

Caring for Yourself After a Heart Attack

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This booklet contains important information for patients and families who have suffered a heart attack.

It will help you understand heart disease and guide you through the changes you will need to make to become a healthier and active person.

I am in the hospital because I have had a (an): (Check all that apply to you)

- ☐ Heart attack
- Unstable angina

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During my hospital stay	y:	
☐ I received information on m	ny heart attack and/or angina.	
☐ My doctor referred me to a	Cardiac Rehabilitation Program.	
☐ I had an angiogram/cardiac	catheterization. My results are	
☐ The doctor inserted	stent(s).	
☐ I had blood tests. My chole	sterol levels are:	
Type of Cholesterol	Target Levels	My Levels Write your cholesterol levels in the space provided below
Total Cholesterol	Less than (<) 4.5 mmol/L	
LDL ("Bad Cholesterol")	Less than (<) 2.0 mmol/L	
HDL ("Good Cholesterol")	Male: Greater than (>) 1.0 mmol/L Female: Greater than (>) 1.3 mmol/L	
Triglycerides	Less than (<) 1.7 mmol/L	
	rt driving in urn to work in nd symptoms of a heart attack and action (pipes, cigarettes or cigars) is a major reas tinue to smoke, I increase my chances of h	s to take if they occur. son the blood vessels to my heart are
My appointment is on:	nent to see my family doctor within 1 to 2	·
	Cardiologist (heart doctor) in:	
My Cardiologist's name is	: Phor	ne number:

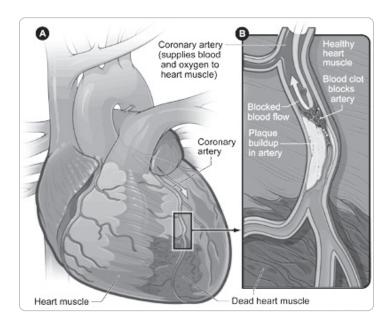
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UNDERSTANDING YOUR HEART ATTACK

What is a heart attack?

Your heart supplies the entire body with oxygen and nutrient-rich blood through a network of blood vessels. The blood vessels also take blood back to the heart from the body.

A heart attack happens when a blood vessel around the heart becomes blocked, stopping blood flow to that part of the heart. The lack of blood and oxygen damages your heart muscle and your heart no longer pumps blood effectively.



(A) Heart with muscle damage and (B) a blocked artery.

Image Source: National Heart, Lung, and Blood Institute; National Institutes of Health; U.S. Department of Health and Human Services.

What does a heart attack feel like?

Each person experiences heart pain differently. A heart attack often starts with mild symptoms that may not be painful.

You may have felt:

- Pressure, fullness, squeezing or vague or dull pain in centre of the chest
- Pain spreading to the shoulders, neck and arms
- Severe pain, sudden weakness, dizziness, fainting, sweating, nausea or shortness of breath.

What can I expect after a heart attack?

Shortly after a heart attack, your heart will start to heal itself:

- The damaged heart muscle will start to scar. This healing process takes about 4 to 6 weeks.
- If there is damage to only a small amount of your heart, you may regain normal function of your heart. However, sometimes there is permanent damage and your heart may become weak.

What is angina?

Angina is a warning sign that a heart attack may happen.
Your heart is not getting enough blood because the blood vessels running back to your heart have narrowed.

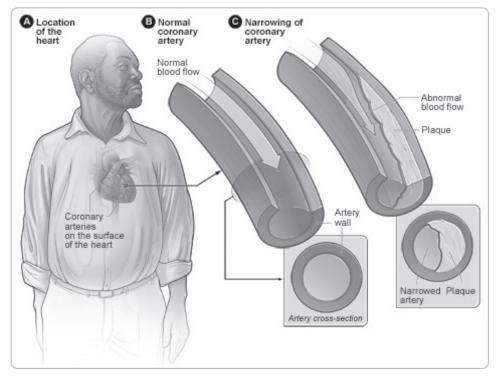


Image Source: National Heart, Lung, and Blood Institute; National Institutes of Health; U.S. Department of Health and Human Services.

What does angina feel like?

You may feel:

- Pressure or squeezing in your chest
- Pain in your shoulders, arms, neck, jaw, or back
- Pain similar to indigestion.

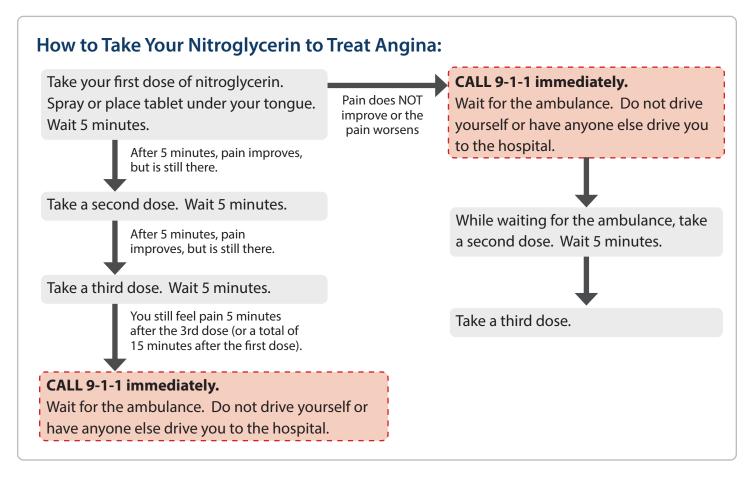
You may feel this pain or discomfort when you are performing an activity such as cleaning the house, exercising or at rest.

How do I treat angina?

When you get chest pain or discomfort from angina:

- 1. **Rest** This helps reduce the amount of work your heart needs to do.
- Relax Take slow deep breaths to help you to relax.
- 3. Take your nitroglycerin. (Refer to the next page for instructions on how to take your nitroglyerin)

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How do I reduce my risk of a heart attack?

There are risk factors of a heart attack you can change, treat or control, and others you cannot. You cannot control your race, age and gender. It is important to manage the risk factors you can control. (In the chart below, place a checkmark beside the risk factors that apply to you)

Uncontrollable Risk Factors Risk factors you can not change	Controllable Major Risk Factors Risk factors you can change or control	Controllable Contributing Factors Factors that can increase your risk of heart and blood vessel disease	
☐ Genetics and family history ☐ Age ☐ Gender ☐ Menopause	 □ Diabetes □ High blood pressure □ High cholesterol □ Excess weight and obesity □ Lack of physical activity □ Smoking □ Poor diet and nutrition 	☐ Alcohol and drug abuse ☐ Stress and tension ☐ Depression	
Source: Heart and Stroke Foundation: www.heartandstroke.ca			

MANAGING YOUR RISK FACTORS: DIABETES

If you have diabetes, you are increasing your risk for heart disease. Diabetes is a condition where your body cannot control the sugar levels in your blood and the amount of sugar in your blood increases.

Over time, the high levels of sugar start to damage your heart and blood vessels, making it easier for fatty deposits (called plaque) to build up and block your vessels. If you do not treat or control your diabetes, you can damage your eyes, nerves, kidneys and heart. It also causes erectile dysfunction in men.

What should my blood sugar levels be?

When	Target Blood Sugar Levels
Before meals	Between 4 and 6 mmol/L
Two hours after meals	Below 10 mmol/L

How can I manage my blood sugar levels?

- Take your medicines, as prescribed
- Keep track of your blood sugar Write down the time, date and the number on a paper for your doctor to review
- Have your diabetes or family doctor review your numbers. Your doctor can adjust your medicines based on your numbers.
- Visit your family doctor or diabetes specialist regularly.



Image Source: National Institute of Diabetes and Digestive and Kidney Diseases, National Institutes of Health.

To learn more about how to control your diabetes, call or ask your nurse to refer you to:

Diabetes Education Centre Humber River Health

Professional Medical Building Rm. 103 (Basement level) 2115 Finch Ave. W., Downsview Ont., M3N 2V6

Tel: (416) 747-3896

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MANAGING YOUR RISK FACTORS: HIGH BLOOD PRESSURE

Blood pressure is the force of blood on the walls of your vessels as your heart pumps blood. If the pressure is high and remains high, we call this "high blood pressure".

High blood pressure affects your heart and blood vessels in many ways:

- It damages blood vessels throughout your body. This speeds up hardening of the vessels, known as atherosclerosis.
- It causes your heart to work harder.
- It increases your risk for heart attacks, heart failure, stroke, and kidney disease.

What should my blood pressure be?

Your blood pressure goal should be less than 130/80.

Categories	Systolic (mm Hg)	Diastolic (mm Hg)
Normal blood pressure	Less than (<) 120	Less than (<) 80
Pre- Hypertension	Between 120 to 139	Between 80 to 89
Hypertension		
Stage 1 Hypertension	Between 140 to 159	Between 90 to 99
Stage 2 Hypertension	Greater than (>) 160	Greater than (>) 100



Image Source: National Institute of Diabetes and Digestive and Kidney Diseases, National Institutes of Health. **Systolic** is the top number. This is the pressure in your blood vessels when your heart beats.

120 80

Diastolic is the bottom number. This is the pressure in your blood vessels when your heart rests between beats.

How can I manage my blood pressure?

If you already have heart disease, controlling your blood pressure becomes more important. While you cannot control certain causes of high blood pressure, such as increasing age or heredity, you can control others. For instance, you can make lifestyle changes such as:

- Eat less salt The recommend daily intake is less than 2.4 grams (less than 1 teaspoon)
- Eat a diet rich in fruits, vegetables, and whole grains
- Exercise daily Talk with your doctor before starting any exercise program
- · Lose excess weight
- Avoid smoking
- If you drink alcohol, limit the number of drinks to 2 drinks (for males) and 1 drink (for females).

1 drink equals:

One 12-ounce (354 mL) bottle of beer OR

One 5-ounce (148 mL) glass of wine OR

One 1.5-ounce (44 mL) of 80-proof distilled spirits

MANAGING YOUR RISK FACTORS: HIGH CHOLESTEROL

Cholesterol is a waxy, fat-like substance that occurs naturally in all parts of the body. Your body needs some cholesterol to work properly. However, if you have too much in your blood, it can stick to the walls of your blood vessels. We call this "plaque". Plaque can narrow your vessels or even block them.

High levels of cholesterol in the blood can increase your risk of heart disease. As you get older, your cholesterol levels tend to rise. There are usually no signs or symptoms that you have high blood cholesterol. You are likely to have high cholesterol if members of your family have it, if you are overweight or if you eat fatty foods.

What should my cholesterol levels be?

A blood test can detect high blood cholesterol. The target cholesterol levels in the table on the next page (page 9) are for patients who have had a heart attack or heart disease.

How can I lower my cholesterol levels?

Your doctor will give you medicine to help control your cholesterol. Take the medicine as directed but also remember to focus on a healthy lifestyle changes.

If your bad cholesterol (LDL) is high, you should:

- Quit smoking
- Eat more soluble fibre, found in oatmeal, beans, lentils, fruits and vegetables with the skin on
- Eat lean meats (such as chicken; cut visible fat off meats) and low-fat dairy products (such as skim milk or 1% milk)
- Lose weight
- Exercise at least 30 minutes a day on most days of the week.

If your good cholesterol (HDL) is low, **in addition to the above**, you should eat more:

- Whole grains, such as oatmeal, oat bran and whole-wheat products
- Nuts, such as walnuts, almonds and brazil nuts
- Plant sterols such as beta-sitosterol and betasitostanol (please read food labels - plant sterols can be found in many products such as margarine and juices)
- Omega-3 fatty acids, such as fatty fish, fish oil supplements, flaxseeds and flaxseed oil.

How much omega-3 fatty acids should I eat every day?

Health Canada recommends:

Men: 1.6 grams (0.05 oz)/day Women: 1.1 grams (0.04 oz)/day

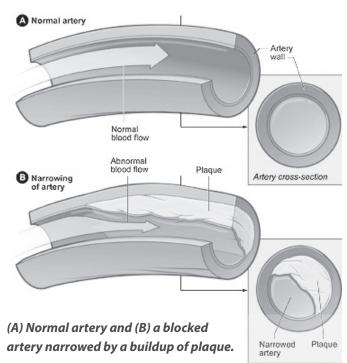


Image Source: National Heart, Lung, and Blood Institute; National Institutes of Health; U.S. Department of Health and Human Services.

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Type of Cholesterol	What it is and how it affects your body	Target Cholesterol Levels	What's your number? Write your cholesterol levels in the space provided below
Total Cholesterol	Cholesterol is a type of fat that circulates in your blood. Your body uses cholesterol to build cells and certain hormones. There are two types of cholesterol: low-density lipoprotein (LDL) cholesterol and high-density lipoprotein (HDL) cholesterol. When we measure total cholesterol, we are looking at the total amount of these two types in the blood.	Less than 4.5 mmol/L	
LDL ("Bad cholesterol")	High levels of LDL can cause a build-up of plaque (cholesterol or 'fatty' deposits) inside your blood vessels. This can narrow the vessels and increase your risk of heart attacks or stroke. It is important for you to keep your bad cholesterol (LDL) low to reduce your risk of plaque build-up in the blood vessels of your heart.	Less than 2.0 mmol/L	
HDL ("Good cholesterol")	HDL act as scavengers, picking up excess cholesterol in your blood and taking it back to your liver to be broken down. The higher your HDL level, the less "bad" cholesterol you will have in your blood.	Male: Greater than 1.0 mmol/L Female: Greater than 1.3 mmol/L	
Triglycerides	Triglycerides are another type of fat that circulates in your blood. Triglycerides store unused calories and provide energy. If you regularly eat more calories than you burn, especially "easy" calories like carbohydrates and fats, you may have high triglycerides (hypertriglyceridemia).	Less than 1.7 mmol/L	

MANAGING YOUR RISK FACTORS: WAIST CIRCUMFERENCE

Fat stored around your middle can put you at risk for high blood pressure, high blood cholesterol, type-2 diabetes, heart disease and stroke. Reducing your weight by as little as 5% of your body weight can help you reduce your blood pressure and total blood cholesterol.

Simply weighing yourself is not the only way to determine your health risk. Studies have shown that extra weight around the waistline is more dangerous to the heart than extra weight that is on the hips and thighs.

Waist measurements linked with an increased risk of developing health problems:

Male	Equal to or more than 102 cm (40 in.)
Female	Equal to or more than 88 cm (35 in.)

Exceptions: South Asian, Malaysian, Asian, Chinese, Ethnic South and Central America If you are a member of one of these ethnic groups, you are at increased risk of developing health problems if your waist is:

Male	Equal to or more than 90 cm (35 in.)
Female	Equal to or more than 80 cm (32 in.)

How do I take a proper waist measurement?

You will need:

- Wall or full-length mirror
- Measuring tape
- Pen or felt-tip marker
- Clear your belly area of any clothing, belts or accessories. Stand upright facing a mirror with your feet shoulder-width apart and your belly relaxed. Wrap the measuring tape around your waist.
- Use the borders of your hands and index fingers

 not your fingertips to find the uppermost
 edge of your hipbones by pressing upwards
 and inwards along your hipbones.

TIP!

Many people mistake an easily felt part of the hipbone located toward the front of their body as the top of their hips. This part of the bone is in fact not the top of the hipbones. By following this spot upward and back toward the sides of your body, you should be able to locate the true top of your hipbones.

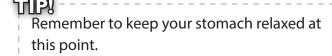
3. Using the mirror, align the bottom edge of the measuring tape with the top of the hipbones on both sides of your body.

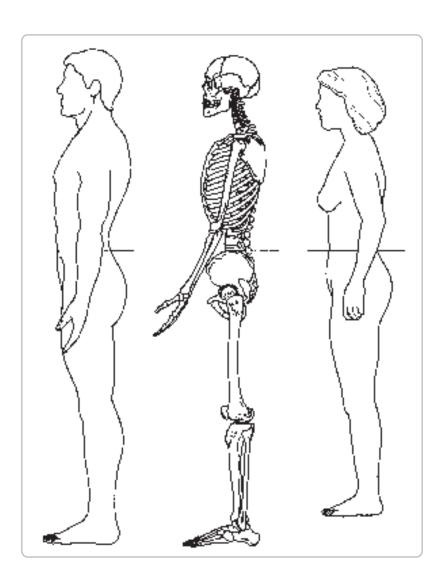
TIP

Once located, it may help to mark the top of your hipbones with a pen or felt-tip marker. This may help you correctly place the tape.

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- 4. Make sure the tape is parallel to the floor and is not twisted.
- 5. Relax and take two normal breaths. After the second breath out, tighten the tape around your waist. The tape should fit comfortably snug around the waist without pressing into the skin.





Measuring tape position for waist circumference.

Image Source: National Heart, Lung, and Blood Institute; National Institutes of Health; U.S. Department of Health and Human Services.

MANAGING YOUR RISK FACTORS: POOR DIET AND NUTRITION

High levels of cholesterol in your blood may put you at a higher risk for developing heart disease. If you limit your intake of **saturated fat, trans fat and cholesterol**, this will help lower your cholesterol levels and help your heart stay healthy.

What are the different types of fats?

Type of Fat	What is it and what foods is it found in?	
Saturated Fat	 Solid at room temperature Found in animal-based foods (such as meat and dairy) Also found in tropical fats (such as coconut and palm oil). 	
Trans Fat	 Found in hard margarine or processed foods (such as cookies or crackers) Also known as "hydrogenated fat" or "vegetable shortening" 	
Cholesterol	Only found in animal-based foods (such as meats, eggs, dairy products)	
Unsaturated Fat (mono- unsaturated and poly- unsaturated)	 Found in plant foods (such as, canola oil or peanut butter) Omega-3 is a healthy fat that our body does not make. You can find it in flax seed. Fish and shell fish contain a high amount of it. You should eat these foods in your diet regularly. 	

While eating foods with saturated fat, trans fat and cholesterol may increase your cholesterol levels, eating foods with unsaturated fat can help improve your cholesterol levels – keeping your heart healthy!

What heart-healthy foods should I choose more often?

Choose these heart healthy foods more often and follow Canada's Food Guide for recommended food portions.

Meat and Alternatives - Meat: No more than 2 servings per day, except for fish, which is unlimited; Alternatives: 4 to 5 servings per week

Type of Meat/ Alternative	1 serving equals	
Lean, skinless cuts of meat or poultry	3 oz (85 g)	
Oily fish (herring, mackerel, salmon, sardines, trout)	3 oz (85 g)	
Deli meats (such as, roast beef, lean ham, lean turkey)	1 oz (28 g)	
Beans, peas and lentils	1/2 cup (125 mL)	
Eggs	1 egg	
Nuts (such as almonds, peanuts, walnuts)	2 tbsp (30 mL)	
Flax, sunflower seeds, sesame seeds	2 tbsp (30 mL)	
Nut/seed butters	1 tbsp (15 mL)	

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Milk and Milk Products - 2 t	o 3 servings a day	
Type of Milk/Milk Product	1 serving equals	
Skim or 1% milk	8 oz (250 mL)	
Yoghurt with 1% milk fat or less	1 cup (250 mL)	
Skim milk cheese or cheese with less than 20% milk fat	1.5 oz (42 g)	
Non-fat dairy desserts, coffee creamers and sour cream		

Fruits and Vegetables - 5 to 10 servings a day **AIM FOR 10 SERVINGS**

- Avoid seasoning with butter or salt, opt to season with lemon juice, vinegar or low fat salad dressings and dip
- Choose a variety of colors of fruits and vegetables every day
- Choose whole fruits over juices to increase your fibre intake
- Avoid canned vegetables since they are higher in salt
- Frozen fruits and vegetables are just as healthy as fresh
- Eat all skins and peels on fruits and vegetables
- Choose whole fruits rather than juices.

Grains - 6 to 8 servings a day

- Choose whole grain breads, cereals, pasta and rice which are high in FIBRE
- For example, whole wheat breads, oats and oatmeal, barley, rye, corn, popcorn, wide rice, buckwheat, bulgar, quinoa.

Limit Salt Intake - Less than 1200 mg (1/2 tsp) per day

- Avoid adding salt when cooking
- Keep the salt shaker off the dinner table
- Choose processed, pre-packaged foods less often (for example, salty snack foods, process meat and canned soups)
- Avoid hidden salts like soya sauce, brine, monosodium glucamate (MSG).

Fats and Oils

- · Choose canola and olive oils
- Choose safflower, sunflower, corn, soybean oils
- Choose non-hydrogenated soft margerines made from oils listed above.

How can I improve my diet and nutrition?

- Limit your intake of saturated and trans fat
- Choose unsaturated fats more often
- Increase your fibre intake daily by eating whole grains and fresh fruits with skins and peels
- Limit use of added salt and pre-packaged foods to less than 1/2 tsp a day of salt
- Use low fat cooking methods (for example, avoid frying)
- Aim for 10 servings of fruits and vegetables daily
- Have 3 oz (85 grams) of fish 2 to 3 times per week (not deep fried)
- Have 2 to 3 servings of milk or dairy products daily
- Read the food label!

For further information on healthy eating, read the "Healthy Eating and You" booklet provided or speak with a dietitian.



MANAGING YOUR RISK FACTORS: SMOKING



If you quit now, you will:

- Reduce your chances of having another heart attack
- Reduce your chance of cancer
- Breathe better when you walk
- Increase the oxygen levels in your blood and decrease the carbon monoxide levels within 8 hours
- Have a better sense of smell within 2 days
- Improve your cough, tiredness, sinus congestion and shortness of breath within 6 months
- Find it easier to breath within 2 to 6 months because your lungs are working better.

How can I start my own Quit Plan?

١.	NOT.	3 (11117	Date
	JEL	$a \cdot$	/uil	Date

I have committed to stop smoking on the	
, 20	

On this day, and on each day afterwards, I will not smoke. I will do whatever it takes to keep this promise so that I can have a new and better life without cigarettes.

2. My reasons for quitting are:

i.	
ii.	
iii.	

3. My concerns about quitting are:

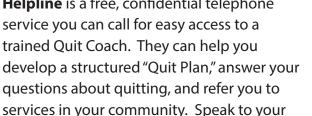
i.	 	 	
ii.			

4. I will do the following to overcome my concerns:

i.	 	 	
ii.		 	

- 5. **Prepare for withdrawal symptoms.** While you are in hospital, we can offer you treatments to help relieve the withdrawal symptoms. Speak with your nurse for further information.
- 6. Think about using family and friends around that can help with the quit effort. They can help encourage, distract and help you avoid the temptation to smoke.

The Canadian Cancer Society Smokers' **Helpline** is a free, confidential telephone



contact Smokers' Helpline:

1 (877) 513-5333

nurse if you are interested in this program or

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MANAGING YOUR RISK FACTORS: STRESS LEVELS

Stress is a physical and emotional response to a situation that threatens your physical or emotional health. Stress is not always negative. Good stress pushes you to work harder, but bad stress can cause cardiovascular damage.

Too much bad stress can:

- Lower your body's resistance to disease
- Contribute to stomach and sleeping problems
- Increase your heart rate, breathing rate and blood pressure
- Increase the amount of fatty acids and cholesterol emptied into your blood stream, causing your blood to thicken and your heart to work harder
- Increase your muscle tension.

When you remove the stressful situation, your body relaxes and these processes reverse. Some people feel the effects of stress on their bodies more than others feel.

How can I reduce my strss levels?

- Take time to identify what works to reduce your stress. Find ways to put those activities into routine practice. Many people find exercise, yoga or meditation helpful.
- Learn to let go and accept that some things are beyond your control.
- Family, friends and sometimes pets are important to your well-being. Learn to lean on others for support and fun times, and allow them to lean on you.
- Practice deep breathing whenever you feel "stressed out." Inhale deeply through your nose, hold for a count of five and then exhale slowly through pursed lips. Repeat until you feel calm.

- Take time to relax. Go to a movie, take a warm bath, walk around the park, listen to soothing music, read a book, put your feet up and close your eyes, or take up a hobby like sewing, carpentry or stamp collecting.
- Find someone you can talk with.
- Find helpful materials and resources at the Patient & Family Resource Centre. The Centre is located on level 0 of the hospital.



Image Source: National Institute of Diabetes and Digestive and Kidney Diseases, National Institutes of Health.

TAKING MEDICINES FOR HEART DISEASE

Before you leave the hospital, please make sure you know:
☐ The name of each medicine you are taking
☐ Why you are taking each medicine
☐ The side effects you may expect and what you should do if they happen
Any precautions
☐ What to do if you miss a dose.

What should I remember when taking my medicines?

- Take your medicines as your doctor has asked you to.
- Do not break, crush or chew before swallowing any medicines unless your doctor has told you to do so.
- Carry a list of your medicines in your wallet
- Have all your prescriptions filled at the same pharmacy
- Make sure you do not run out of medicine or refills
- Ask your doctor or pharmacists' advice before buying over-the-counter medicines (including vitamins and herbal products)
- · Keep medicines in original container
- Store medicine at room temperature and away from heat, moisture and direct light unless otherwise directed
- Keep medicines out of reach of children
- Do not share medicine with anyone
- When travelling, always keep your medicine in your carry-on luggage.

How can I keep track of the heart medicines I am taking?

The following pages list the common heart medicines that your doctor may prescribe to you. Place a checkmark beside the medicines that you are taking.



Image Source: National Institute of Diabetes and Digestive and Kidney Diseases, National Institutes of Health.

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Antiplatelet: Prevents platelets (a type of cell found in blood) from becoming sticky and clumping together to form a blood clot.

Common Name (Brand Names)	What do I use this medicine for?	What are the possible side effects?	When should I call my doctor?
Acetylsalicylic Acid (ASA) (Asaphen®, Aspirin®, Entrophen®, Novasen®)	 To prevent heart attacks and stroke For relief of pain, fever and swelling. 	 Upset stomach (take ASA with food) Minor bleeding (for example, bleeding from gums when brushing teeth, nosebleeds). 	
Clopidogrel (Plavix®)	 To prevent heart attacks and stroke To prevent stents from closing up after angioplasty (used together with ASA). 	 Nausea (feeling of throwing up) Rash Stomach cramps Minor bleeding (for example, bleeding from gums when brushing teeth, nosebleeds). 	Call your doctor if:Your side effects become severeYou have unusual bleeding (for
Prasugrel (Effient®)	To prevent stents from closing up after	Minor bleeding (for example, bleeding from	example, black or tarry stool, coffee ground vomit, pink urine) • You find it hard to breathe.
Do not use if you are 75 years old or older or weigh less than 60 kg. Check with your doctor.	angioplasty (used together with ASA).	gums when brushing teeth, nosebleeds).	
☐ Ticagrelor (Brilinta®)	 To prevent heart attacks To prevent stents from closing up after angioplasty (used together with ASA). 	 Minor bleeding (for example bleeding from gums when brushing teeth, nosebleeds) Shortness of breath Irregular heart rate Headache or feeling dizzy. 	

Anticoagulant: Thins your blood so that clots will not form or get larger, but does not dissolve clots.			
Common Name (Brand Names)	What do I use this medicine for?	What are the possible side effects?	When should I call my doctor?
☐ Warfarin (Coumadin®)	 To prevent heart attacks and stroke To treat blood clots in legs (deep vein thrombosis) To treat blood clots in lungs (pulmonary embolism). 	 Upset stomach Minor bleeding (for example, bleeding from gums when brushing teeth, nosebleeds). 	 Call your doctor if: Your side effects become severe You have unusual bleeding (such as, black or tarry stool, coffee ground vomit, pink urine).

Beta Blocker: Relaxes your blood vessels, decreases your heart rate and reduces your heart's need for blood and oxygen. **Common Name** What do I use this What are the possible When should I call (Brand Names) medicine for? side effects? my doctor? • To lower ☐ Acebutolol Feeling dizzy or drowsy Call your doctor if: blood pressure (Rhotral®, • Feeling tired or lack Your side effects Sectral®) • To prevent chest pain of energy become severe or heart attacks ☐ Atenolol · Low heart rate Your heart rate (Tenormin®) To correct an becomes very slow Cold hands and feet irregular heartbeat. ☐ Bisoprolol • You find it hard to • Disturbed sleep (such as, (Monocor®) breathe (shortness nightmares). of breath) ☐ Carvedilol (Coreg®) Your chest pain continues or ☐ Labetalol increases. (Trandate®) (Lopressor®) (Corgard®) Propranolol (Inderal®) ☐ Sotalol (Rylosol®)

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Angiotensin Converting Enzyme (ACE) Inhibitor: Relaxes your blood vessels, makes your heart pump more easily by increasing the supply of blood and oxygen to the heart and lowers blood pressure by causing water and salt loss.

pressure by causing w	ater and salt loss.		
Common Name (Brand Names)	What do I use this medicine for?	What are the possible side effects?	When should I call my doctor?
Benazepril (Lotensin®) Captopril (Capoten®) Cilazapril (Inhibace®) Enalapril (Vasotec®) Fosinopril (Monopril®) Lisinopril (Prinivil®, Zestril®) Perindopril (Coversyl®) Quinapril (Accupril®) Ramipril (Altace®) Trandolapril (Mavik®)	 To lower blood pressure To improve and help heal a weakened heart To protect the kidneys in people with diabetes. 	 Feeling dizzy or drowsy Dry cough Taste changes. 	Call your doctor if: • Your side effects become severe • Your tongue, throat or face start to swell up • You find it hard to breathe or swallow.
		11/1	//

Image Source: National Institute of Diabetes and Digestive and Kidney Diseases, National Institutes of Health.

Angiotensin II Receptor Blocker (ARB): Relaxes your blood vessels, makes your heart pump more easily by increasing the supply of blood and oxygen to the heart and lowers blood pressure by causing water and salt loss.

Common Name (Brand Names)	What do I use this medicine for?	What are the possible side effects?	When should I call my doctor?
Candesartan (Atacand®) Eprosartan (Teveten®) Irbesartan (Avapro®) Losartan (Cozaar®) Olmesartan (Olmetec®) Telmisartan (Micardis®)	 For patients who can not take ACE inhibitor To lower blood pressure To improve and help heal a weakened heart To protect the kidneys in people with diabetes. 	Feeling dizzy or drowsy Headaches.	Your side effects become severe Your tongue, throat or face start to swell up You find it hard to breathe or swallow.

Direct Renin Inhibitor: Stops your body from making angiotensin II. This relaxes your blood vessels and lowers your blood pressure.

vessels and lowers your blood pressure.			
Common Name (Brand Names)	What do I use this medicine for?	What are the possible side effects?	When should I call my doctor?
☐ Aliskiren (Rasilez®)	To lower blood pressure	 Nasopharyngitis (common cold) Diarrhea or constipation Swelling of hands, ankles or feet 	 Call your doctor if: Your side effects become severe Your tongue, throat or face swell up You find it hard to breathe or swallow.

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Calcium Channel Blocker: Relaxes blood vessels, increases the supply of blood and oxygen to the heart and reduces heart rate. **Common Name** What do I use this What are the possible When should I call (Brand Names) medicine for? side effects? my doctor? To lower blood Feeling dizzy Call your doctor if: ☐ Amlodipine pressure (Norvasc®) Ankle swelling Your side effects become severe To prevent chest pain ☐ Diltiazem Slow heart rate (Cardizem®, • To correct irregular • Your face, tongue or Constipation heartbeats. lips swell up Tiazac®) • Flushing (sudden • Your chest pain ☐ Felodipine reddening of the face, gets worse (Plendil®, neck or upper chest). Your heart rate Renedil®) becomes very slow. **☐** Nifedipine ∇erapamil

HMG-CoA Reductase inhibitor ("statin"): Stops your liver from making cholesterol. This reduces the amount of cholesterol in your bloodstream and plague forming in your blood vessels. What do I use this When should I call **Common Name** What are the possible (Brand Names) medicine for? side effects? my doctor? **☐** Atorvastatin To lower cholesterol • Gas, stomach pain or Call your doctor if: (Lipitor®) cramps • To prevent heart Your side effects disease, heart attacks become severe • Diarrhea or constipation ☐ Fluvastatin and stroke. (Lescol®) · Bloating. · You feel muscle pain, cramps or Lovastatin weakness (Mevacor®) • Your eyes or skin Pravastatin start to turn yellow. (Pravachol®) ■ Rosuvastatin (Crestor®) Simvastatin (Zocor®)

	Common Name (Brand Names)	What do I use this medicine for?	What are the possible side effects?	When should I call my doctor?
Short-Acting Nitrates	□ Nitroglycerin pump spray (Nitrospray®) □ Nitroglycerin sublingual tablet (Nitrostat®)	To treat angina (chest pain).	• Headache.	 Call 9-1-1 if: The pain gets worse 5 minutes after your first dose (spray) of Nitrospray® or Nitrostat®. The pain does not go away after 3 sprays, taken 5 minutes apart (that is, after a total elapsed time of 15 minutes). See page 5 for step- by-step instructions on taking your nitroglycerin.
Long-Acting Nitrates	□ Nitroglycerin Transdermal Patch (Nitro-Dur®) □ Isosorbide Mononitrate (Imdur®) □ Isosorbide Dinitrate (Apo-ISDN®)	To prevent angina (chest pain).	 Headache Flushing (sudden reddening) of the face Feeling dizzy, lightheaded, feel like fainting. 	Call your doctor if: Your side effects become severe Your face, tongue or lips swell up.

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ACTIVITIES AFTER A HEART ATTACK

What activities can I do when I get home?

You can gradually start your normal activities, depending on how your body tolerates activity. At first, you might not be able to do a lot.

- Pace yourself
- Take rest breaks throughout the day
- Do one task at a time
- Rest for about 1 hour after meals.

If you have any symptoms such as pain, nausea or tiredness during any activity, report these symptoms to your doctor.



At	You can start
Week 1	Bathing, shaving, dressing
	Light hobbies, such as reading, games
	Light house work, such as dusting, tiding
	Walking at a slow pace
	Climbing one flight of stairs
Week 2	Climbing 2 flights of stairs
	Sweeping
	Preparing light meals
	Visiting or going out
	Walking the dog
Weeks	Light gardening
3 to 4	Washing the car
	Walking
	Sexual activity

What activities should I avoid after leaving the hospital?

Please check with your doctor before you resume any of the following activities:

- Holding, lifting, pulling or pushing objects weighing more than 5 pounds.
- Mowing grass
- · Shoveling snow
- Heavy gardening
- Straining during a bowel movement
- Strenuous arm activities, such as painting, vacuuming or scrubbing
- Any exercise program.

Remember to ask your heart doctor or family doctor about when you can drive, go back to work or fly.

When can I resume sexual activity?

Most people resume sex in 4 to 6 weeks after a heart attack depending on their progress. The demand on the heart during sexual activity is similar to that of brisk walking or climbing two flights of stairs without shortness of breath.

Please speak with your doctor before using sexual enhancement drugs, such as Cialis® or Viagra®.

Both partners need to share in the responsibility for resuming the sexual relationship. Below are suggestions to build up gradually to your usual pattern of sexual activity.

- Resume sex in familiar, relaxed surroundings.
- Avoid extreme hot or cold temperatures (in rooms, showers or baths). This can add stress on the heart.
- Foreplay helps prepare your heart gradually for the increased demand of sexual activity.
- Use positions that are comfortable and relaxing. Your usual positions are the least stressful. If you had open-heart surgery, choose a position that does not put stress on your breastbone (sternum).
- If you are unusually tired, upset or pressured, postpone sex.
- Wait 3 hours after eating a heavy meal or drinking alcohol.
- Get rest before sex. The morning is an ideal time for sexual activity.
- Masturbation requires less energy than intercourse.
- Sex with someone other than your usual partner may increase stress to your heart.

It is normal for your heart rate and breathing to increase during sexual activity, but they should return to normal within 5 minutes.

Report any of these symptoms to your doctor:

- Heart pain during or after intercourse
- Rapid heart rate and heavy breathing lasting 10 to 15 minutes.



Image Source: National Institute of Diabetes and Digestive and Kidney Diseases, National Institutes of Health.

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CARDIAC REHABILITATION

Cardiac rehabilitation (rehab) is a medicallysupervised program that helps you improve the health and wellbeing of your heart.

The program can help you:

- Recover after a heart attack
- Prevent future hospital stays
- Prevent heart problems and death related to heart problems
- Manage your risk factors, such as high blood pressure, high cholesterol, weight issues, diabetes, smoking, lack of physical activity and depression
- Improve your quality of life.

Cardiac rehabilitation programs offer support in:

- Exercise
- Nutrition
- Smoking cessation
- Taking medicines
- Stress management.

Your family can attend the program with you.

If you are interested in joining a cardiac rehabilitation program in your area, please speak with your cardiologist (heart specialist) or nurse before you leave the hospital or your family doctor.

You will need a referral from your cardiologist or family doctor to receive these services.



Image Source: National Institute of Diabetes and Digestive and Kidney Diseases, National Institutes of Health.

YOUR FEELINGS AFTER A HEART ATTACK

The way you cope with your feelings about having heart disease is an important part of your recovery. Coping is a response to stress. People respond to heart disease in many different ways.

Some common feelings about having heart disease are denial and anxiety. These feelings usually do not last and by knowing about them you will be able to cope.

Anxiety

Anxiety is a normal reaction to a scary or unknown situation. You may feel tense, nervous, or irritable. These feelings usually come from not knowing what to expect during your recovery or what your life will be like. It is a good idea to talk about your feelings with the people around you.

Denial

Denial is when you think that heart disease cannot happen to you. Denial is a common reaction because having heart disease can be overwhelming. Denial temporarily helps to protect you from a stressful situation. You must make some changes in your lifestyle to prevent problems in the future. If you cannot accept your heart disease over time, you should seek counseling.

Depression

Feeling sad, lonely or angry are common reactions to heart disease. These may be signs of depression. A good way to deal with depression is to remain as active as possible. Your strength and activity will return as you recover. Take one day at a time and set small progressive goals for yourself. Focus on what you can do, not what you cannot do.

The Role of Family Members or Friends

Family members may also become anxious and depressed it they do not understand your heart disease. Let them know what is going on, and what to expect in the future. Your family and friends can help support you if they understand.



Image Source: National Institute of Diabetes and Digestive and Kidney Diseases, National Institutes of Health.

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