



Living Well with Heart Failure

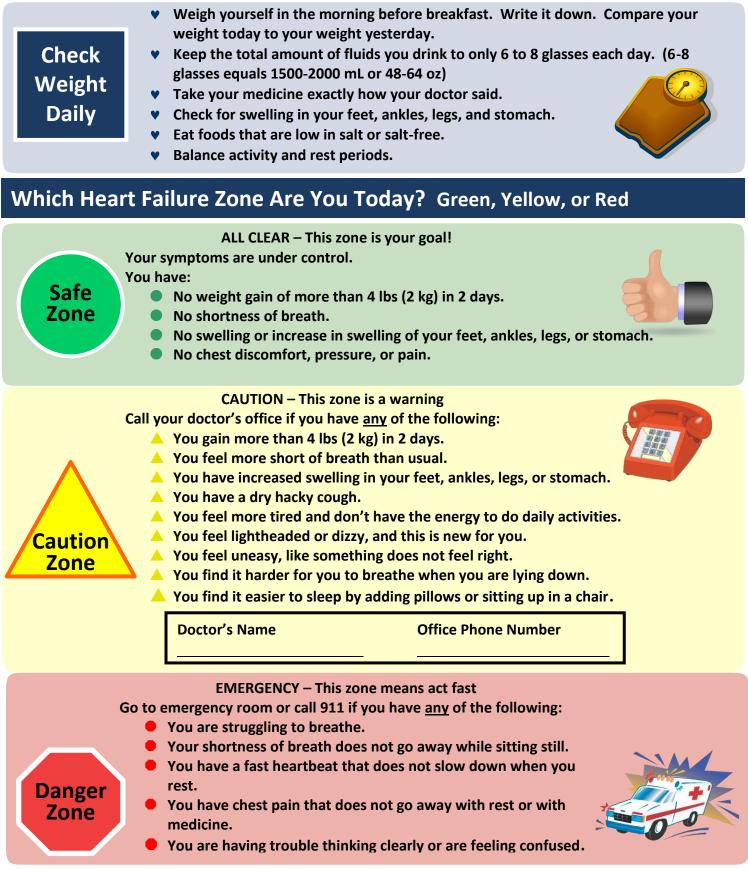


A guide to help you understand and learn to live well with heart failure

Your name: _____



Heart Failure Zones



The information in this document is intended solely for the person to whom it was given by the healthcare team.

Introduction

Learning that you or your loved one has heart failure can be difficult. You will have many questions about your condition and your care. Learning about your heart failure, lowering your risk factors, and knowing what to expect will help you live well with heart failure.

This booklet, along with the Heart and Stroke Foundation's Recovery Road: An information guide for heart patients and their families will help you learn more about heart disease and how to lower your risk factors.

There is a lot of information in these booklets. There will be some information you do not need right now. Take your time reading the sections that are important

for you to know. The Heart & Stroke Foundation's Recovery Road has an excellent **Glossary** to help you learn the meanings of the new words.

IMPORTANT: The information in this booklet is intended solely for the person to whom it was given by the health care team. It does not replace the advice or directions provided to you by your cardiologist or internist.

Approved by: VIHA Heart health Operations, March 2011

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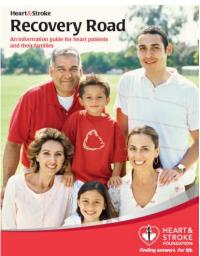


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Information about Heart Failure

What you should know about heart failure

Heart failure is a condition that affects over 350,000 Canadians of all ages. It is the most common diagnosis that results in admissions to hospital. Many new cases of heart failure are diagnosed each year.

What is heart failure?

Even though it sounds scary, heart failure does not mean that your heart will suddenly stop working or that you are about to die. Rather, the term heart failure describes a condition where your heart is not working well. It needs to work harder to keep blood flowing through your body.

The weakened pumping of the heart may cause fluid to collect in your ankles, lower legs, and belly. If extra fluid collects around your lungs, you may become short of breath when you are active. Some people may have a hard time lying flat.

With heart failure, it is harder for your heart to pump blood and oxygen to your body. So, it is common to feel tired and short of breath. This may lead to fatigue (extreme tiredness).

What causes heart failure?

The most common cause of heart failure is a heart attack. At the time of a heart attack, part of the heart muscle is injured from lack of blood supply because of blocked coronary (heart) arteries. When patients have had a lot of heart muscle damage due to a heart attack, the heart becomes weak and heart failure may occur.

Heart attack and heart failure can occur separately. Heart failure is **not the same as** a heart attack.

Other causes of heart failure include:

- A heart muscle problem called cardiomyopathy (cardio = heart and myopathy =muscle abnormality). This can be due to a virus, some chemotherapy medications, high alcohol use, or an unknown cause.
- Long-term high blood pressure
- A defect of one or more of the heart valves
- Abnormal heart rhythms
- Obstructive sleep apnea

What are some of the symptoms?

- General fatigue (extreme tiredness) and weakness
- Shortness of breath, which can happen even during mild activity or during sleep
- Difficulty breathing while lying down
- Weight gain, with swelling in the legs, ankles and belly from fluid retention

How is heart failure diagnosed?

Your doctor will start by reviewing your medical history and doing a physical exam. Doctors often order a number of tests to find out if you have heart failure. These include:

- A chest X-ray to look at the size of your heart and to find out if there is fluid in your lungs.
- An echocardiogram and/or heart scan (MUGA scan) to look at the chambers and valves in your heart and to find out your ejection

fraction. The ejection fraction (EF) is a measure of how well your heart is pumping. People with a healthy heart usually have an ejection fraction of 50% or greater. Many people with heart failure, but not all, have an ejection fraction of 40% or less. It is possible to have heart failure with a normal EF.

- An electrocardiogram or ECG to look at your heart rhythm
- **Blood tests** to find out your kidney function, and some other things

What you can do to stay well and out of the hospital

Most people with heart failure are admitted to hospital because they:

- Have too much salt or fluid in their diet
- Don't notice the signs of too much fluid in their body (fluid retention)
- Don't take action when fluid retention occurs

You can keep yourself well and out of the hospital by knowing what to do and reporting changes to your health care team early! Refer to the Heart Failure Zones chart inside the front cover of this booklet.

Treatment for Heart Failure

What treatment will I get?

There are many treatments for heart failure. More and more options become available each year. These include:

- Medications
- Lifestyle changes: diet, exercise, management of stress
- Implantable cardiac (heart) devices: E.g. Implantable Cardiac Defibrillator (ICD) or Cardiac Resynchronization Therapy (CRT)
- Surgery (e.g. coronary artery bypass graft or valve surgery)

Medications can help

Certain types of medications help prevent more heart failure and may help you to live a longer and healthier life. Each medication helps in a different way.

You may not be on all the types of medications listed below. If you are not on one of these medications and are wondering why, please ask your doctor or pharmacist.



The medication and dosage vary between people, depending on their condition. It is common to have medication and dosage changes after diagnosis and after a follow-up visit.

1. Angiotensin Converting Enzyme (ACE) Inhibitors (ACEIs) and Angiotensin Receptor Blockers (ARBs)

Types of ACEIs:

- Ramipril (Altace®)
- Enalapril (Vasotec®)
- Trandolopril (Mavik)
- Perindopril (Coversyl®)
- Quinapril (Accupril®)
- Fosinopril (Monopril®)
- Lisinopril (Prinivil, Zestril®)
- Captopril (Capoten®)

Types of ARBs:

- Candesartan (Atacand®)
- Valsartan (Diovan®)
- Losartan (Cozaar®)
- Telmisartan (Micardis®)
- Irbesartan (Avapro®)

Why it's important to take ACEIs or ARBs:

ACEIs and ARBs have been shown to slow the worsening of heart failure, help patients live longer, improve quality of life, and spend less time in hospital.

How they work:

- Blocks the stress hormones in the body that that cause blood vessels to narrow. As a result:
 - Blood vessels dilate (widens) and relax
 - Blood flows easier which reduces the work of your heart and lowers your blood pressure

How to take it:

• Take this medication at the same time(s) every day.

Most common side effects:

- Low blood pressure. This is a concern only if you feel lightheaded or dizzy often.
- Short periods of feeling dizzy or lightheaded when you change positions.

- Higher potassium levels in your blood. You will have regular blood tests to check this.
- Damage to your kidneys. You will have regular blood tests to check this.
- ACEIs can cause a dry cough that won't go away (ARBs don't). Heart failure that is getting worse can also cause a cough. Talk to your doctor or nurse to help you determine the cause of your cough. If the cough is from the ACEI, your doctor may change you over to an ARB.

Severe side effect:

 Allergic reaction: These are rare and cause swelling of the face, tongue, hands or feet. This can happen at any time during treatment. If it happens, stop this medication and go to your nearest Emergency Department.

2. Beta Blockers

Types of Beta Blockers:

- Carvedilol (Coreg[®])
- Bisoprolol (Monocor®)
- Metoprolol (Lopressor®)
- Propanolol
- Atenolol

Why it's important to take a Beta Blocker:

Beta blockers can improve heart function, help patients live longer, improve quality of life, and spend less time in hospital.

Usually, patients are started on a very small dose of beta blocker to get **used to the medication. Over the next several months your doctor will** increase the dose depending on how you are feeling.

How it works:

- Relaxes your heart and slows your heart rate
- Blocks the stress hormones that your body produces that cause your heart to change shape and become weak

How to take it:

• Take this medication at the same time(s) every day.

Most common side effects:

- Low blood pressure. This is a concern only if you feel lightheaded or dizzy often.
- A slow heart rate. This is a concern only if you feel lightheaded often.
- At first, you may feel more tired, short of breath, or dizzy. As your heart begins to adjust, you should begin to feel better. This may take several months. If your symptoms do not improve or they get worse, talk to your doctor or nurse. He/she may ask you to reduce the dosage or stop the beta blocker.
- Wheezing or more shortness of breath. This may happen if you have a history of asthma. Talk to your doctor or nurse right away if this happens.

3. Diuretics (water pills)

Types of diuretics:

- Furosemide (Lasix®)
- Metolazone (Zaroxolyn®)
- Hydrochlorothiazide (HydroDiuril®)
- Ethacrynic Acid

Why it's important to take diuretics:

Diuretics (water pills) help get rid of extra fluid in the body. With less fluid retention (extra fluid), you will find it is easier to breathe, and will have less swelling and bloating.

Furosemide is used most often for heart failure. If you have a lot of swelling or are not getting better with higher doses of furosemide, a second diuretic may be taken to help rid the body of more fluid.

How it works:

• Makes the kidneys remove more water and sodium (salt) from the body.

How to take it:

- If this medication upsets your stomach, you may take it with food.
- Take the last dose before 4:00 p.m. to avoid getting up at night to pass water.
- If you take your diuretic twice a day, take the first dose when you wake up in the morning and the second dose 5 hours later.
- You will have regular blood tests to check your potassium levels. You may need to take a potassium supplement if your blood potassium is too low.

Most common side effects:

- Thirst, dry mouth and dehydration.
- Skin rash. Contact your doctor if you get a skin rash.
- Gout
- Dizziness
- Low potassium in your blood, which may cause:
 - ✓ Irregular heart beats
 - ✓ Muscle cramps or pain
 - ✓ Unusual tiredness or weakness

4. Digitalis

Types of digitalis:

• Digoxin (Lanoxin®, Toloxin

Why it's important to take this digitalis:

Digoxin has been shown to help improve the symptoms of heart failure when used with other heart failure medications. It also slows the heart rate for those heart failure patients who also have atrial fibrillation (a type of irregular heartbeat).

How it works:

- Increases the strength of the heart's pumping action
- Slows the rate of the heart beats in atrial fibrillation

How to take digitalis:

- Wait 2 hours after taking antacids, high-fibre foods, or fibre supplements.
- If your blood level is to be checked in the morning, take your dose after your blood is taken.

Severe side effects:

Most problems with digoxin occur when there is too much in the blood. This can be caused by certain drugs or medical conditions (kidney damage), low blood potassium levels, or older age. You will have regular blood tests to check your digoxin level.

The following symptoms can happen if there is too much digoxin in your body. Call your doctor right away if you have any of these side effects:

- Loss of appetite, nausea or vomiting
- Blurred or coloured vision, or halos around bright objects
- Confusion or weakness
- Palpitations or black outs

5. Aldosterone Antagonist

Types of aldosterone antagonists:

- Spironolactone (Aldactone®)
- Eplerenone (Inspra®)

Why it's important to take aldosterone antagonists:

They are given to patients with moderate to severe heart failure. It can help them live longer and stay out of the hospital.

How it works:

• Blocks the stress hormones your body produces that cause your heart to change shape and become weak

How to take it:

• Take this medication at the same time every day.

Most common side effects:

- Higher potassium levels in your blood. You will have regular blood tests to check this.
- Breast enlargement or tenderness, especially in men.

6. Nitrates and Vasodilator

Types of Nitrates:

- Isosorbide dinitrate (Isordil®)
- Isosorbide-5-mononitrate (Imdur®)
- Nitroglycerin patch (Minitran®, Nitro-Dur®, Transderm-Nitro®, Trinipatch®)

Types of Vasodilator:

• Hydralazine (Apresoline[®])

Why it's important to take these medications:

The combination of a nitrate plus a vasodilator has been shown to improve quality of life, help patients live longer, and stay out of hospital. The combination of a nitrate plus vasodilator may be given if you cannot take ACEIs because your kidneys are not working very well.

How it works:

- Dilates (widens) blood vessel
- Reduces the work of your heart

How to take it:

- You will likely need at least 10 hours between wearing nitro patches to prevent your body from getting used to the medication. Take your last dose of Nitrate around 5:00 p.m. or take off your nitroglycerin patch at bedtime if you put it on in the morning.
- Do not take drugs used to treat erectile dysfunction when you are taking nitrates. This may cause very low blood pressure and cause you to feel dizzy, lightheaded, and faint.

Most common side effects:

- Low blood pressure. This is a concern only if you feel lightheaded or dizzy often.
- Weakness
- Headache. These may become less as you keep taking your pills. Taking acetaminophen (Tylenol®) can help with headaches.

Severe side effects:

Call your doctor right away if you have any of these side effects:

- Chest pain
- Fast or pounding heartbeat
- Numbness, tingling, or burning pain in your hands, arms, legs, or feet
- Warmth or redness in your face, neck, or chest

Tips for taking medications

- Carry an updated list of your medications with you at all times.
- Bring your current medication list or your pills in their original containers **to all** medical appointments.
- If possible, know the names of your medications, the dosage, how much to take, and when you need to take them. Ask a family member for help if needed.
- Ask your pharmacist to blister pack your medications. Or you can use a dosette (pill organizer) to help you remember to take your medication.
- Take your medication exactly as directed.
- Talk to your health care provider or pharmacist if you have any questions about your medication.
- Take your medication regularly—even if you feel well. Never take more than has been prescribed and do not stop taking them unless told to do so by your doctor.
- If you miss a dose of your medication, take the missed dose as soon as you remember. Take the next dose at the regular times. However, if it is almost time for your next dose, skip the missed dose and go back to your regular dosing schedule. **Do not take a double dose.** If you miss a dose of medication and are unsure of what to do, talk to your doctor or pharmacist.
- Use caution when using medications you can buy over-the-counter at the drug store, such as pain medication, antacids, laxatives, cough medications. Non-steroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen (Advil® and Motrin®) or naproxen may worsen your symptoms and/or make your prescription medication less effective.

ALWAYS ask your doctor or pharmacist before taking any medications or herbal products you can buy without a prescription.

• Some medications can be expensive. Less expensive medicines may be an option for you. If you are concerned about the cost of your medication, talk to your health care provider.

What I need to know about my medications before I leave the hospital

- The names of the medications you should no longer take
- The correct names and doses of any new medications
- Why you need to take these medications
- How long you need to take these medications
- When and how to refill your prescription
- How to take your medications correctly
- Where to keep your medications
- The possible side effects of your medications
- If and when I need to have any blood tests

Your health care provider and pharmacist will help you learn this information about your new medications while you are in the hospital. Your community pharmacist will also review this information with you each time you refill your prescription.

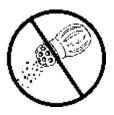
Get rid of any medications you no longer use. Take your unused medications to your pharmacy for environmentally safe disposal. Do not throw medication in the garbage, down the sink or toilet.



Eating Well with Heart Failure

Reduce salt and fluid intake

Salt is made from sodium (Na) and chloride (Cl). When you eat salt, your body needs to balance it with the water in your body. If you eat a lot of salt or salty foods, your body holds more water to dilute the salt.



When your heart is weak, it cannot cope with this extra water. It is forced to work harder and fluid can build up in your tissues. Your hands, feet, legs or belly may swell or you may have trouble breathing.

Eating a low sodium (salt) diet and drinking less fluid can help you feel better and allow your heart failure medicines to work better. It may even keep you out of the hospital.

Try to limit fluid to 6-8 eight ounce cups (1 ¹/₂ -2 litres) per day.

Find the fluid

All substances that are liquid at room temperature are considered fluid. Examples of things that should be counted as fluid intake are:

Water	Coffee	JELL-O TM
Milk	Alcohol	Ice Cream
Juices	Soup	Sherbet
Soft Drinks	Ice cubes	Popsicles
Теа		_

Reduce the fluid

- Drain excess fluid from canned fruit
- Use smaller cups
- Drink to thirst only
- Take your medications with meals when possible

Track the fluid

Measure your fluid intake over 24 hours until your fluid limitation becomes routine.

- Place your total daily fluid allowance in a pitcher.
- Every time you consume fluid, pour out an equal amount of water.

The amount of fluid remaining is your fluid allowance for the rest of the day.

Thirsty?

- Suck on frozen lemon wedges or frozen grapes
- Brush teeth often
- Rinse mouth with chilled mouth-wash
- Suck on hard candies or chew gum try sugar free varieties

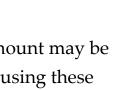
Daily weight

A sudden weight gain when you have been eating a normal amount may be an early sign of fluid retention. Weigh yourself every morning using these tips:

- Empty your bladder before weighing
- Weigh yourself in the same amount of clothing
- Weigh yourself before breakfast
- Use the same scale
- Record your weight daily (see page 50 for **Daily Weight Record**)

If you find your weight has increased, ask yourself:

- 1. Is your intake of sodium above the recommended level? Too much sodium in your diet will cause fluid build-up. Sodium acts like a sponge in the body, drawing fluid towards it.
- 2. Is your intake of fluids above the level recommended for you?





If fluid retention becomes a problem, you may need to take a closer look at your fluid intake. Your dietitian, Heart Failure Clinic nurse, or family doctor can help you.

 Has your urine output decreased?
 If it has, call your doctor. Your recommended fluid intake may need to be adjusted or you may need to have some blood tests.

Important!

If your **weight increases OR decreases** more than 4 lbs (1.8 kg) in 2 days or 5 lbs (2.2 kg) in a single week, call your nurse or doctor right away.

It's more than not using the salt shaker: Tips for eating less salt

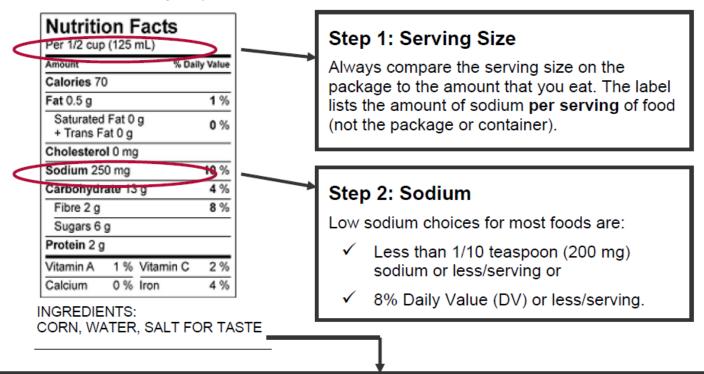
Try to limit sodium to less than 2000 mg per day.

Reading food labels is the only way to be sure of the sodium content of foods. The sodium content must be listed on the package – check the **Nutrition Facts** panel. Food manufacturers change ingredients all the time; make it a habit to read the label.

Did you know?

- One teaspoon salt = 2300 mg of sodium, more than your daily limit of sodium! 2/3 of the salt in the Canadian diet is hidden in food.
- Most fresh or frozen fruits, vegetables, meats, poultry, fish, eggs, fluid milk, yogurt, whole grains, pasta, rice, and plain breads are naturally low in sodium.

Follow these easy steps to read the label.



Step 3: Ingredients

Ingredients are listed in decreasing order by weight – if salt or sodium appears on the ingredient list at all, make sure it is near the end.

Ingredients that shout HIGH IN SODIUM:

- Baking soda
- Brine
- Garlic, onion or celery salt
- Kosher salt
- Monosodium glutamate (MSG)
- Salt, sea salt
- Any other ingredient with word "sodium", such as sodium citrate, sodium nitrate, or disodium phosphate.



Food	Say Yes	Say No
Grains, Breads and Cereals	 whole grain breads and rolls muffins, homemade cornbread, homemade most dry cereals such as Shredded Wheat[™], Shreddies[™], Weetabix[™], Life[™], Fibre 1[™] cooked cereals without added salt unsalted crackers, breadsticks and rice cakes low-sodium or homemade bread crumbs rice, barley, quinoa, couscous, bulgur, kasha, millet spaghetti, macaroni and other pasta bread stuffing, homemade 	 breads, rolls and crackers with salted tops muffin and bread mixes, packaged instant hot cereals pancakes (mixes and frozen) waffles (mixes and frozen) bread stuffing, packaged self-rising flour and biscuit mixes bread crumbs or cracker crumbs, packaged rice and pasta mixes, packaged dry cereals with more than 200 mg sodium per serving such as Special KTM, Rice KrispiesTM, Corn BranTM, Bran SquaresTM, VectorTM
Vegetables	 all fresh and frozen vegetables rinsed canned vegetables low sodium canned vegetables low sodium or salt free vegetable juice mashed potatoes, homemade pasta sauce, homemade 	 regular, undrained canned vegetables sauerkraut, pickles, pickled vegetables and others prepared in brine vegetables seasoned with ham, bacon or salt pork regular vegetable or tomato juice pasta sauce, canned or in a jar instant mashed potatoes

Low sodium food choices

Food	Say Yes	Say No
Fruit	most fresh, frozen and cannedall fruit juices	 fruits processed with salt or sodium-containing ingredients (for example, some dried fruits)
Milk and Alternatives	 milk milk and eggnog soy milk light or partly skimmed hard cheese low fat yogurt ricotta cheese cottage cheese – dry curd, or sodium free 	 buttermilk, malted milk, milk shake regular hard, processed cheese, cheese spreads and sauces regular cottage cheese
Meat and Alternatives	 fresh or frozen beef, lamb, pork, poultry, fish and most shellfish canned tuna or salmon, low sodium canned tuna, rinsed eggs and unflavoured egg substitutes peanut butter, unsalted peanut butter, regular nuts and seeds, unsalted peas, beans and lentils, dried canned beans, rinsed 	 Smoked, salted, cured and pickled meats such as sausages, hot dogs, bacon, ham, pickled herring, luncheon meats, canned meats frozen breaded meats pickled eggs salted nuts canned baked beans commercial or store bought pot pies
Soups	 homemade broths and soups without added salt and made with allowed vegetables commercially canned and dehydrated soups, broths and bouillons with less than 500 mg sodium per serving 	 regular canned soups, broths or bouillon regular dry soup mixes, bouillon cubes, powder or concentrated liquid

Food	Say Yes	Say No
Fats	 non-hydrogenated margarine vegetable oils (unsaturated) salad dressings, low-sodium salad dressing, regular sour cream, light cream, light cream cheese, light 	 regular salad dressings with bacon fat, bacon bits and salt pork snack dips made with instant soup mixes or processed cheese commercially prepared sauces, gravies
Other	 use a salt substitute such as "No Salt"™ or Mrs. Dash™ with doctor's approval pepper herbs, spices vinegar lemon or lime juice fresh ground horseradish unsalted pretzels, popcorn tortilla chips, low sodium carbonated beverages 	 any seasoning made with salt including garlic salt, celery salt, onion salt and seasoned salt and lemon pepper sea salt rock salt kosher salt meat tenderizers meat coating mixes e.g. Shake n Bake monosodium glutamate (MSG) regular soy sauce
	Limit to 1 serving a day:	• teriyaki sauce
 hot pepper sauce (1 tsp) salsa (2 tbsp) soy sauce, reduced-sodium (1/2 tsp) soy sauce, low sodium (1 serving as labeled) barbecue sauce (1 tbsp) relish (1 tbsp) ketchup (1 tbsp) mustard (1 tbsp) 	 steak and BBQ sauce Worcestershire sauce black bean sauce hoisin sauce canned gravy and mixes salted snack foods, chips microwave popcorn olives softened water used for drinking and cooking artificial fruit flavoured crystals with salt or sodium containing ingredients instant pudding and cake mixes 	

Meal planning and cooking tips

- Reduce your salt slowly to give your taste buds time to adjust.
- Try to keep the sodium content of each meal below 650 mg. It is important to spread out your sodium intake in order to prevent excessive thirst and/or retention.
- When grocery shopping, choose items from the outer aisles where most of the fresh foods are found.
- Plan your meals ahead of time.
- Try low sodium microwave or frozen meals or buy prepared low sodium meals from companies such as "Chef on the Run" or "Better Meals".
- Grill an extra chicken breast to use in sandwiches the next day.
- Make salad dressing with fresh garlic, olive oil, and flavoured vinegar.
- Add seasonings to soups during the last hour of cooking for more flavour.
- Try balsamic vinegar, wine or flavor extracts to give an added touch to certain recipes.



- Never add salt at the table!
- Use low sodium seasoning mixes. Brand names such as Mrs. Dash[™], The McCormick Company[™], President's Choice[™] and offer low sodium options.

Did you know?

- 12% of salt on our diets comes from sodium naturally found in food,
- 11% comes from adding salt at the table or in cooking, and
- 77% comes from processed foods.

Finding low sodium recipes

- 1. Try a new cookbook such as the American Heart Association Low-Salt Cookbook, 3rd Edition: A complete guide to reducing sodium and fat in your diet. 2006.
- 2. Find recipes on www.chfpatients.com
- 3. The internet is an endless source of low sodium recipes. Visit <u>www.google.ca</u> and search low sodium recipes.

How can I improve the flavour of food without adding salt?

Homemade Herb and Spice Blends		
Keep these handy in an airtight container for everyday use.		
Italian Blend	2 Tbsp each of dried basil and dried marjoram	
For tomato-based soups	1 Tbsp each of garlic powder and dried oregano	
and pasta dishes, chicken,	2 tsp each of dried thyme, crushed dried	
pizza, and focaccia	rosemary, and crushed red pepper	
Curry Blend	2 Tbsp each of turmeric and ground coriander	
For rice, lentils, vegetable	1Tbsp of ground cumin	
dishes, and chicken	2 tsp each of ground cardamom, ground ginger,	
	and black pepper	
	1 tsp each of powdered cloves, cinnamon and	
	ground nutmeg	
Mexican Chile Blend	¼ cup chili powder	
For chili with beans,	1 Tbsp each of ground cumin and onion powder	
enchiladas, tacos, fajitas,	1 tsp each of dried oregano, garlic powder and	
chicken, pork and beef	cayenne pepper	
	½ tsp cinnamon	
Greek Blend	3 Tbsp each of garlic powder and dried lemon	
For seafood, poultry, and	peel	
herbed bread	2 Tbsp dried oregano	
	1 tsp black pepper	

1. Conversions: $\frac{1}{4}$ tsp = 1 ml, $\frac{1}{2}$ tsp = 2 ml, 1 tsp = 5 ml, 1 tbsp = 15 ml

2. tsp = teaspoon, tbsp = tablespoon, ml = millilitre

Meat	Flavouring/Spice	
Beef	bay leaf, chives, parsley, dry mustard powder, marjoram, thyme, oregano, pepper, garlic, onion, fresh mushrooms,	
	sage, nutmeg	
Chicken	green pepper, fresh mushrooms, parsley, chives, poultry seasoning, lemon juice, paprika, sage, thyme, pepper	
Pork	applesauce, garlic, onion, pepper, cloves, dill, parsley, sage	
Veal	apricot, bay leaf, curry powder, ginger, marjoram, oregano	
Lamb	applesauce, garlic, onion, pepper, cloves, dill, parsley, sage	
Fish	lemon juice, bay leaf, garlic, dill, parsley, pepper, fresh mushrooms, paprika, curry powder, marjoram	
Vegetables	Flavouring/Spice	
Corn	green pepper, fresh tomato	
Cucumber	chives, dill, garlic, vinegar	
Green Beans	dill, lemon juice, marjoram, nutmeg	
Tomatoes	basil, marjoram, onion, oregano, onion, parsley	
Peas	green pepper, mint, fresh mushrooms	
Salads	dry mustard mixed with vinegar and sugar, lemon juice, chives, parsley, garlic, onion, pepper, oregano	
Potatoes	green pepper, onion, pepper, chives, parsley, paprika, dill	
Rice	chives, green pepper, onion, paprika, parsley	
Soups	Flavouring/Spice	
	chives, onion, garlic, chili powder, oregano, thyme, bay leaf, parsley, pepper	

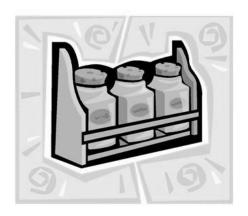
Using herbs, spices and other products in your cooking is the answer to improving the natural flavours in food without adding salt.

Here is a recipe to use in place of salt:

Herb Shaker Recipe		
¹ / ₂ tsp basil 1 tbsp dry mustard		
¹ ⁄ ₂ tsp white pepper	1 tsp thyme	
1 tbsp onion powder	¹ / ₄ tsp celery seed	
1 tbsp garlic powder	¹ / ₄ tsp rosemary	
	½ tsp paprika	
Directions		

Directions:

Mix the above into an empty shaker with a few grains of raw rice to allow for easy flow.



Eating out

By choosing carefully, it is possible to eat out and enjoy a healthy meal that is true to your meal plan. In general, the more simply a dish is prepared, the less sodium it contains.



10 tips for eating a low sodium diet when dining out:

- 1. Choose restaurants that offer a large variety in their menu.
- 2. Choose restaurants that are willing to prepare foods on special request.
- 3. Request that foods be prepared without added salt.
- 4. If you are unsure of the ingredients, ask how the foods are prepared.
- 5. Request that foods be served without high salt condiments (relish, mustard, ketchup, pickles, potato chips, sauces, dressings, etc.). Ask for lower salt substitutions such as sliced tomatoes/cucumbers/lettuce, horseradish, oil and vinegar, and lemon.
- 6. Eat fresh foods. Sodium is added when foods are processed. Try grilled vegetables or baked fish rather than battered and deep fried.
- 7. A quick rule of thumb for fast food dining is to limit your sodium intake at one meal to one quarter of your total sodium for the day or 500 mg of sodium per meal). Most restaurants have a guide listing the sodium content of their food items.
- 8. Remember that soups, JELL-O[™], sherbets or ice cream as well as beverages must be included as part of your daily fluid allowance.
- 9. Traveling? Plan stops where you can get lower sodium foods or plan a picnic including delicious fruits, vegetables and sandwiches with low sodium fillings.
- 10.If you can't avoid eating a high-salt meal once in awhile, simply cut down on the portion size and make lower salt choices for the other meals of the day.

Save Your Energy

The activities you do every day use energy. There are many things you can do to save energy so you are not so tired. It's all about finding a good balance between rest and activity. Here are a few tips:

- **Prioritize** the things that need to get done today and the ones that can wait until tomorrow. Ask questions such as, "Does this task really need to be done?" and "Does it need to be done by me?" Know your personal limits and learn how to say no so that you can do more of what you enjoy.
- **Plan** your time. Space out your activities. Alternate easy activities with harder ones. Do things that need the most energy at the time of day when you are at your best. A weekly schedule is a good way to plan and organize.
- Pace yourself while doing your activities. Break down the hard jobs into smaller tasks and take regular rest breaks. Stop and rest before you are too tired!
- Become **efficient**. Use long-handled tools to make reaching easier. Keep things you use the most often within easy reach. Combine 2 tasks into one when you can. For example:
 - ✓ prepare a bigger meal and freeze some for later
 - ✓ use aluminum pots and pans (they are lighter)
 - ✓ use a long-handled shoe horn when putting on your shoes
 - ✓ take fewer trips up and down the stairs
- Sit down when you can. Sitting requires 25% less energy than doing the same activity standing. Sit down when dressing, sorting laundry and preparing meals. You can use a tub chair in the shower.

Rest

- Some people find that they can do more if they rest for about one hour each day. This can be napping or simply quiet time. Think of it as catch-up time for your heart.
- Increase rest periods during times of emotional stress and illness.



- To help get a good night's sleep:
 - Avoid eating just before bed
 - Take diuretics (water pills) before 4:00 p.m., if possible, so you won't need to go to the bathroom in the middle of the night.

Exercise



Exercise is an excellent way to help manage your heart failure. However, when you have heart failure, exercise can sometimes be difficult. Exercise does not have to be strenuous to be valuable. Just do as much as you feel you can. It is important to exercise regularly at a pace that is right for you.

Benefits of exercise

The benefits of exercise for people with heart failure include:

- Helps strengthen your heart so it works more efficiently, and helps blood flow to all parts of your body.
- Gives you a feeling of wellbeing and helps with feelings of depression.
- Improves your strength, endurance and posture.
- Helps you do day-to-day activities.
- Improves your quality of life.
- Lowers your risk of other heart diseases.
- Manages and prevents high blood pressure and diabetes.

- Helps prevent high levels of unhealthy blood cholesterol (also known as LDL cholesterol).
- Helps you lose weight or maintain your weight.

What happens if I do not exercise?

• If you do not exercise regularly, the muscles in your body will get weaker over time. This will make you feel even more tired, short of breath or both. It will also put more stress on your heart.

Are there any activities I should not do?

Do not do these activities until you have cleared them with your doctor:

- Do not lift, carry, push or pull anything over 4.5 kilograms or 10 pounds. This includes children, pets, groceries, laundry and weights.
- If you have to hold your breath to lift something it is too heavy for you.
- Do not shovel.
- Avoid activities where your arms are kept over your head such as washing windows, painting and hanging decorations. Use long handed tools to make reaching easier.
- Do not go into a sauna or hot tub. These activities are not recommended for people with heart problems due to extreme heat.
- Avoid straining or holding your breath such as when straining on the toilet or trying to open a window that is stuck.



Exercise tips

- Plan to exercise at a time when you feel rested.
- Schedule exercise time into your daily routine. Exercising at the same time every day will help.
- Stick with it. If you exercise daily, it will soon become a healthy habit.
- It often takes only 21 days to start a habit.
- Even starting off with a very small amount of exercise is good.
- Wear loose, comfortable clothing and supportive shoes.
- Always start with a 10-minute warm up to slowly increase your heart rate and warm your muscles before exercise.
- Walk on a flat surface. Avoid steep hills.
- When drinking liquids during exercise, remember to keep within your fluid restriction.
- Try different exercises so that you do not get bored.
- Pace yourself and balance your activities with rest.
- Never exercise on a full stomach. Wait at least 1½ hours after a large meal.
- Avoid exercising outside in very hot, very cold or very windy weather.
- If you become too tired or very short of breath with exercise, do not go to bed for a nap. It is much better for you to rest sitting in a comfortable chair.
- Include a 5 to 10 minute cool down period at the end of your exercise session. This will help the blood to return back to your heart from your muscles.



Walking Program

Walking is one of the best exercises for improving your health. The walking program described below is good for someone who has not been exercising regularly. It is very gradual, increasing by 1 minute every 2 days or so.

	Duration of walk
Week 1–2	5–10 minutes
Week 3–4	10–15 minutes
Week 5–6	15–20 minutes
Week 7–8	20–30 minutes



Set a goal that you can do 5 to 7 times a week, if you can. Your health care provider can help you set a reasonable goal. If you are unable to do the longer walks, you can do shorter walks more often to achieve your walking time. Make sure you always start and finish your walks with your warm up and cool down.

If you are unable to walk for 5 minutes without stopping, you may need to use interval training. For example:

- Walking 2–5 minutes
- Resting 2–5 minutes } Interval

Repeat until you have reached your walking time goal. For example, if your goal is to walk for 15 minutes, you may walk for 3 minutes, rest for 3 minutes and do this a total of 5 times. You can break up these "intervals" throughout the day.

How much exercise is too much?

You can use the **Walk and Talk Test** or **Rate of Perceived Exertion (RPE) Scale** to help guide your progression with your exercise program.

1. Walk and Talk Test

This is the simplest test. At all times, you should be able to carry on a light conversation while exercising e.g. say your phone number out loud.

2. Rate of Perceived Exertion (RPE) Scale

This number-based scale helps you describe how you feel during your exercise session. The number you choose should reflect your overall level of effort, including your breathing. There is no right or wrong answer. For exercise, you should be between 3 and 5 on the scale. As your fitness improves, so will your breathing with exertion and your perceived level of effort.

RPE Scale 0 = Nothing at all 1 = Very easy 2 = Easy **3 = Moderate 4 = Some what difficult 5 = Difficult** 6 = More difficult 7 = Very difficult 8 = + 9 = ++ 10 = Very, very difficult (almost maximal)

STOP if you...

- Become very short of breath
- Feel weak, tired, lightheaded or dizzy
- Have any discomfort, especially chest discomfort
- Have a fast heart rate, palpitations or unusual heart beats
- Have nausea or are very sweaty
- Have any symptoms that make you feel worried.

If these symptoms last longer than 15 minutes of rest, call 911!

Exercise support in your community

• Take Heart Program

Take Heart is a supervised exercise program for people with heart or chronic conditions. It is offered at several locations on Vancouver Island. Ask your doctor to refer you. You can learn more on the VIHA Heart Health website:

http://www.viha.ca/heart_health/for_patients/recovery/

• Physical Activity Line (PAL)

The Physical Activity Line is a free resource for practical and trusted physical activity and healthy living information. **Web**: <u>www.physicalactivityline.com</u> **Tel:** 1.877.725.1149 **Email:** <u>info@physicalactivityline.com</u>

Travel

If you are planning to travel, talk to you doctor first! Having good travel insurance is essential. Most travel insurance companies require that you have not changed your medications in the last 90 days. Shop around for travel insurance that is right for you.

Sexual Activity

Many patients with heart failure (and their partners) are concerned about the effect of sexual activity on the heart. Sexual activity is not dangerous to your heart. There is usually no reason why you cannot continue sexual activity. Some common concerns are:

• Feeling less interested because you feel depressed

- Feeling less interested because of the effects of the medications
- Feeling anxious

Remember that:

- You use about the same amount of energy for sex as you use to climb 20 steps in 10 seconds (a brisk walk)
- Talking with your partner about your concerns helps you become closer
- There are other ways to be intimate besides having sex
- Like exercise, sexual activity should be fun and feel good. Use the same guidelines as you do for any activity.

The following tips may be helpful:

- Pick a time for sex when you feel rested and comfortable, and are not pressured.
- Avoid sex after eating a big meal or drinking alcohol.
- Have sex in a comfortable room that is not too hot or too cold.
- Avoid strenuous positions.

If you are having sexual difficulties, do not hesitate to talk with you doctor or nurse.

Return to Work

Not everyone who is diagnosed with heart failure needs to stop working. In fact, continuing to work may help you feel better by offering a challenge, time with other people, income, improved health and mood. However, it is usually best to wait until your symptoms are stable and your medications have been optimized before considering a return to work.

The decision will also be affected by the type of work you do. You are more likely to be able to return to work, and do so sooner, if you work at a desk than if you have a physically demanding job. It may also be more difficult to return to a position that is mentally demanding and stressful. It is always a good idea to return gradually to your job. It will be less tiring if you can start with light duties or work part time, at least at the beginning.



Your doctor can help you determine if and when you are ready to go back to work and if you are able to return to your regular job. Your doctor or social worker can help you with questions regarding disability income and benefits from your employer or social assistance if it is deemed that you are unable to return to work.

Your Wishes for Future Health Care

People with chronic health problems often worry about what might happen if they are no longer able to make health care decisions themselves. It is important to talk with your family, friends and medical team about your wishes. You can record your wishes in the form of a **Personal Advance Health Care Directive**.

A **Personal Advance Health Care Directive** is a set of instructions completed by you, ahead of time, for your family and care providers to use if you are ever unable to make decisions about the medical care you want. It is sometimes called a living will. A **Personal Advance Health Care Directive** can provide great comfort to you and strength to those who may have to make important medical and end-of-life decisions for you. Learn more at Advance Directives at <u>www.viha.ca/advance_directives</u>

What Are Some Emotions I May Feel?

It is normal for you to have changes in your feelings and moods after learning that you have heart failure. Some common feelings include:

Anger

You may feel angry and wonder why this happened to you. You may try to hide your anger and become short tempered or quiet.

Denial

Some people cannot believe they have heart failure or that their injured heart will slow them down. It is very important to follow the advice you have been given to avoid more health problems. You may try to test yourself by:

- Doing more exercise than you have been advised;
- Doing office work at home;
- Doing heavy work around the house; or
- Not taking your medications.

Anxiety

You may feel anxious about being in the hospital and about your tests and treatments. You may also feel anxious wondering whether you will get better. You may be worried about dying. You may be anxious about how you will manage at home before you leave the hospital.

Depression

Many people with heart failure and their family members feel depressed at some point. Depression is often not recognized or discussed with anyone. Symptoms of depression may include:

- always worrying about the future
- feeling hopeless, guilty or worthless
- worrying about taking care of your family
- being concerned about changes in your activities or lifestyle
- having very little interest in other people and what is happening around you
- having very little interest in food
- feeling tired
- having trouble sleeping or sleeping too much
- crying easily
- feeling blue or down
- irritability

All of these feelings are normal. You may have one or more of these feelings at one time. These feelings should improve over time as you learn more about heart failure. You will see that it is possible to cope with heart failure and still have a good quality of life.

If any of these feelings last longer than 4 weeks and interfere with your daily activities or relationships, seek help and support!

What can I do if I am feeling depressed or anxious?

Having emotional problems is nothing to be ashamed about. You can help yourself by:

- Asking for support from you family and friends or from support groups
- Sharing your fears and worries with someone you trust

- Determining how much control you have in a given situation and let go of things that are beyond your control
- Planning to do things that you enjoy and then do them
- Taking time for yourself
- Participating in a exercise (page 32) or education program (page 49) for heart patients
- Setting goals to become physically active, then take action. Physical activity promotes relaxation and the release of endorphins (anti-stress hormones)
- Celebrating your achievements
- Recognizing when you need extra help and talk to your doctor, nurse, social worker, psychologist or psychiatrist

If you have persistent thought of harming yourself:

- ✓ Call the Vancouver Island Crisis Line at 1.888.494.3888
- ✓ Call the BC Provincial Distress Line at 1.800.SUICIDE (784-2433)
- ✓ Talk to your family doctor, partner or close friend
- ✓ Go to your closest Emergency Department

Support groups

Vancouver Island ICD Patient Support Group
 Tel: 250.752.6922

 Email: icdsupport@shaw.ca

 Support group for people who have a
 Implantable Cardiac Debrillator (ICD) and live on
 Vancouver Island:



First Open Heart Society
 Tel: 250. 595.2123
 Email: <u>fohs@fohs.bc.ca</u>
 Support for people who have had Open Heart Surgery.

What can I do as a family member, partner or friend?

As a family member, partner or friend, you will have many feelings as well. You may wonder what you can do or say.

Here are some helpful ideas:

- Let the person rest. Rest is needed for recovery. Long and frequent visits will not help the person recover.
- Offer to make a low sodium casserole, do laundry or look after the children or pets so there are fewer worries around home.
- Pass on any news or messages to other family and friends to limit the number of phone calls to the hospital or the patient's home.



- Look after yourself. This is also a stressful time for you. You are part of the person's recovery so you need to eat well, get enough rest and look after yourself.
- As a family member, partner or friend, you may need to talk to someone about your feelings. You may have a close friend, chaplain or group with whom you can share your feelings.

What is Stress?

Stress is caused by a demand on your physical or mental energy. Becoming aware of how you respond to the events in your life is one of the first steps to handling stress better. Learning to deal with stress helps reduce the harmful effects it can have on your body.

Many events in your life can be a source of stress such as changing jobs, moving and going through a loss. Every day issues such as driving in rush hour, conflicts with family members or dealing with long line-ups can also cause stress.

Your thoughts about these events determine how you react and create the level of stress you feel. If you usually respond to life's events and challenges in a negative way, your health and happiness may suffer.

Stress is not so much what happens to you, but how you respond to a situation or event.

Since everyone has stress, it is important to learn how to recognize and manage it. Although some medications may help control your response to stress, there are many skills you can learn as well.

How do I know when I am stressed?

Each person has his or her own ways of responding to stress.

Some physical signs of stress are:

- muscle tension in the jaw, neck, shoulders or lower back
- headache
- 'jumping' muscles
- trouble sleeping

- changes in appetite
- feeling tired all of the time

Some emotional signs of stress are feeling:

- helpless and frustrated
- a loss of control over your life
- anxious or sad
- irritable, touchy, hostile
- worried

Some changes in behaviour as a result of stress are:

- eating too much or not enough
- drinking alcohol
- smoking
- outburst of crying or anger
- less interest in sex

Some changes in thoughts as a result of stress are:

- decreased memory
- racing thoughts
- poor concentration
- always looking at the negative
- always expecting the worst

Ways to help change your response to stress

Take time to relax

There are many ways to relax. Find a quiet place. Read a book, listen to music, meditate or take a long bath. Try to do something to relax at least once a day. You need to take time for yourself.



Deep breathing or belly breathing

During your day, take some time to clear your mind and think about your breathing. Deep breathing or belly breathing helps your lungs bring in as much oxygen as they can.

Put your hands on your stomach or belly. Take a deep breath in through your nose slowly. Push your stomach or belly out. Blow the breath out slowly through your mouth.

Do this 2 to 3 times to relax. Repeat this throughout the day. You can do deep breathing or belly breathing anytime and anywhere.

Clear your mind

Find a quiet place to sit or lie down. Focus your mind on a single, peaceful thought or image. Spend a few minutes taking this time for you.

Think relaxation

- Sit quietly.
- Focus your mind on this sentence "My right arm feels heavy and warm".
- Repeat this sentence while focusing in turn on your left arm, right leg, left leg, and so on.

• Focus on slowly relaxing your body in warm water from your toes to your head.

Progressive muscle exercise

- Tense your lower leg muscle and see how it feels.
- Release the tension and see how it feels.
- Think about the difference between the two feelings.
- Repeat this exercise with all the major muscles in your body.

Heart Health Education Classes

These classes offered are:

- Open to people with heart disease, their families and people at risk for heart disease
- Free of charge or have a minimal cost
- Taught in small groups
- 6-10 weeks in length. Each class is 1 hour long.
- Facilitated by health care professionals



To register for a class in your area, please contact:

In Victoria: Island Heart to Heart	
Tel: 778.678.8423	
Email: <u>islandheart2heart@shaw.ca</u>	
Nanaimo Heart Matters	Port Alberni Heart Matters
Tel: 250.740.6926	Tel: 250. 724.8824
Campbell River Heart Matters	Parksville Heart Matters
Tel: 250.850.2195	Tel: 250.947.8202

Chronic Disease Self-Management Education Program

These programs are led by trained lay people. They meet with groups of 10-12 persons for 2 1/2 hours once each week for six consecutive weeks. Programs are delivered in community settings (E.g. senior centres, libraries, and recreation centres).

To register for a class in your area, please contact:

Toll free: 1.866.902.3767 Email: <u>selfmanagement@eastlink.ca</u> Web: <u>www.coag.uvic.ca/cdsmp/information_cdsmp_program.htm</u>

Daily Weight Record

Month:						
SUN	MON	TUES	WED	THUR	FRID	SAT
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Personal Medication Information

How does using this form help you?

- ✓ Reduces confusion and saves time
- ✓ Improves communication
- ✓ Improves medical safety
- Keep this form (or an updated version) in your wallet.
- Take it with you to all doctor visits and medical tests/ procedures.
- Update your list as changes are made to your medications.

Pharmacy Name and Phone Number: _____

Your Name:	Address:
Birth Date:	
Phone #:	
Allergic To:	Describe Reaction:
Immunization Record	
Please tick (\checkmark) if you have had the follow	ving vaccines and write the date, if
possible.	
• Vaccine:	Date:
🗅 Flu	
Pneumonia	
🗅 Tetanus	
 Hepatitis 	

List all prescription and over-the-counter medications **that you are currently taking.** Include vitamins, aspirin, Tylenol® & herbals (such as ginseng, gingko biloba, and St. John 's wort). Include prescription medications taken as needed (such as nitroglycerin, Viagra®).

Dose	When Taken	Reason for Taking
	Dose	DoseWhen Taken<

Tell us what you think!

After reading **Living Well with Heart Failure** please respond to the following statements. Your answers and comments will help us improve the information.

	stro	ongly		5	strongly
Circle one number for each statement:	dis	agree		agree	
I read all of the information provided. Comments	1	2	3	4	5
The information is easy to read. Comments	1	2	3	4	5
The information is easy to understand. Comments	1	2	3	4	5
Reading this information will help me manage heart failure better. Comments	1	2	3	4	5
The information answered my questions. Comments	1	2	3	4	5
I would recommend this information to other patients. Comments	1	2	3	4	5
I prefer to have this information in: A book just like this one Separate handouts on each topic that Comments	t I nee	ed			

I would have liked MORE information about:

I would have liked LESS information about:

What changes would you make in this book to make it better or please add other comments:

I am:

____a patient _____a family member

Thank you!

Please mail this evaluation form to:

Professional Practice 2nd Floor, Peninsula Health Unit #206- 2170 Mt. Newton X Rd. Victoria, BC, V8M 2B2

Important Contacts:

My cardiologist/internist	Tel:
My family doctor	Tel:
Other	Tel:
Other	Tel:

Heart Function Clinics

Victoria Heart Function Clinic	Tel: 250.519.1601
Nanaimo Heart Function Clinic	Tel: 250.740.6926
Campbell River Heart Function Clinic	Tel: 250.850.2608

Web Links

VIHA Heart Health website
Www.viha.ca/heart_health
Heart and Stroke Foundation
Www.heartandstroke.ca Tel: 1.888.473.4636
HealthLinkBC
Www.HealthLinkBC.ca Tel: 811 or 711 (TTYL)
Canadian Heart Failure Network
Www.chfn.ca
Physical Activity Line
Www.physicalactivityline.com/

Tel: 1.877.725.1149