation or at the table. Examples include sucrose, glucose, fructose, maltose, dextrose, corn syrups, high-fructose corn syrup, concentrated fruit juice and honey.

WHAT TO LOOK FOR WHEN SHOPPING

To help you look for heart-healthy choices at the store, print this list of Foods to Look For on page 19. The foods listed are typically low in sodium, saturated fat and added sugars.

THE IMPORTANCE OF POTASSIUM

Potassium is a mineral that helps maintain the normal function of the heart and nervous system. Potassium also helps ensure proper muscle function, maintains bone health, controls acid-base balance and with the breakdown and use of carbohydrates. Diuretics (water pills) or other medications that get rid of extra fluid can cause low potassium. Kidney problems, severe infections or certain other medications may cause potassium buildup in the body.

Too much potassium can be as harmful as too little. Work with your health care team to understand how much potassium-containing foods you should eat. Some potassium-rich foods include:

- **Dried fruits:** raisins, prunes, apricots, dates
- **Fresh fruits:** bananas, kiwi, mangos, peaches, oranges, cantaloupe
- **Fresh juices:** orange
- **Canned juices:** carrot, grapefruit, prune, pineapple
- **Vegetables:** beets, soybeans, beet greens, squash, beans, spinach, tomatoes, potatoes, sweet potato, mushrooms, carrots
- **Protein:** fish, lean meats (beef, lamb, pork, deer), tofu, pistachio nuts
- **Dairy products:** fat-free and low-fat milk, soy milk, yogurt

HEALTHY COOKING TIPS

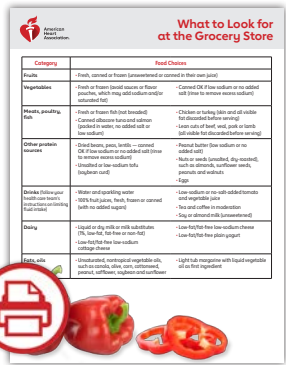
When cutting back on sodium and saturated and trans fats, how you cook is just as important as what you cook. People with heart failure and their families don’t have to give up taste or the foods they love. Often minor changes in how favorite foods and recipes are prepared can make a big difference.

Here are some cooking methods that can help you reduce saturated and trans fats and calories:

- **Bake.** Cook food slowly in an oven in covered cookware with a little extra liquid.
- **Braise.** Cook food using both dry heat from an oven or the stovetop and wet heat from liquid.
- **Broil.** Cook directly under the heat source at high temperatures. Always use a rack so fat drips away from the food.
- **Grill.** Cook directly over the heat source. You can grill lean meats, poultry, fish and vegetables and some fruits.
- **Microwave.** This is a good alternative because it’s fast and doesn’t add calories.
- **Poach.** Cook chicken or fish by immersing it in simmering liquid.
- **Roast.** Cook uncovered in the oven. Put a rack in the pan so the meat or poultry doesn’t sit in its own drippings. If making gravy from the drippings, use a gravy strainer or skim ladle to remove the fat.
- **Sauté.** Cook food in a pan over direct heat using a small amount of liquid such as vegetable stock, fruit juice, wine, healthy cooking oil, spray or water.
- **Steam.** Steam vegetables in a basket over simmering water. They’ll retain great flavor.
- **Stir-fry.** Use a wok to cook vegetables, poultry and seafood in low-sodium vegetable stock, wine or a small amount of canola oil. Avoid high-sodium seasonings such as teriyaki and soy sauce.

WHEN EATING AWAY FROM HOME

For many people, dining out is a favorite way to relax and socialize with friends. But it’s more difficult to tell how food is prepared. This may make choosing the right foods more difficult. But with some planning, eating out can be both healthy and enjoyable.



Print this **list of foods to look for at the grocery store** and take it when you shop. Share this list with your family and caregivers.



Print this PDF to learn **tips for ordering healthier meals** away from home.

Tracking Your Fluid Intake

Your health care team may recommend limiting how much liquid you take in. Many people with heart failure are prescribed **diuretics** (water pills) to help them get rid of extra water and sodium and reduce their heart’s workload.

You may be told to limit fluids to six to nine 8-ounce cups a day to help relieve symptoms and congestion if your heart failure is severe. This includes any water or other drinks taken with medications.

You may feel thirsty, but your body may not need more liquids. Take care not to replace the fluid that diuretics are helping to get rid of. Try sucking on sugar-free hard candy if your mouth feels dry.

Ask your dietitian or nutritionist for help in learning ways to keep track of your fluid intake.

Note: The water in some foods counts as liquids. To keep track of ALL your liquid intake, watch for foods that are high in liquids (or liquid at room temperature). These include soups, yogurt, pudding, ice cream, gelatin and fruits and vegetables.



AVOIDING ALCOHOL

If you have heart failure, you should ask whether your alcohol intake should be reduced or if you should drink at all. People who have alcohol-induced **cardiomyopathy** (heart muscle damage) should never drink alcohol.

Drinking too much alcohol can raise blood pressure, cause heart muscle damage and heart failure and lead to stroke. It can also contribute to:

- High triglycerides (blood fats)
- Liver problems
- Cancer and other diseases
- Obesity
- Alcoholism
- Irregular heartbeat



Lifestyle Changes for People With Heart Failure

Heart failure can almost always be managed. Certain lifestyle changes can help you start to feel a lot better.

SIX LIFESTYLE CHANGES FOR PEOPLE WITH HEART FAILURE

Following your health care team’s advice about lifestyle changes can help improve heart failure symptoms, slow the progression of your condition and improve your everyday life. You may be asked to change your regular routine and habits in these areas:

- Weight loss or maintenance
- Quitting smoking
- Getting regular physical activity
- Getting enough rest and sleep
- Managing stress and anxiety
- Dealing with depression

MONITORING YOUR WEIGHT

It’s important to know what you weigh and to monitor your weight daily. Sudden weight changes can be signs of worsening heart failure. Weight gain for several days in a row (for example, 2 to 3 pounds in one day or 5 pounds in one week) may be the first sign of fluid buildup.

DAILY WEIGHT CHECKS

You should weigh yourself every day, preferably every morning after urinating and before eating and drinking. Always wear the same types of clothes and try to weigh yourself without shoes. Use the same scale in the same spot. This will help you to see actual changes in weight from day to day.

Write down your weight on your Self-Check Plan (see page 15). Be sure to take a copy each time you visit your health care professional.

Tell your health care team right away if you start to gain weight. Even if you’re feeling fine, they need to know about weight changes. That way, they can adjust your medications if needed. This may help you avoid hospitalization for worsening heart failure. Ask your health care professional how much fluid to drink every day.



SENSIBLE WEIGHT LOSS

Extra weight makes your heart work harder to pump blood through your body. If you need to lose weight, check with your health care team. They can help you determine how much weight to lose and how to lose it safely. Even reaching and maintaining a weight loss of 3% to 5% of your body weight can help your health. Greater weight loss will help manage your blood pressure, cholesterol and other health factors.

Healthy eating (see Chapter 3) and regular physical activity (see pages 26–27) can help you lose weight at a sensible rate of 1 to 2 pounds a week. Always talk with your health care team before starting a diet and physical activity program.



Watch this video to learn sensible weight loss tips.

Quitting Smoking

If you smoke, quitting can help you manage and improve your symptoms and quality of life.

WHY SMOKING IS A PROBLEM

Nicotine from tobacco smoke increases heart rate and blood pressure for a short time. Carbon monoxide also gets in the blood and robs your heart and brain of needed oxygen. Smoking decreases your tolerance for physical activity and increases the tendency for blood to clot. It also decreases HDL (good) cholesterol.

TIPS FOR QUITTING

- Set a date for quitting and mark it on your calendar. Then, choose a method for quitting.
- Get support. Tell your family and friends that you’re quitting and when. Ask for their help and encouragement.
- Call **1-800-Quit Now (1-800-784-8669)** for free smoking cessation information, advice, support and referrals to quit-smoking resources in your area. Or visit [SmokeFree.gov](https://www.smokefree.gov).
- Write down why you want to quit and list all the people who will benefit from your quitting.
- Hang in there! Nicotine is addictive. However, withdrawal symptoms such as headaches, depression, irritability and anxiety should pass within a few weeks.
- Try to avoid the kinds of social situations that are most likely to make you want to smoke.
- Keep something nearby that you can use to occupy your hands. Squeeze a ball or play with a pen.
- If you slip up and smoke, get back on track. Think about why you smoked, then plan how to get past that urge the next time it strikes. Reread all the reasons you listed for quitting.
- Be physically active as much as possible. It will help relax you and reduce your anxiety and desire for cigarettes.
- Carry healthy snacks, such as carrots or fresh unsalted nuts, to pop into your mouth when you feel the urge to smoke. Sugarless chewing gum and hard candy can also work.



RESOURCES TO HELP YOU QUIT

If you feel like you need more help to quit, talk to your health care team. Medications can help you quit smoking. Find out if one might be right for you.

Nicotine replacements are medications that contain nicotine. They help you manage the headaches and emotional side effects that quitting may cause. You can’t use nicotine replacement medications if you keep smoking or use other tobacco products. Nicotine replacement medications come in several forms, including gum, patches, inhalers and prescription pills.

Nicotine-free medications called **bupropion** and **varenicline** are also available. Your health care professional must prescribe them.

The Importance of Physical Activity

People with heart failure need regular physical activity as much as anyone else. Regular, moderate-intensity physical activity can help your heart get stronger. With daily activity, most people with heart failure can experience some of these benefits:

- More energy
- Improvement in mood
- Losing or maintaining weight
- Improvement in circulation
- Feeling less stressed
- Lowering blood pressure
- Increasing HDL (good) cholesterol
- Lowering triglycerides



Watch this video to learn how physical activity can help improve your heart failure symptoms.

Check with your health care team to decide an appropriate level of activity for you.

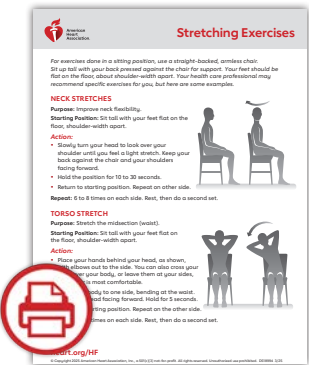


GETTING STARTED

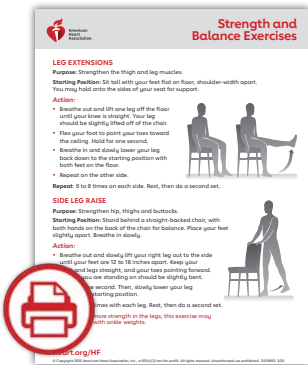
Physical activity is anything that makes you move your body and burns calories, such as walking, raking leaves, climbing stairs or playing sports. It becomes “regular” when you do an activity consistently.

How much activity and what kinds of activity you can do depends on the level of your heart health. Your cardiac rehab team can help you design a physical activity plan that’s right for you. Brisk walking, swimming or biking are types of **aerobic** activities that your team may recommend. These activities improve the efficiency of the heart muscle. The key is for your activity “prescription” to be personalized to suit your needs based on your interests, strengths and current level of fitness.

You may be asked to round out your physical activity routine with regular strength, balance and flexibility exercises. These exercises can keep the other muscles of the body in good shape, improve your balance and keep your muscles flexible.



Print this sheet of stretching exercises and talk to your health care team to see if these are right for you.



Print this sheet of strength and balance exercises and talk to your health care team to see if these are right for you.

TIPS FOR BEING ACTIVE

Make time every day for moderate-intensity aerobic physical activity such as brisk walking, swimming or biking. Work with your health care team to decide how much activity is safe for you. Always stay within their recommendations and your comfort zone.

- Wear comfortable clothes and sneakers.
- Start slowly. Gradually build up to at least 150 minutes of moderate-intensity physical activity per week (or whatever your health care professional recommends). You can meet that goal by aiming for 30 minutes of activity five or more times a week. If you can't manage 30 minutes at a time, try multiple small bouts of exercise throughout the day to meet your goal.
- Exercise at the same time of day so it becomes a habit. For example, you could exercise Monday through Friday before lunch or dinner.
- If you aren't on fluid restrictions, drink a cup of water to replace sweat loss during activity and/or heat. Check with your health care professional about your specific needs.
- Ask family or friends to join you. You'll be more likely to keep exercising with company.
- Track your activity on a printable log or online. (See the "Activity Log" on the next page.)
- If you miss a day, plan a makeup day or add 10 to 15 minutes to your next session.
- Vary your activity to keep your interest up. Walk one day, swim the next time, then ride a bike.
- Join an exercise group, health club or community fitness facility. Many senior centers also offer exercise programs. Your health care professional may have suggestions for facilities or programs in your community.
- Look for opportunities to be more active during the day. Park farther from your destination, walk the mall before shopping, choose a flight of stairs over an escalator or take 10- to 15-minute brisk walking breaks while watching TV or working.

DON'T GET DISCOURAGED

- Find activities that you enjoy and are fun. Add variety. That way, exercise won't seem boring or routine.
- Find a convenient time and place to exercise. Try to make it a habit but be flexible.
- Use music to keep you entertained while you exercise.
- Surround yourself with supportive people. Share activity time with others. Make a date with a family member, friend or co-worker.
- Join a health and fitness club. A good fitness center should have qualified trainers to help you find the best exercises to reach your goals. But remember to check with your health care professional before starting a new exercise program.

[illegible]

Print this **Activity Log** to help record your progress. Work with your health care team to set reasonable goals. Take this sheet to checkups to discuss your progress.



Getting Enough Rest

It's important to schedule time every day for rest and relaxation. Rest times are essential because they improve the pumping ability of the heart. Daytime rest can help keep you from overdoing it. It helps ease feelings of tiredness caused by nighttime sleep disruptions.

You might try napping after lunch, putting your feet up for a few minutes every couple of hours or sitting down while performing household tasks such as preparing food or ironing.



IMPROVING NIGHTTIME SLEEP

You may wake up at night due to symptoms such as shortness of breath or coughing. You may also find that you need to urinate more often because of taking diuretics.

To get a better night's sleep, try to:

- Use pillows to prop up your head to improve breathing.
- Avoid naps and big meals right before bedtime.
- Talk to your health care professional to see if you can time your diuretic use so that you're less likely to wake up at night to urinate. This may mean taking diuretics in the morning.

Many people with heart failure may have other sleep problems, such as sleep apnea. People with sleep apnea stop breathing multiple times a night. Untreated sleep apnea can make heart failure symptoms worse. Treating sleep apnea may improve heart function and quality of life. If sleep apnea is suspected, a sleep study may be recommended. If you do have sleep apnea, a continuous positive airway pressure (CPAP) machine may be recommended.

MANAGING STRESS AND ANXIETY

You may be feeling anxious or nervous about your diagnosis and what might happen to you and your family. And everyone has certain stress triggers — things that cause your heart to pound and make you breathe harder. It's important to work to manage stress and anxiety. They make the heart work harder, which can make symptoms worse.

You may not be able to control every stress- or anxiety-producing situation, but here are some tips to help you cope:

- Talk with family, friends or other people you trust about your concerns and stresses and ask for their support.
- Take 15 to 20 minutes a day to sit quietly, breathe deeply and think of a peaceful scene.
- Learn to accept things you can't change. You don't have to solve all of life's problems.
- Count to 10 before answering or responding when you feel angry.
- Don't use smoking, drinking, overeating or drugs to cope with stress. These habits can make your condition worse.
- Look for the good in situations instead of the bad.
- Get regular physical activity. Do something you enjoy, such as brisk walking, swimming, dancing, golfing, walking a pet, tai chi or cycling.



Watch this video to learn more tips for reducing stress and anxiety.

- Think ahead about what may upset you and try to avoid it.
- Plan productive solutions to problems.
- Learn to say no. Don't promise too much. Give yourself enough time to get things done.
- Join a support group or some other group with which you identify.
- Seek out a mental health professional or counselor if you're having trouble coping on your own. Helping people is their specialty. Ask your health care team for recommendations.



DEPRESSION

It's normal to feel sad or low when you've been diagnosed with a chronic condition. But if these feelings continue for long or interfere with your normal activities, you may be depressed. Depression can slow your recovery and increase your risk for future cardiac events. You may be less likely or able to follow your heart failure treatment plan if you're suffering from depression.

If you've been feeling little interest or pleasure in doing things, or if you're feeling down or hopeless over the past few weeks, talk with your health care team right away. Don't be afraid to talk about your feelings about heart failure. Depression is a common medical condition that can be treated.

Anxiety

- Share your feelings
- Relax
- Don't abuse sleeping pills or alcohol
- Talk to your doctor



Watch this video to learn more about depression and how to get help.

Additional Lifestyle Adjustments

In addition to the information you've read in this chapter, here are some other topics that may concern you.

RESUMING INTIMACY

Many people are concerned about resuming sexual relations after their heart failure diagnosis. Try not to feel embarrassed about talking about it with your doctor or other members of your health care team.

If you have heart failure, being able to have sex depends on your symptoms and the severity of your heart failure. People with mild heart failure can usually safely have sex.

If you have more severe heart failure symptoms, sex should be avoided until your condition is stable and well managed. Your cardiologist will tell you when it's safe to resume sexual activity.

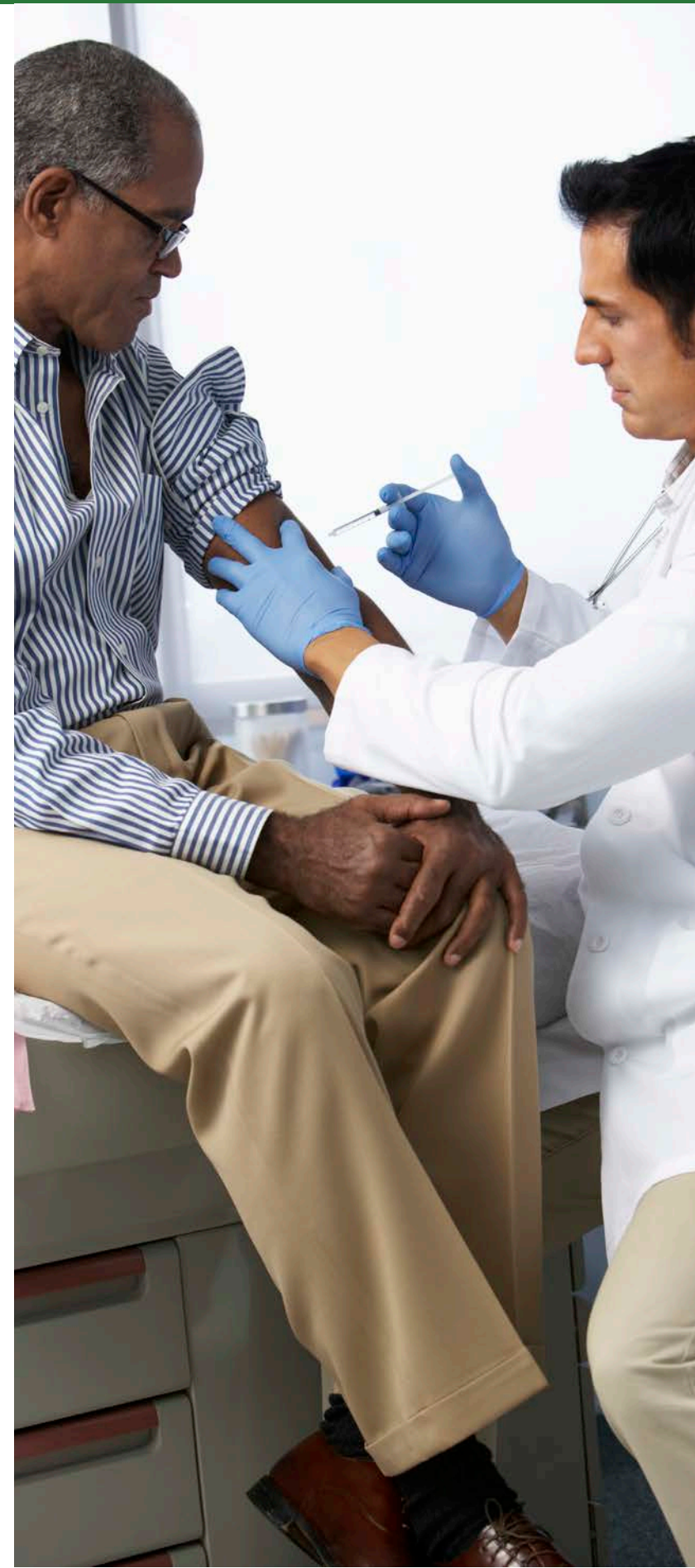
Some people with heart failure may not be able to have intercourse but may be able to engage in other activities.



These tips may help you to return to sexual activity with heart failure:

- Start with things such as hugging, kissing and touching. See how well you do with these activities first.
- Use positions that help you breathe more easily, such as a semi-upright position. This requires less effort than the on-bottom position. Use pillows for support.
- Stop and rest if you have shortness of breath, feel uncomfortable or have pain.
- Take your diuretic at a time that it won't interfere with sex.
- Choose a time when you're rested.
- Avoid having sex right after eating a heavy meal.

You should have open and honest talks with your partner about sex. Good communication may lead to resuming sex earlier and enjoying it more.



AVOIDING FLU, PNEUMONIA AND COVID-19

Flu (influenza), pneumonia and COVID-19 pose greater dangers for people who have heart failure than for healthy people.

Pneumonia is a lung infection you can develop if you get the flu. It keeps your body from using oxygen as well as it should. Your heart must work harder to pump oxygenated blood through the body.

Ask your primary health care professional about getting yearly flu and COVID vaccines and a one-time pneumococcal vaccine (to guard against the most common form of bacterial pneumonia).

These vaccines are generally safe and seldom cause any severe reactions. It's much riskier not to have them. In addition:

- Avoid anyone with a cold, the flu or COVID as much as possible.
- Stay out of crowds during flu season (usually October through March).
- Wash your hands well and often, especially after using the bathroom and before eating. Ask that your caregivers do the same.
- Keep your hands away from your face.

Taking Medications for Heart Failure

Lifestyle changes may not always be enough to manage your heart failure symptoms. Other treatments may be needed to help manage your condition.

The goal of heart failure treatment is to help you live a longer, better-quality life. Treating heart failure with medication can lessen fatigue, shortness of breath and swelling. It also helps improve your energy level so you can be physically active. Medications can stop or slow the progress of the disease, even if you have no signs or symptoms.

Take your medications exactly as prescribed. Don't change how much or when you take it without talking to your health care team. If they change your dose, ask why the change might be needed. Always tell your health care professionals about all medications you're taking, including over-the-counter drugs, supplements or herbal medicines.



MEDICATIONS COMMONLY USED TO TREAT HEART FAILURE

The following are some of the most common medications used to treat heart failure*:


- ACEi** (angiotensin-converting enzyme inhibitors) and **ARB** (angiotensin receptor blockers) widen blood vessels, lower blood pressure and decrease the heart's workload.
- ARNI** (angiotensin receptor-neprilysin inhibitors) are a drug combination of a neprilysin inhibitor and an ARB. ARNI widen blood vessels, lower blood pressure, reduce sodium (salt) retention and decrease the heart's workload.
- Beta blockers** may lower blood pressure, slow the heart rate and reduce the heart's workload.
- Mineralocorticoid receptor antagonists (MRA)** are a type of diuretic that help eliminate extra salt and fluid.
- SGLTi (sodium-glucose cotransporter inhibitors)** are diabetes medications that lower blood sugar but also treat heart failure in patients with or without diabetes.

Blood thinners help prevent blood clots from forming. If a clot breaks off and gets stuck inside a blood vessel that supplies the heart or brain, a heart attack or stroke can result.

Cholesterol lowering agents reduce cholesterol in the blood.

- Digoxin** slows down the heart rate and may make the heart squeeze harder.
- Diuretics** help your body get rid of extra water and sodium to reduce the buildup of fluid in the lungs, ankles, legs and abdomen.
- Ivabradine (pacemaker channel inhibitor)** slows down the heart rate, similar to beta blockers.
- Hydralazine (with or without nitrate)** relaxes and widens blood vessels, lowers blood pressure and reduces the heart's workload.
- Vericiguat** relaxes and widens blood vessels, lowers blood pressure and reduces the heart's workload.
- Oxygen therapy** delivers concentrated oxygen to the lungs. This helps increase the amount of oxygen that can get into the blood. Oxygen therapy can improve shortness of breath and increase a person's ability to be physically active.

* Partial list of commonly used drugs for heart failure. Talk with your health care team for more information about your personal regimen.



Heart Failure Medications

The following list of medications may include one or more prescriptions from your health care team. Medication reference is important to treat heart failure. Use this list to better understand your possible medications.

Type of Heart Failure Medication	Generic Name(s)	Brand Name(s)	What They Do
ACE Inhibitors	lisinopril, enalapril, ramipril, captopril, fosinopril, quinopril	Prilosec, Vasotec, Accupril, Capoten, Monopril	• Relax blood vessels • Lower blood pressure • Help the heart pump blood
ARBs	losartan, valsartan, irbesartan, telmisartan, olmesartan	Cosenty, Avapro, Irbeg, Telpin, Oltrel, Olmetec	• Relax blood vessels • Lower blood pressure • Help the heart pump blood
ARNIs	sacubitril, valsartan	Entresto	• Relax blood vessels • Lower blood pressure • Help the heart pump blood
Beta Blockers	carvedilol, metoprolol, bisoprolol, atenolol, nebivolol, propranolol	Coreg, Toprol, Bisoprol, Atenolol, Nebivolol, Procardia	• Slow the heart rate • Lower blood pressure • Help the heart pump blood
Diuretics	furosemide, bumetanide, torsemide, ethacrynic acid, chlorthalidone, hydrochlorothiazide, metolazone	Lasix, Bumex, Torsemide, Etor, Chlorthal, Hydrodiuril, Metolazone	• Remove extra fluid from the body • Lower blood pressure • Help the heart pump blood
SGLT2 Inhibitors	empagliflozin, dapagliflozin, canagliflozin	Jardiance, Farxiga, Invokana	• Lower blood sugar • Help the heart pump blood
Blood Thinners	warfarin, apixiban, dabigatran, rivaroxaban, edoxaban, betrixaban	Coumadin, Pradaxa, Xarelto, Edoxiban, Betrixaban	• Prevent blood clots • Help the heart pump blood
Digoxin	digoxin	Lanoxin	• Slow the heart rate • Help the heart pump blood
Hydralazine	hydralazine	Apresoline	• Relax blood vessels • Lower blood pressure • Help the heart pump blood
Vericiguat	vericiguat	Verzenio	• Relax blood vessels • Lower blood pressure • Help the heart pump blood
Oxygen Therapy	oxygen	Oxygen	• Deliver oxygen to the lungs • Help the heart pump blood

Print this **Heart Failure Medications** list. It may include one or more medications prescribed by your health care team. Use this list to better understand your medications.

Using Diuretics

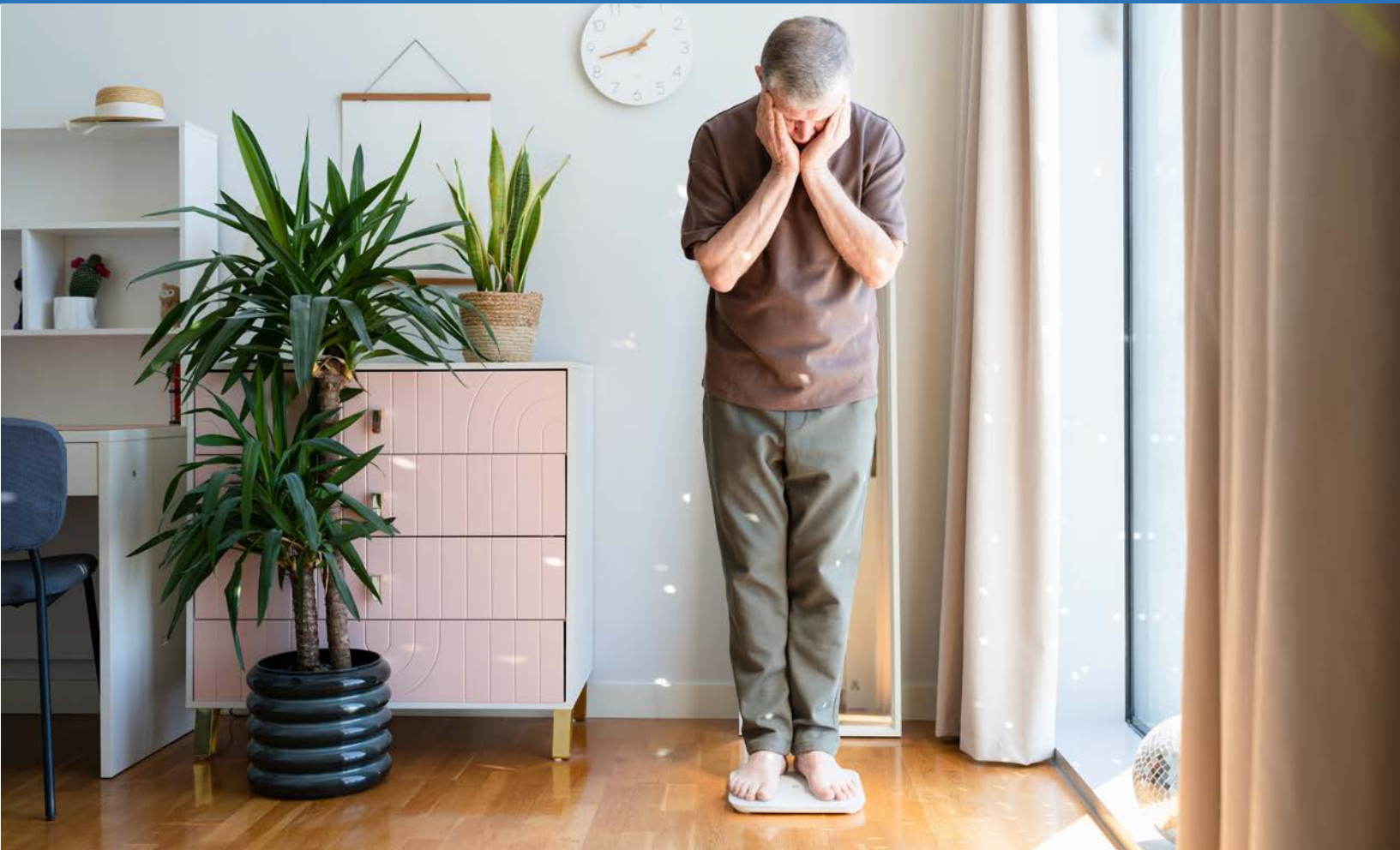
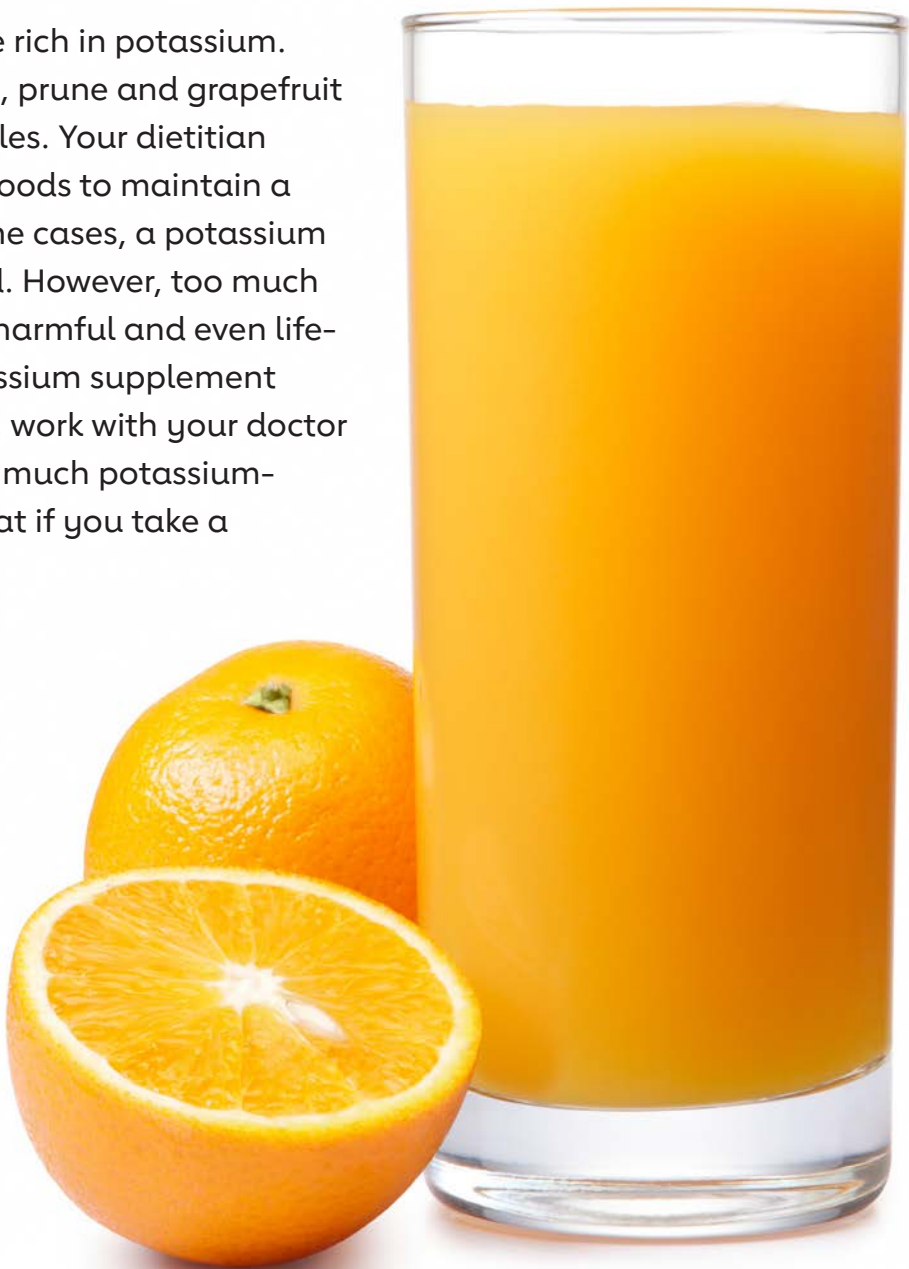
People with heart failure are often prescribed a diuretic (water pill). This helps the body get rid of extra water and sodium and eases the heart’s workload. But water pills may cause some side effects.

One common side effect of most diuretics is potassium loss. The body needs potassium to work properly. It helps maintain the electrical balance of the heart and nervous system. If you take a diuretic that causes you to lose potassium, you may be asked to increase the potassium in your diet.

Many fruits and vegetables are rich in potassium. Bananas, cantaloupes, orange, prune and grapefruit juice* and potatoes are examples. Your dietitian can help you choose the best foods to maintain a normal potassium level. In some cases, a potassium supplement may be prescribed. However, too much potassium in the body can be harmful and even life-threatening. Don’t take a potassium supplement unless it’s prescribed. If you do, work with your doctor or dietitian to understand how much potassium-containing foods you should eat if you take a potassium supplement.

**Some medications may interact with grapefruit or grapefruit juice. Talk to your health care team about potential risks.*

Potassium is in many foods and drinks, including orange juice, prune juice, grapefruit juice*, bananas, cantaloupes and potatoes.



WATCHING YOUR WEIGHT

If you take a diuretic, it’s important to weigh yourself every morning and write down your weight in a log or diary (see the Self-Check Plan on page 15). Weight gain for several days in a row, such as 2 to 3 pounds in one day or 5 pounds in one week, may be the first sign of fluid buildup. If not treated, fluid buildup makes the heart work harder and may cause shortness of breath and edema

Don’t forget — tell your health care team right away if you start to gain weight. Your medications may need to be adjusted. This may help you avoid hospitalization for worsening heart failure. Also, ask your health care professional how much fluid to drink every day.

Managing Heart Failure Medications

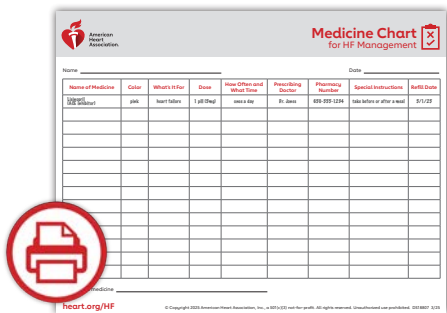
People with heart failure often need multiple medications. Each one treats a different symptom and comes with its own instructions. They can't do their job if you don't take them correctly. You and your caregivers should work with your health care team to understand the medications and how you should take them. This includes when, how often, in what amounts, with or without foods and if certain foods or drinks should be avoided.

For each medication you take, make sure you understand the answers to these questions:

- What is the name of the medication? Is this the brand or generic name? Does it matter which one is used? (Some insurance plans will only pay for the generic unless your cardiologist or primary health care professional says otherwise.)
- What is the medication supposed to do?
- How and when should I take it?
- How long will I need to take the medication?
- What foods, drinks and other medications should be avoided while taking this one?
- What are the possible side effects? What should be done if they happen?
- Is any written information available about the medication?
- What should I do if I miss a dose?

KEEPING TRACK OF YOUR MEDICATIONS

Keep a record of all the medications you're taking. This includes prescription and over-the-counter medications as well as herbs and supplements. Take this record to all medical appointments to help your health care team assess how well the medications are working.



The image shows a 'Medicine Chart for HF Management' form. It includes a header with the American Heart Association logo and the title. Below the header is a table with columns for 'Name of Medication', 'Color', 'Strength/Dose', 'Time', 'How Often and When Taken', 'Prescribing Doctor', 'Pharmacy/Supplier', 'Special Instructions', and 'Refill Date'. The first row is filled with example data: 'Lasix', 'white', '40mg', '1-2x daily', 'Once daily', 'Dr. Smith', 'ABC Pharmacy', 'Take before or after a meal', and '30/1/22'. There are several empty rows below for additional medications. A red circular icon with a printer symbol is located to the left of the bottom of the form.

Print this **Medicine Chart** and use it to keep track of the names, dosages and times to take your medications. Write in your prescribing physician's and pharmacist's phone numbers so you can contact them with questions.

TIPS FOR REMEMBERING TO TAKE YOUR MEDICATIONS

- Use a weekly pill organizer. This is a box with separate places for the days of the week. Some also have slots for four different times of day: morning, noon, late afternoon and bedtime.
- Take medications at the same time of day so it becomes routine. Be sure to follow instructions about when to take each medication (morning, bedtime, with meals). Use electronic apps or set calendar alerts to remind you to take your medications and keep track of when you take them.
- Link taking medicines with an activity, such as brushing your teeth. This will help you remember that it's time to take your pills.
- Keep an up-to-date list of your medication names, strengths and doses and take it to your medical appointments.
- If you're having trouble keeping track of your medications and when to take them, ask your health care team to help make the schedule easier.



Medicine Tips

- Bring a list of ALL medicines to each doctor visit



Watch this for tips to help you manage your medications.

Dealing With Medication Side Effects

Medications used to treat heart failure can cause side effects and may not work well with other drugs. People react to medications differently. You may or may not have side effects.

If you have side effects, report them to your health care team right away and ask what can be done. Sometimes, the dose can be changed or you can take a medication at a different time or another one instead.

AVOIDING DRUG INTERACTIONS

Potentially dangerous drug interactions can happen when different drugs mix together and work against each other. To avoid this problem, tell your health care team about all the medications you’re taking. These include over-the-counter drugs such as pain relievers, supplements or herbs as well as prescription drugs. Some over-the-counter medications could make heart failure or its symptoms worse. It’s also a good idea to ask whether any of the prescribed heart failure drugs could cause problems when combined.



If Additional Treatment Is Needed

Some people with severe heart failure may need more treatment to prevent more serious heart problems.

IMPLANTABLE CARDIAC DEVICES

Some people with heart failure develop serious arrhythmias (abnormal heartbeats). This can reduce how well the heart’s lower chambers (ventricles) function. **Cardiac resynchronization therapy**, or (CRT), also known as biventricular pacing, may be needed. In this procedure, a special pacemaker makes the ventricles contract at the same time. This helps the lower heart chambers pump and relax together.

Another device that may be used is called an **ICD (implantable cardioverter defibrillator)**. An ICD may be needed to keep the heart beating and prevent sudden cardiac death (see below).

For a heart that can’t pump on its own, mechanical circulatory support may be an option. A **left ventricular assist device**, or **LVAD**, can be implanted. This is a mechanical pump-type device. Some people use this device for the rest of their life, but it’s sometimes considered a “bridge to transplant,” or a short-term fix if surgery or a heart transplant is needed.



SURGERY OR PROCEDURES

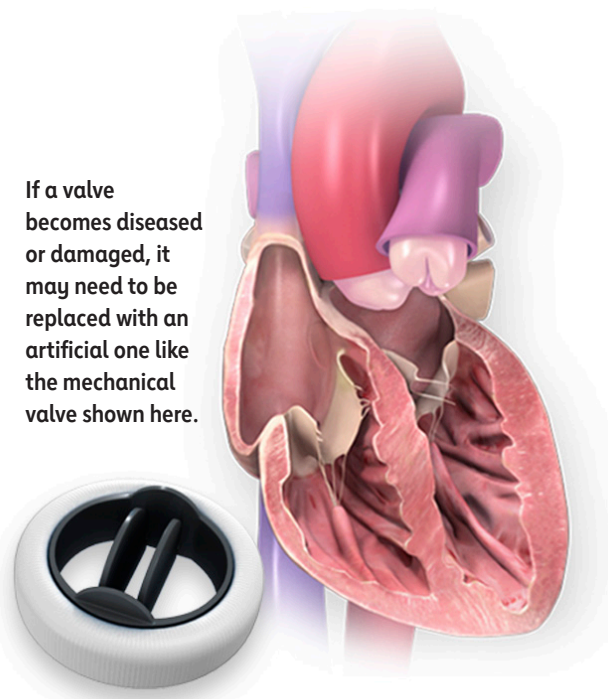
Surgery isn't often used to treat heart failure, but if the problem causing the heart failure can be corrected, your cardiologist may recommend it. Surgery may also be needed if heart failure is so severe that it can't be helped with medications and lifestyle changes. Several surgical procedures may be considered.

If heart failure is caused by a defective or diseased heart valve, then **valve repair or replacement surgery** may be an option. During valve repair, the damaged sections of the valve are strengthened. During valve replacement, the failing valve is removed, and a new valve is used in its place. The new valve may be either organic (human or animal tissue) or mechanical (metal or plastic).

In some people, valve repair and replacement can be done using minimally invasive techniques. An example is **transcatheter aortic valve replacement (TAVR)** or **transcatheter aortic valve implantation (TAVI)**. In this procedure, a new aortic valve is placed inside the damaged valve through small openings in the groin or chest.

If blockages in the coronary arteries are restricting blood supply, a procedure called **percutaneous coronary intervention (PCI)** may be performed. A small tube (**catheter**) with a tiny, deflated balloon on the end is threaded from an artery through a small incision in the groin area or through the wrist. It's pushed up to the blocked portion of the artery in the heart. Here, the balloon is inflated, flattening the blockage and opening the artery (**angioplasty**). At this point, a small mesh tube called a stent may be placed inside the artery to help keep the blood vessel open.

A procedure called **coronary artery bypass surgery (CABG)** may reroute blood supply around a blocked section of the artery. A healthy blood vessel is taken from a leg, wrist or chest wall. The blood vessel is attached to the diseased artery above and below the blockage. This allows blood to flow around the damaged area.



If a Heart Transplant Is Needed

If none of the other mentioned treatments are the right option to manage your heart failure, you may need to have your diseased heart replaced. This is called a **heart transplant**.

More than 4,100 people in the U.S. each year have a heart transplant. The outlook for people with heart transplants is steadily improving. This procedure has greatly increased survival and quality of life for people with severe heart failure.

Thoughts for Your Future

As a person with heart failure, you're responsible for following your treatment plan. It's not easy to change habits or adopt new ones. But it does get easier with time. Follow your health care team's directions, eat a healthy diet, be physically active regularly and take your medications as prescribed. If you do this, you'll improve your symptoms and lower your risk for future heart complications, including heart attack.

Monitoring symptoms and follow-up care are important for someone with heart failure. If you have concerns about accessing care, affording your medications or finding transportation to and from medical appointments, ask your health care team for support to find resources that can help.



Watch this video to learn more about getting the support you need to manage your condition.

DEALING WITH NEW EMOTIONS

You're probably feeling many emotions connected with your condition. You may feel alone, angry, scared or different from the person you were before you learned you have heart failure. These feelings are common. They may go away as you learn to understand and manage your condition.

It's important to remember that your emotions can affect managing your heart failure symptoms. It's essential to understand your feelings, recognize problems and ask for help if you need it.

SEEKING ONGOING SUPPORT

As you become healthier, reach out again to family and friends. Don't be discouraged if friends seem distant or uncomfortable at first. They may be afraid to talk about your condition. They might even say or do insensitive things. Keep in mind, their intent is not to hurt you. Big changes take getting used to, for them as well as you.

STAYING CONNECTED WITH FRIENDS AND FAMILY

Don't assume that people no longer desire your company. What if someone you love had heart failure instead of you? Would you stop being interested in that person? Chances are you'd still want to have a close and active relationship.

Family and friends are likely to feel the same way about you. You're worthy of love now, just as you were before your diagnosis. As you manage your symptoms and begin to feel better, stay engaged in your life. You might start by accepting short visits. When you feel up to it, you can add more daily social activity.



Watch this video to learn more about active support.

For Caregivers, Friends and Family

People with heart failure need loved ones and friends to support them in their efforts to improve their health. If you live with or are close to someone with heart failure, you can have a big impact on their success at managing their condition.

As a caregiver or supporter, you can help by understanding that change takes time. Help your loved one follow their health care team’s advice. Participate during hospital and office visits and help your loved one keep track of information. You can also help by talking with the health care team and keeping them updated on your loved one’s progress.

At the same time, it’s up to the person with heart failure to manage their condition. Be supportive, but don’t do everything for your loved one. Let them know you’re willing to help, but don’t take over or make excuses for lack of progress.

You can’t take good care of your loved one without first taking care of yourself. Your physical and mental health are important. For more information and support, visit heart.org/Caregiver.



Identifying Your Activity Goals

Managing your heart failure symptoms is about returning to function. It’s also about doing things that make you satisfied with life. You might want to start by visiting with a friend. Or you might go for a short walk with a family member. As you start to feel better and become more active, you’ll be more able to handle life outside your home.

Now is a good time to think about what matters most to you. What do you need to do? What do you want to do?

Overall, take your time. Make a gradual return to your normal daily activities.

LIST AND PRINT YOUR GOALS

Now that you have a better understanding of the tools you’ll need to manage heart failure, take the time to list your goals.

A screenshot of the 'Activity Chart' form from the American Heart Association. The form has two columns: 'Activity' and 'Motivation'. The 'Activity' column lists several activities with checkboxes: 'Helping with chores around the house', 'Visiting friends and family', 'Reading, writing or using the computer', 'Attending religious or social functions', 'Returning to work or volunteer activities', and 'Bike riding'. There are also 'Other:' rows. The 'Motivation' column is empty. A red circular icon with a printer symbol is overlaid on the bottom left of the form. The American Heart Association logo is in the top left corner.

Print the **Activity Chart** and mark off the goals you want to reach. Write in motivations for reaching your goals. For example, next to “Visit family and friends,” you might write “Play with kids or grandkids.”

Additional Resources

Whether you have heart failure or you’re the family member or caregiver of someone with heart failure, you’ll need to rely on others. It’s important for you to actively seek help. Help may come from family, friends, community members, government or nonprofit agencies.

American Heart Association’s Heart Failure Website

heart.org/HeartFailure

Learn more about managing heart failure, including warning signs, managing symptoms and treatment options.

American Heart Association Support Network

heart.org/SupportNetwork

Join our Support Network to connect with others, share your experiences and help others on their journeys. From diagnosis to treatment to recovery, you’ll find others with shared experiences.

Heart Insight® e-Newsletter

HeartInsight.org

Sign up for Heart Insight, our free monthly e-newsletter for heart patients, families and caregivers. It contains inspirational stories and information for improving heart health, tips for caring for loved ones and heart-healthy recipes.

The Centers for Medicare & Medicaid Services (CMS)

cms.hhs.gov

Offers links to support Medicare and Medicaid patients and their families.

BenefitsCheckUp®

benefitscheckup.org

1-800-794-6559

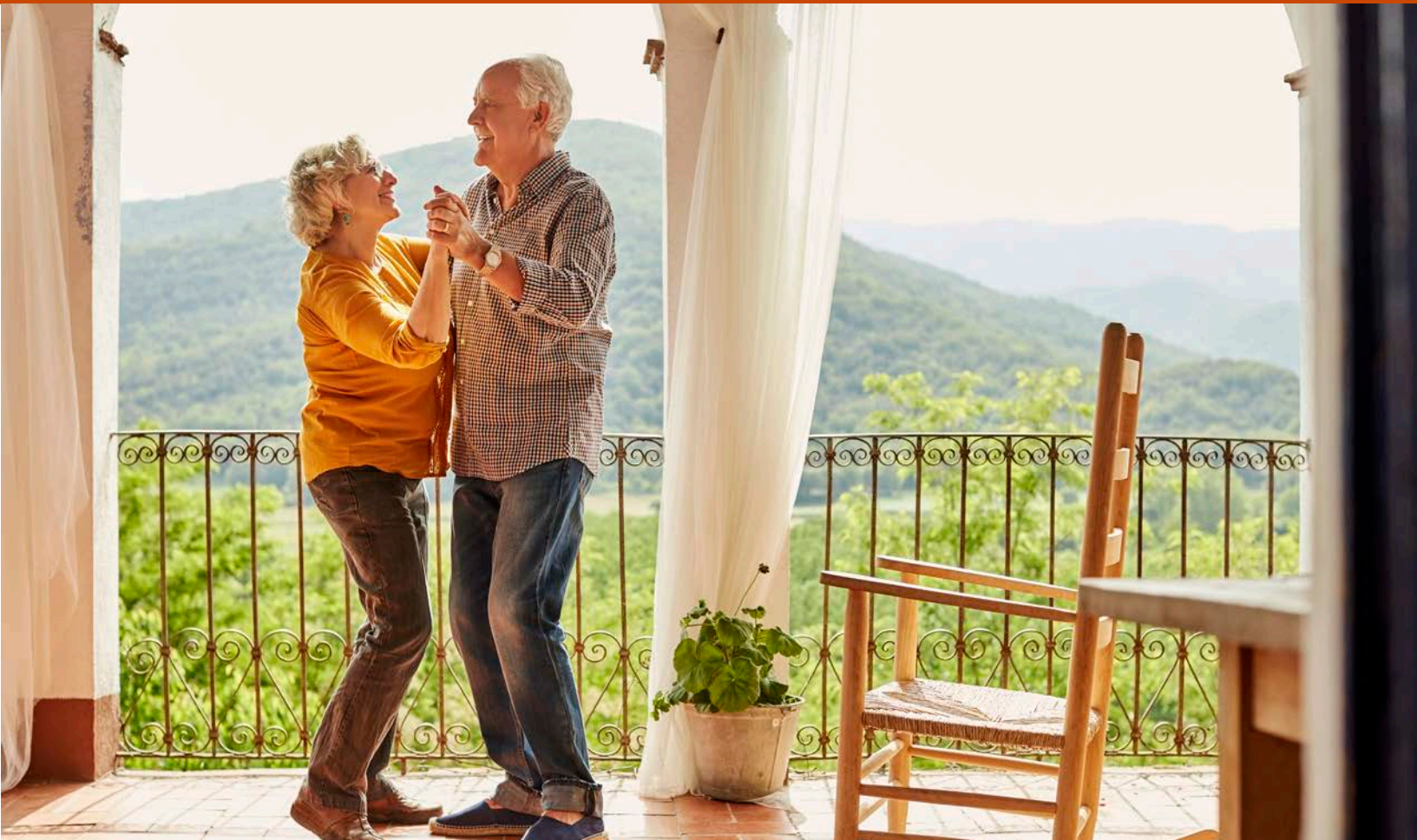
Comprehensive service provided by the National Council on Aging to screen for benefits programs for seniors with limited income and resources.

NeedyMeds

needymeds.org

1-800-503-6897

NeedyMeds connects people to programs to help them afford their medications and other health care costs.



Thriving, Not Just Surviving

You are not just a person living with heart failure. You are a complete human being. Many people with heart failure have overcome the worst effects of their condition — and reclaimed fulfilling and productive lives. You can do the same. You’re well on your way to making positive lifestyle changes to prevent a major cardiac event. Think about everything you’ve learned. Don’t forget to congratulate yourself on your progress. And keep practicing the tips from this workbook.