

CARING FOR A LOVED ONE WITH A HEART CONDITION OR AFTER HEART SURGERY

How to Live with and Care for a Loved one
after a Heart Procedure/Intervention

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ZOOM SEMINAR OBJECTIVES

- What has happened to the person you are caring for-
Eg:(Heart attack, Heart Failure, AF, Valve Disease) with Risk factors contributing to CVD
- How to help them develop healthy life-style, to reduce risk of further heart problems
- How to help them get back to normal and encourage them to be independent
- Emotional aspects of caring for a loved one and how to cope if things are difficult
- Who to contact if you need support

Are you a carer?

- You may have just taken on the role of carer, or you may have already been caring for someone with a heart condition for a while
- The person you look after may get his or her independence back soon and your role as a carer may be temporary
- Other people may need longer-term care

What has happened to the person you are looking after?

- The person you look after may have had a **Heart Attack**, or may have been diagnosed with **Angina**. These are both forms of 'Coronary Heart Disease'-CHD
- They may have **Heart Failure**, another type of heart condition
- Or can have **Atrial Fibrillation** affecting the heart Rhythm
- Or had **Valve disease** where one of the 4 valves might not be opening or closing properly

Heart, Stroke & Vascular Diseases Overview

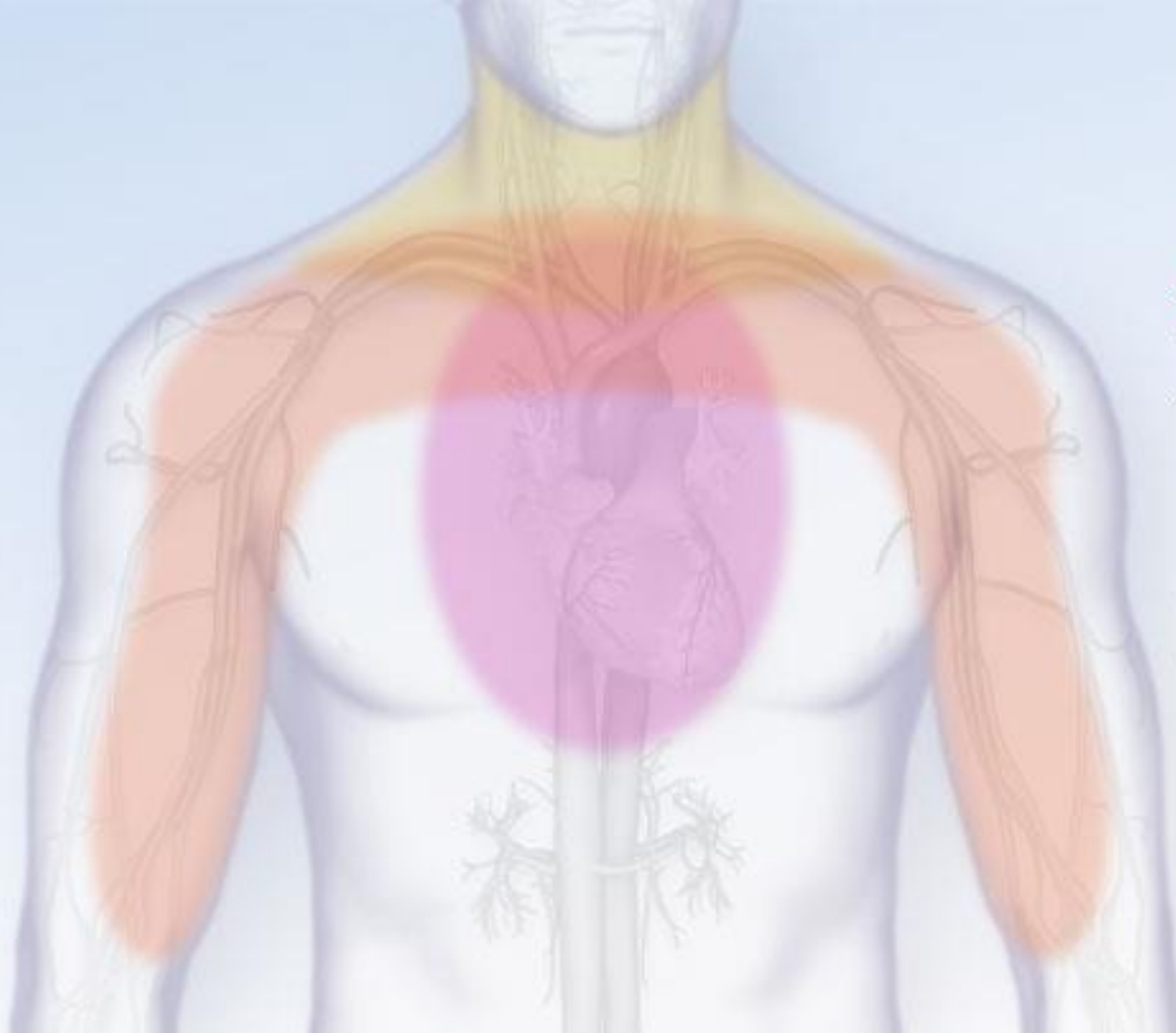
- Heart, Stroke and Vascular diseases include a range of conditions that affect the heart or blood vessels
- These conditions are commonly grouped under the broader term of **Cardiovascular disease, or CVD**. The most common and serious types of CVD include **Coronary Heart Disease, Stroke and Heart Failure**.

Coronary Heart Disease is the most common form of CVD

There are 2 major clinical forms

Heart attack and Angina

- **Heart attack** is a life-threatening event that occurs when a blood vessel supplying the heart itself is suddenly blocked, causing damage to the heart muscle and its functions
- **Angina** is a chronic condition in which short episodes of chest pain can occur periodically when the heart has a temporary deficiency in its blood supply



Angina is pain which occurs in these areas of the body when your heart muscle doesn't get enough oxygen-rich blood.

Reversible

Stable angina occurs with increased demand on the heart.



Coronary artery with stable plaque

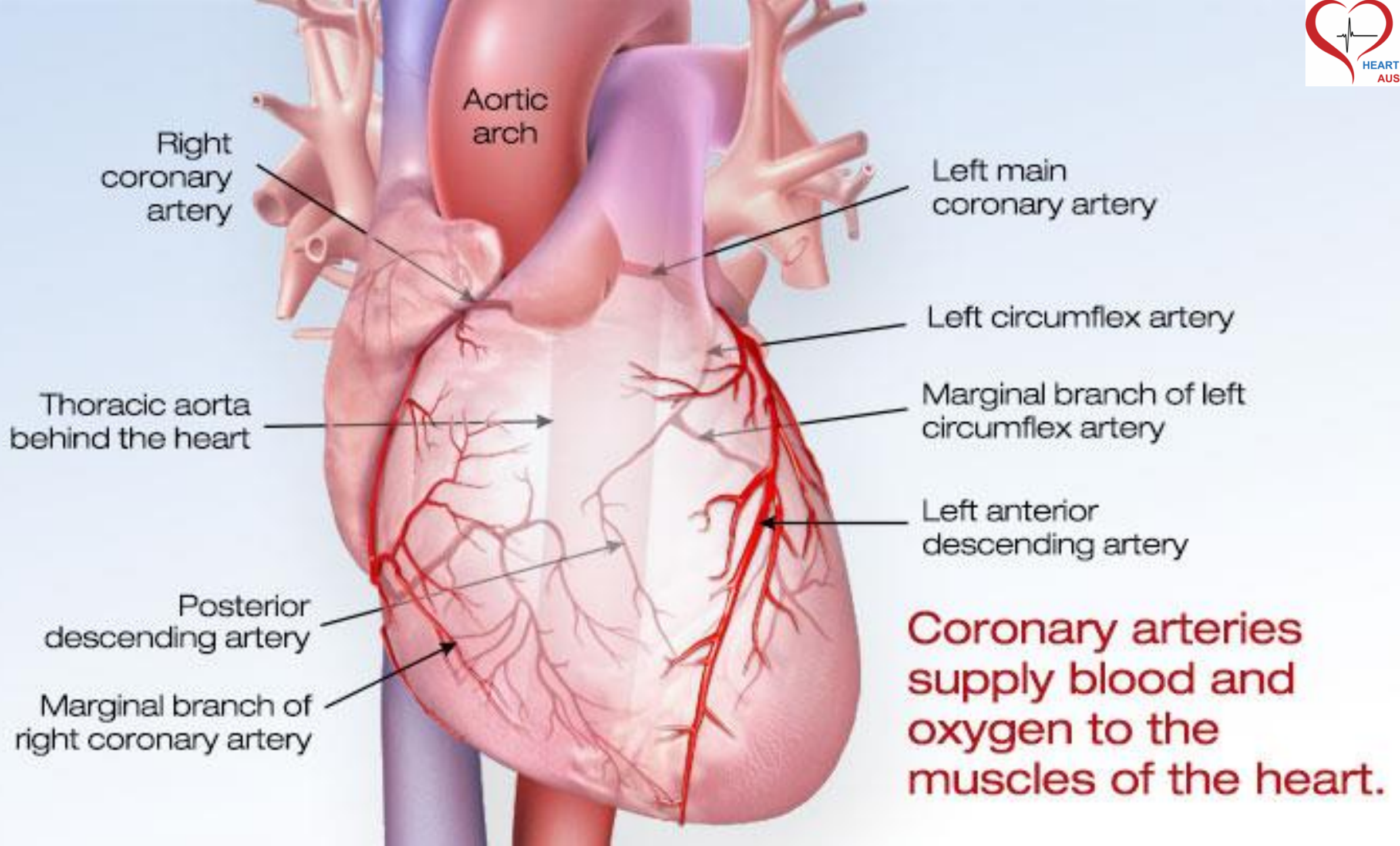
Progressive

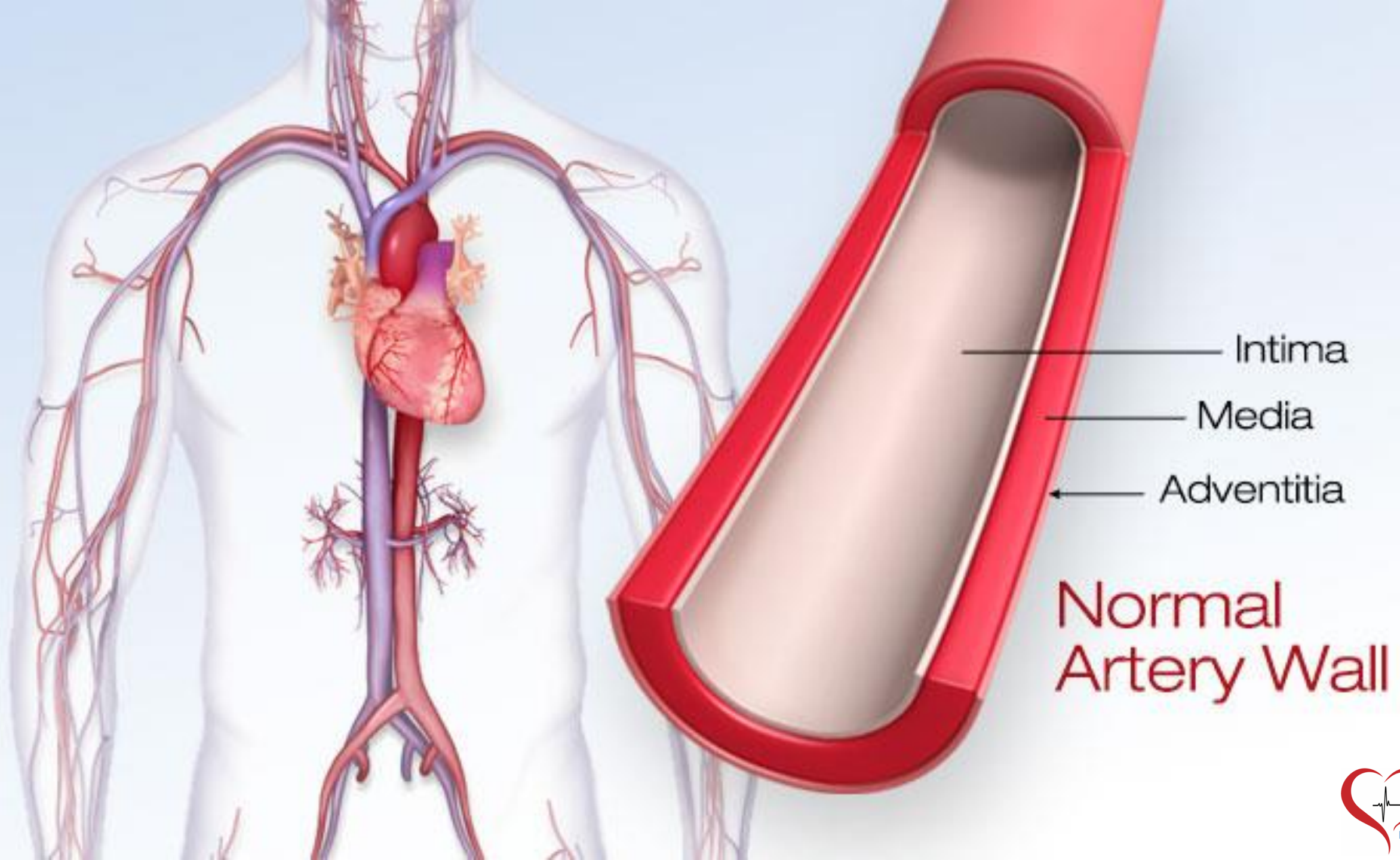
Unstable angina may be associated with a heart attack.

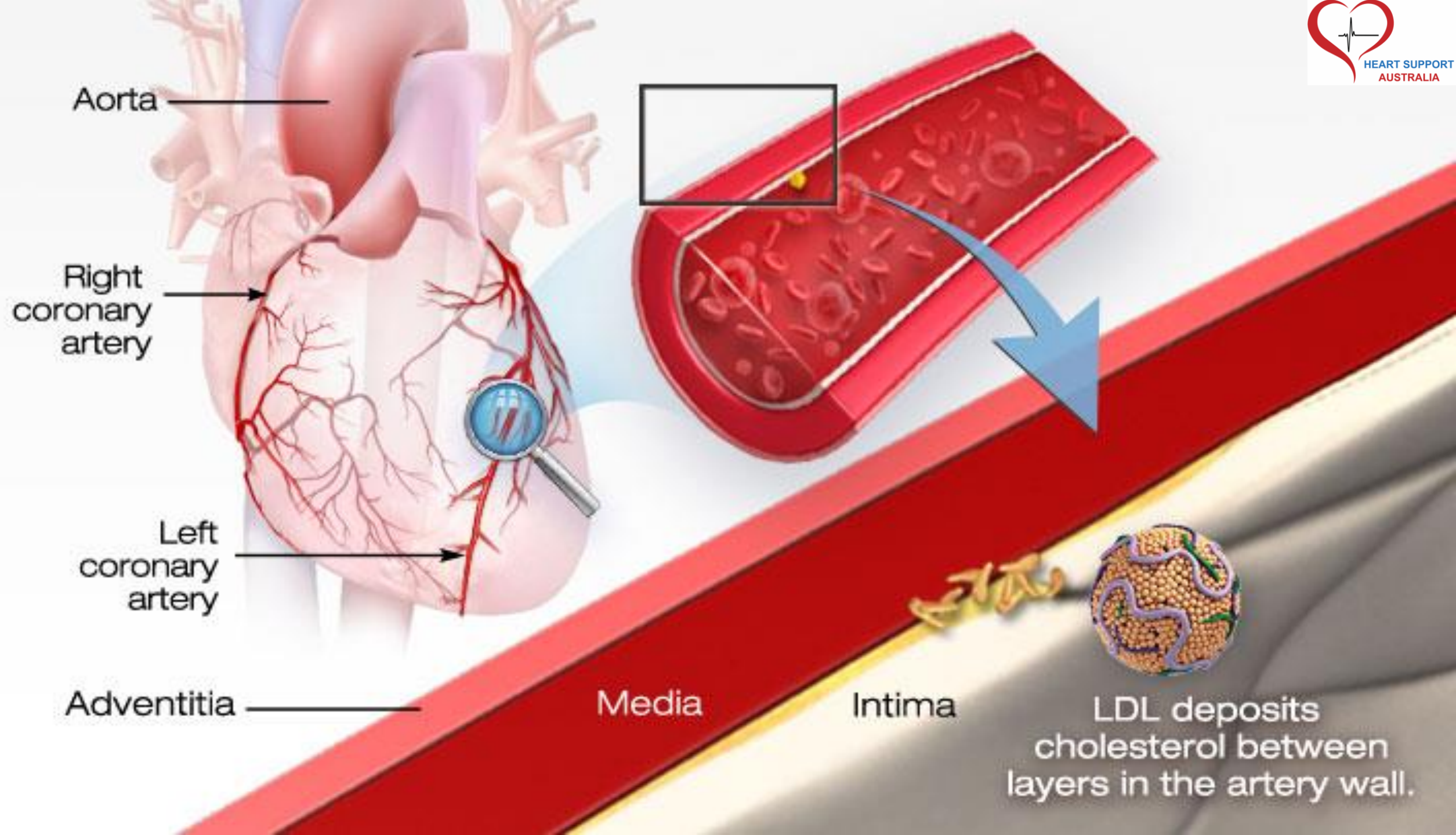


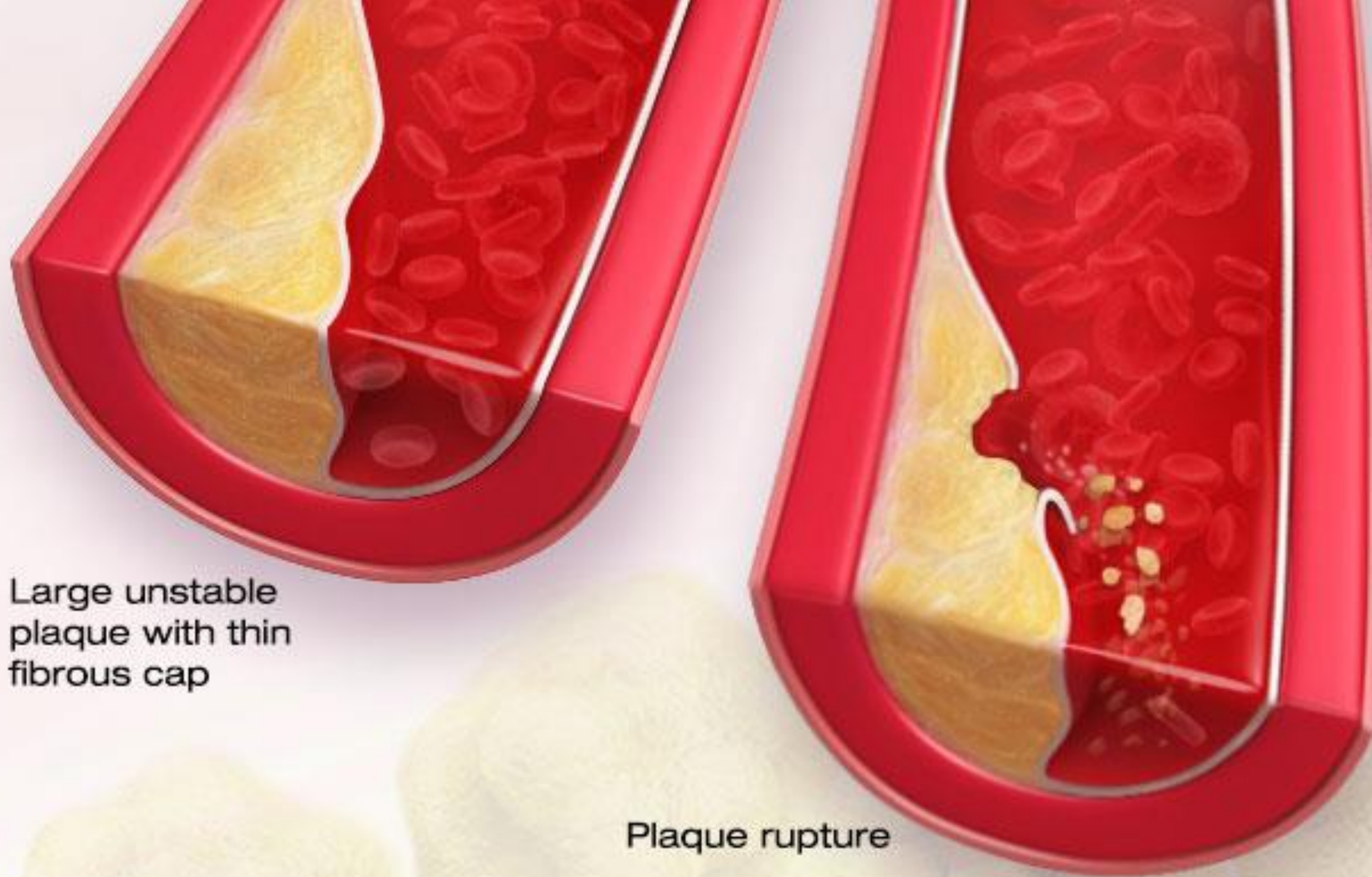
A Heart Attack Occurs

- When the blood flow that brings oxygen to the heart muscle is severely reduced or stopped
- This happens because coronary arteries that supply the heart with blood can slowly become thicker and harder from a build-up of fat, cholesterol and other substances, called plaque
- This slow process is known as atherosclerosis. If the plaque breaks open and a blood clot forms that blocks the blood flow, a heart attack occurs



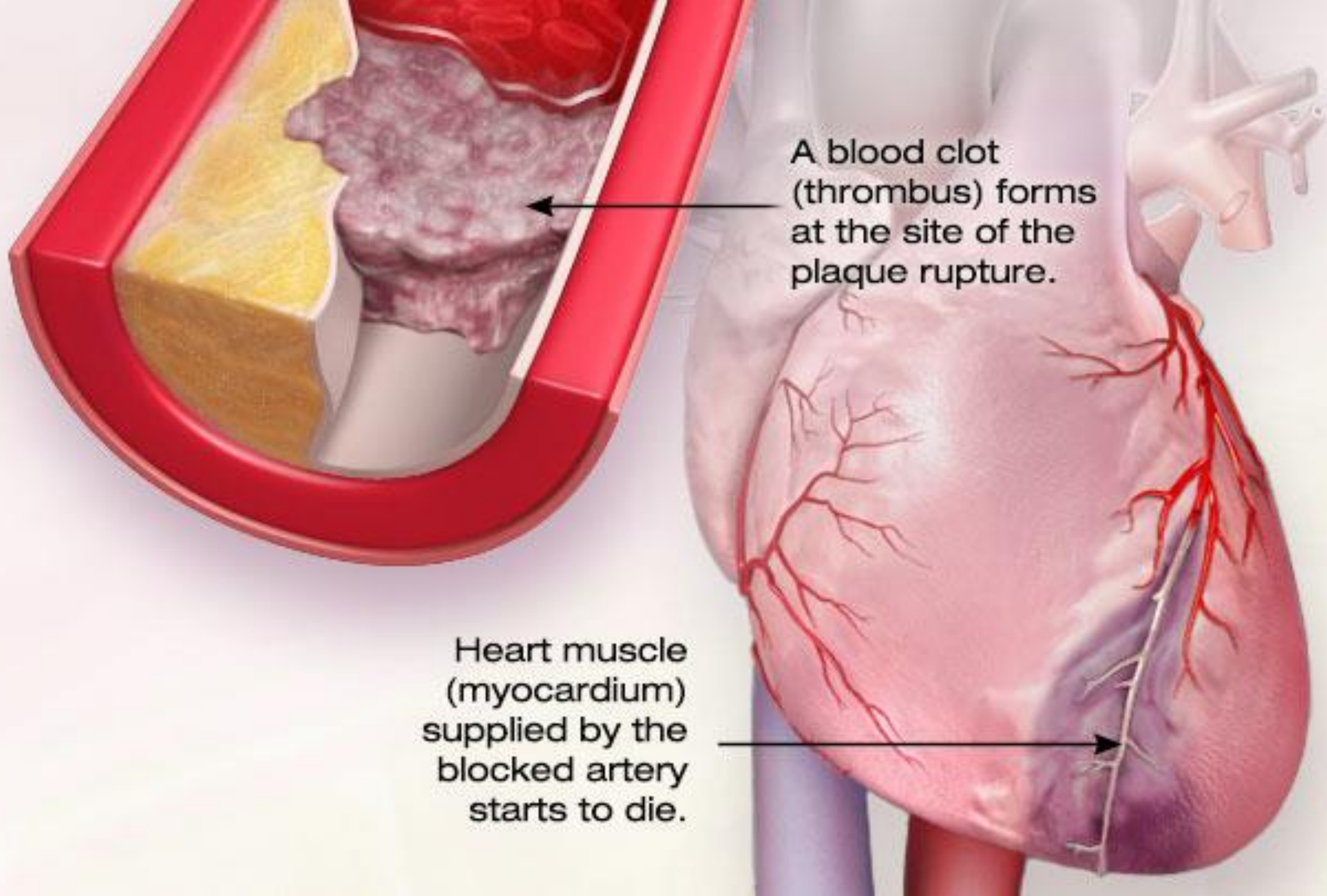






Large unstable
plaque with thin
fibrous cap

Plaque rupture



A blood clot
(thrombus) forms
at the site of the
plaque rupture.

Heart muscle
(myocardium)
supplied by the
blocked artery
starts to die.

Heart Failure

- Heart failure occurs when the heart functions less effectively in its role of pumping blood around the body
- Although it can occur suddenly, it usually develops over many years, as the heart gradually becomes weaker and works less effectively
- Heart failure is when your heart gets damaged, becomes bigger, weaker, or more stiff, and doesn't pump as well as it should. This causes extra fluid to build up in your body and sometimes in your lungs

Example of a damaged heart with heart failure

Normal heart

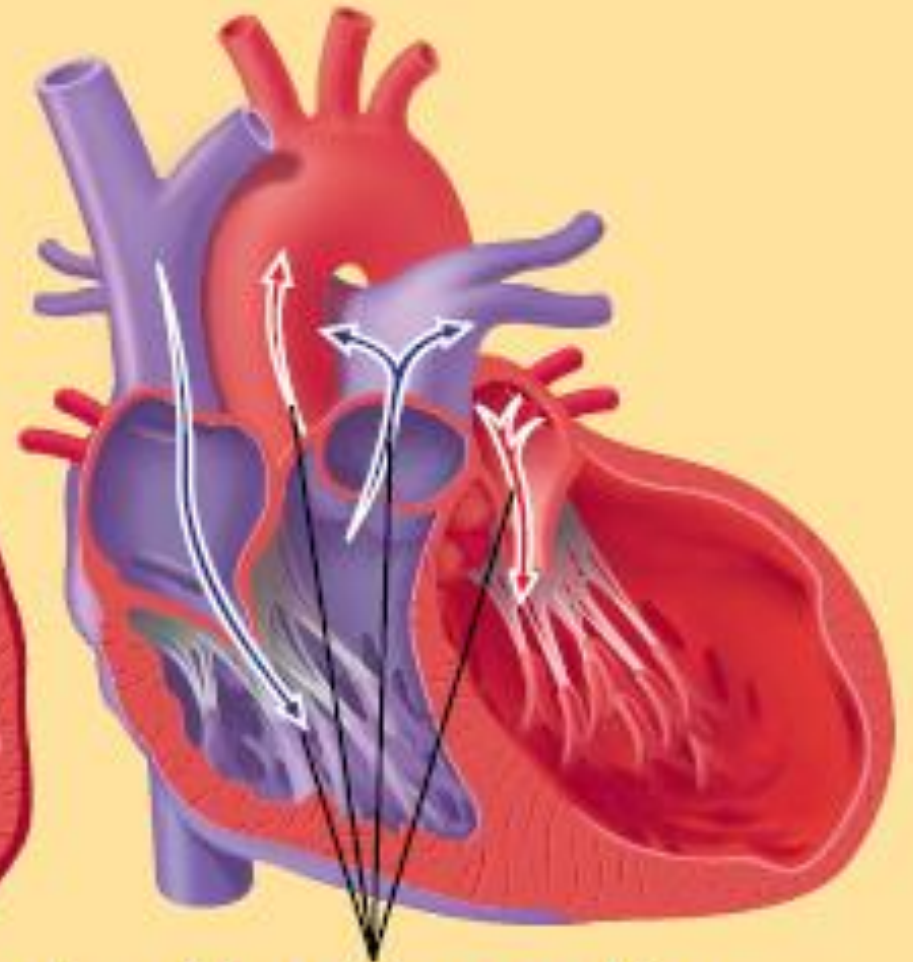
Heart with heart failure

Heart is bigger and out of shape

Heart chambers are weaker

Blood stays in the heart longer and doesn't pump properly

Heart might beat faster

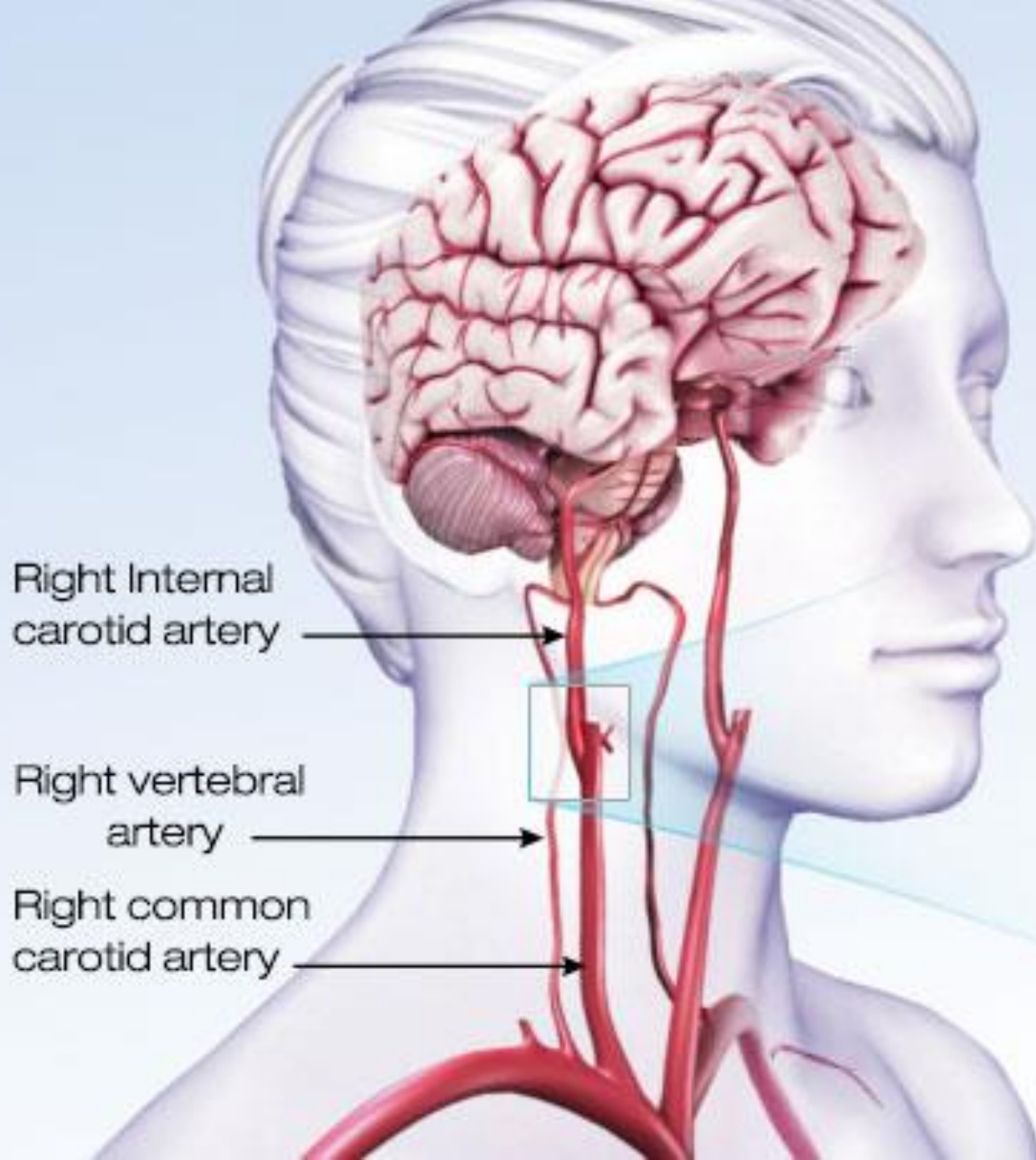


Less blood pumped in and out of the heart

Ischemic Stroke

Ischemic occurs when a **CLOT** or a mass clogs a blood vessel, cutting off the blood flow to brain cells

The underlying condition for this type of obstruction is the development of fatty deposits lining the vessel walls. This condition is called atherosclerosis



Atherosclerotic plaque reduces blood flow in the internal carotid artery.



Major Risk Factors you can Modify, Treat or Control

HIGH BLOOD CHOLESTEROL - As your blood cholesterol rises, so does your risk of coronary heart disease. When other risk factors (such as high blood pressure and tobacco smoke) are also present, this risk increases even more;

TOTAL CHOLESTEROL

Your total cholesterol HDL + LDL + Triglycerides

Low-density-lipoprotein (LDL) cholesterol = “bad” cholesterol

A low LDL cholesterol level is considered good for your heart health

High-density-lipoprotein (HDL) cholesterol = “good” cholesterol

With HDL (good) cholesterol, higher levels are typically better. Low HDL cholesterol puts you at higher risk for heart disease

LEADING CAUSE OF DEATHS in AUSTRALIA

Coronary Heart Disease-CHD

In 2017–18, an estimated 580,000 Australians aged 18 and over (2.8% of the adult population) had CHD

In 2017, an estimated 61,800 people aged 25 and over had an acute coronary event in the form of a Heart Attack or Unstable Angina-around 169 events every day Australia-wide

In 2018, CHD was the leading single cause of death in Australia, accounting for 17,500 deaths as the underlying cause of death. This represents 11% of all deaths, and 42% of cardiovascular deaths. Forty-two per cent (7,300) of CHD deaths resulted from a heart attack

Remote Australia= 1.5X Indigenous Australians=2.0X

Reference: AIHW Coronary Heart Disease Snapshot 23 July, 2020





Pain or discomfort
in chest



Lightheadedness,
nausea, or vomiting



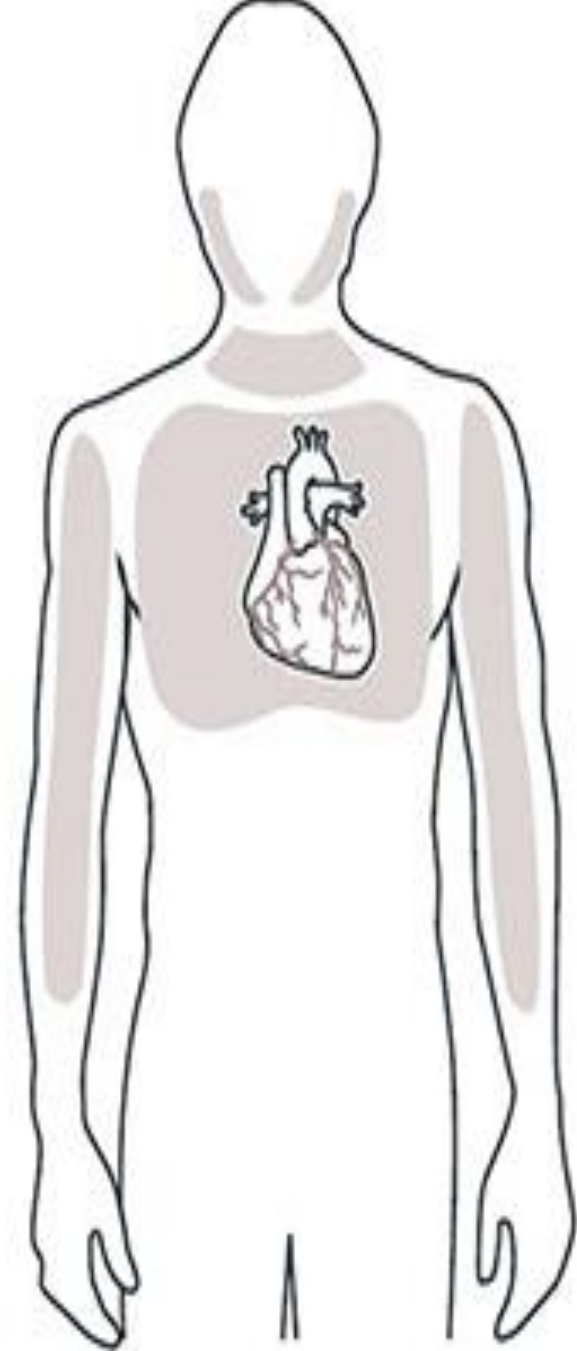
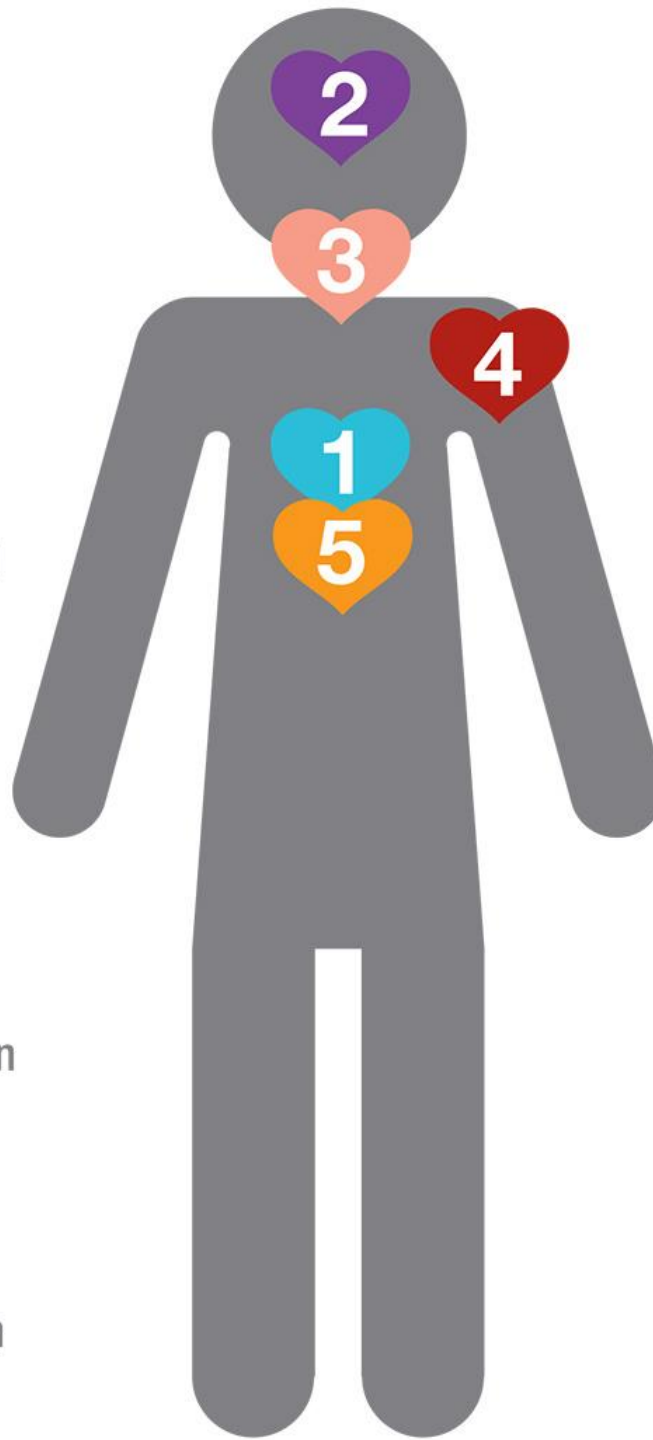
Jaw, neck or
back pain



Discomfort or pain in
arm or shoulder



Shortness of breath



Subtle Heart Attack Symptoms

Sweating-Shortness of Breath

These symptoms can signal a heart problem when they happen in certain situations:

- Sudden sweating or shortness of breath without exertion
- Breathlessness that continues to worsen over time after exertion
- Shortness of breath that worsens when lying down and improves when propping up
- “Stress” sweat (cold, clammy feeling) when there is no real cause for stress
- Sweating or shortness of breath accompanied by other symptoms such as chest pain or fatigue

Subtle Heart Attack Symptoms

Neck, Jaw, Back Pain

Pain in the Jaw, Back or Arms may signal a heart condition, especially if the origin is hard to pinpoint

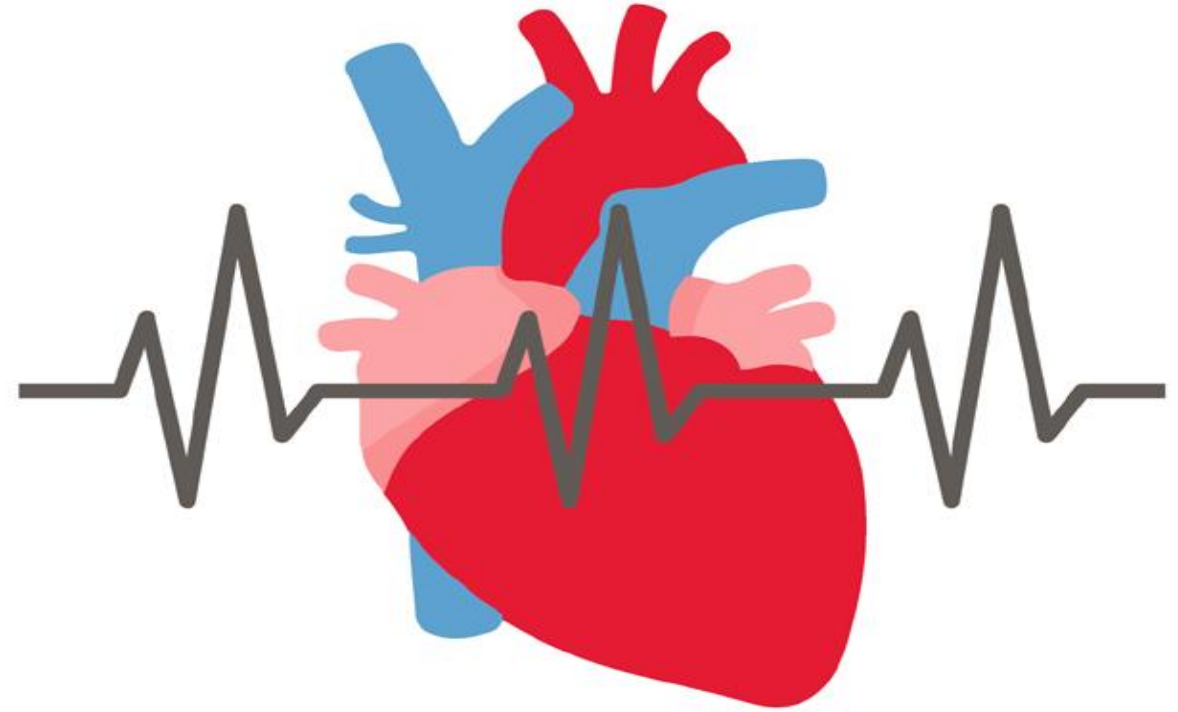
- Women, in particular, can have pain in either arm-not just the left one like many men
- Pain in the lower or upper back often starts in the chest and spreads to these areas
- The pain is sometimes sudden, not due to physical exertion, and can wake you up at night
- You may feel pain that is specific to the left, lower side of the jaw

A **HEART ATTACK**
is caused by a
BLOCKED ARTERY.



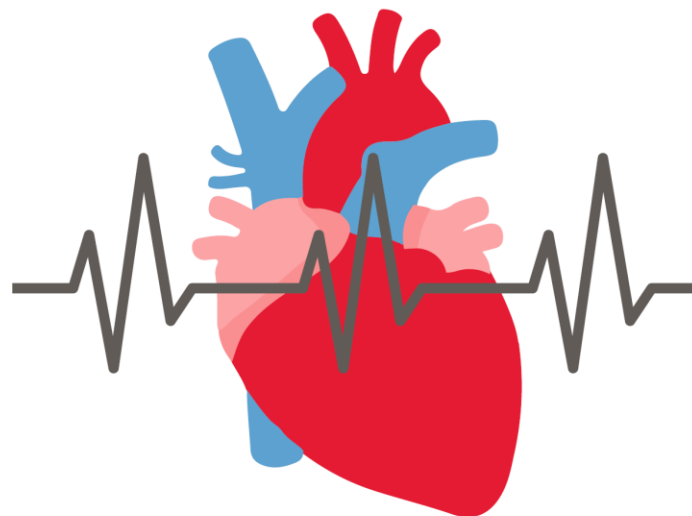
The person will be
CONSCIOUS and **BREATHING**
Call 000

CARDIAC ARREST
is an **ELECTRICAL**
problem of the heart.



The person will be
UNCONSCIOUS and **NOT BREATHING**
Call 000 Start CPR

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Cardiac arrest occurs due to an electrical problem in the Heart. This means the heart stops beating properly and is unable to pump blood.

Risk Factors

Risk Factors That Can Be Managed

You can control or treat these risk factors with lifestyle changes & help from your GP:

- High Blood Pressure
- High Cholesterol
- Diabetes
- Smoking
- Lack of regular activity
- Obesity or overweight

Risk Factors You Can't Control

You can't change these risk factors:

- Age
- Gender
- Heredity (family health history)
- Race
- Previous Stroke or Heart Attack

Tests and Treatment

- The person you are caring for may need to have various tests, and perhaps treatments such as medicines or undertake surgery
- Tests-A doctor or nurse may decide to arrange further tests for the person you are looking after, to find out more about the condition of his or her heart-ECG, Angiography, ECHO, Troponin, Stress test
- If the person needs heart surgery-It is natural for anyone needing heart surgery or a procedure such as an angioplasty or having a pacemaker implanted, to feel concerned or anxious

Questions you may want to ask as a Carer

- Why does the person I care for have a heart condition?
- Will their condition improve or will it get worse?
- Will they need any more tests or treatment?
- What medicines is he or she taking, and what are the possible side effects?
- Is it likely that the person I am looking after will have another heart attack

Questions you may want to ask as a Carer

- What should I do if I think the person I am looking after is having a heart attack, or is unwell?
- How much physical activity and what sort of activity should they be doing, and how often?
- Can they go back to work? Is it OK to go on holiday? Is it OK to have sex?
- How often will the person I am looking after need to go for appointments at the hospital or with the GP?
- Will anyone visit us at home? What help is available

Heart Support Group

Can help you as (the carer) to go to a heart support group with the person you care for before they have the Heart treatment or procedure, as you may be able to get useful information, from peer support/other people who have already had the treatment or procedure, about what to expect

Becoming the Carer

- Becoming a carer may be unexpected and happens suddenly, or it may happen more gradually
- Few of us are trained to be carers, so it can be difficult and stressful at times – both for you as the carer, and for the person you are caring for
- Caring for someone can be not only physically exhausting, but emotionally draining too. Some carers will juggle working, as well as home and family life, with looking after someone. And this can be harder for those carers who may have their own health problems too
- Caring can also be immensely rewarding. Many carers want to look after their loved ones to try and make their life better and more comfortable

Becoming the Carer

- Carers can make a big contribution to the recovery and the life of the person they are looking after. You will also learn a lot about yourself and about your skills and abilities
- Your own life may have changed just as much as the life of the person you care for. You may have had to adjust your routine and change your working arrangements. Your social life or hobbies can also be affected
- A confusing mix of emotions is quite normal. You may feel love and concern, mixed with sadness, anger and guilt
- Talking can help you to keep your worries in proportion. The key is to make sure that you (the carer) and the person you care for talk to each other about how you feel, as this can be comforting and helpful to you both

Helpful Tips to Becoming a Carer

- Try not to let the person's condition take centre stage all of the time
- Try to make time for yourself, and keep doing the things you want to do
- Tell your GP about your caring role, because it is important to look after your health too
- If you're working, tell your employer that you are now caring for someone, so you can organise leave if necessary
- Try to accept help when it's offered

Helpful Tips to Becoming a Carer

- If you are feeling down or depressed, make sure you get some help, by talking to someone about it. This could be a friend or family member, or for professional help, speak to your GP or a counsellor
- Learn more about the person's heart condition can be very reassuring
- Get a benefit check to make sure that you, the carer, as well as the person you are caring for, are getting all the financial support that you are entitled to
- Get support. Find out if there are any carers' organisations or heart support groups nearby

Know how to help the person you're looking after to protect their Heart

Many carers want to know what they can do to help the person they look after to prevent any future heart problems. Encourage the person you are looking after to do the following:

- If they smoke, try to quit smoking
- Eat a healthy, balanced diet-Cut fats & salt add fruit & veggies
- Do regular Mod-Intensity physical activity-150min/week
- Keep to a healthy weight and drink within the recommended alcohol limits (10 standard drinks/week)
- Also important that the person you are caring for gets their Blood Pressure and Cholesterol checks & keep regular GP visits

Cardiac rehabilitation programme

- If the person you care for has recently had a heart attack or heart surgery, or has been diagnosed with a heart condition, he or she may be referred to go to a cardiac rehabilitation programme
- Cardiac rehabilitation aims to help the person recover and get back to as full a life as possible. It also aims to help improve fitness, and confidence for everyday life
- Programmes vary, but they usually include education, exercise sessions, advice on lifestyle changes including healthy eating, and some relaxation
- To find out where your nearest cardiac rehabilitation programme is, ask the person's GP, or call 131112

Getting back to Normal and Encouraging Independence

- An important part of caring is encouraging the person you care for to get back to a normal routine and let life continue as usual
- Regaining independence is an important factor in recovering from, or living with, a heart condition
- Encourage the person you are caring for to be as independent as possible, and offer support so they can gradually do more things on their own
- Try to let the person you care for be the judge of what their limits are. Being overprotective can sometimes hamper the person becoming independent

Noticing changes in the person you care for

- Patients diagnosed with a heart condition, often experience a mixture of feelings and emotions for example they may feel relieved that they are alive, sad about the life they have left behind, and worried about the future
- The person you care for may also have good days and bad days, and may find it difficult to take responsibility for certain things – such as taking their medicines
- They may become frustrated, angry or irritable, or unable to share their feelings with you
- Feeling low and mood swings are common in people who have been unwell
- Fortunately, in many cases these changes are only temporary and things eventually return to normal-if they don't then see your GP

The Emotional aspects of being a Carer

Each person reacts in their Carer role in different ways. Some carers may be frightened to show how they feel and put on a brave face, always appearing cheerful and optimistic. However, bottling up feelings doesn't help, and may lead to anxiety and depression. Talking about your feelings – to a friend or relative, or maybe even to someone who doesn't know the person you care for – can be a great help

- *Resentment

- *Depression

- *Worry

- *Anger

- *Guilt

- *Stress

- *Isolation

How to cope?

Identify yourself as a Carer

- Many carers don't see themselves as a carer. They are just looking after their partner, parent or friend and are just getting on with it
- Some carers are reluctant to talk about it, but this can often mean that they may struggle on their own even more
- Actually identifying yourself as a carer and acknowledging this can be a positive step that may help you to feel more valued and get more help and support

How to cope? Don't try to solve everything at once, Have a Break & Relax

- Some carers feel they must try to find a solution to every problem for the person they are caring for
- Setting realistic goals, rather than trying to achieve everything at once, can help to make things clearer and make it easier to plan ahead
- Have a Break-having regular breaks are vital for your wellbeing and feeling that you want to spend time apart from the person you care for is normal
- Arrange for someone to come in and share/care for (few hours). Some areas run day centres where help can be accessed
- Relax & talk with someone and share with another carer or Counsellor who will help and support

How to cope? Look after yourself

- Taking care of yourself is just as important as your role of caring for someone else. Eating healthily, doing regular physical activity, and getting a good night's sleep will help you to look after your health and to cope with being a carer
- Make sure you try and do something that you enjoy on a regular basis, to help maintain your health and wellbeing

Try to put things into perspective

- Problems can sometimes seem huge, particularly if you are worrying at night, but in the morning they may not seem quite so overwhelming after all

Resume Sexual Activity

- If the person you are caring for is your partner, you may have concerns about your sex life. Remember your partner has had a heart attack/heart intervention, it's important to know that most people can return to having sex after a heart attack/condition
- Many people with a heart condition, or who have had treatment for a heart disease, are able to continue to enjoy a healthy sex life
- Like any other physical activity, having sex can temporarily increase the heart rate and blood pressure
- There are no strict rules about when you can start having sex again, but you should wait until your partner feels well enough. If you don't yet feel ready for sex seek your GP advise

Heart Support groups

Many people with heart conditions and their carers can benefit from meeting other people (peer support) who have had similar experiences.

Heart support group activities vary from group to group, and may include:

- Sessions where you can talk about your own experience with other heart patients and their carers with privacy maintained
- Education on Heart Disease and data on Cardiovascular Disease in Australia
- Risk factor knowledge to improve life style
- Diet and Exercise classes
- Scientific talks by speakers

Heart Support Australia,
Carer Gateway
Commonwealth Respite and Carelink Centres

Where To Go For Help

- Commonwealth Respite and Carelink Centre Ph: 1800 052 222 (business hours) Ph: 1800 059 059 (emergency respite outside standard business hours)
- National Carer Counselling Program for carer support groups & community care options Ph: 1800 242 636
- Relationships Australia Ph: 1300 364 277
- Carer Gateway is a government site dedicated to the needs of carers carergateway.gov.au

Getting a Carer's Assistance-Supplement

- To find out if you are entitled to extra support and services to help you look after the person you are caring for, you will need to have a carer's assessment
- Call Services Australia at 132717 for details of all Carers assistance programs-Australia wide or online details @
- <https://www.servicesaustralia.gov.au/individuals/services/centrelink/carers-payment>
- <https://www.servicesaustralia.gov.au/individuals/services/centrelink/carers-allowance>

Top Carer Takeaways

- Advancements in treatments and devices have enhanced survival and quality of life for patients with CVD, but the responsibility of maintaining complex regimens on a day-to-day basis has fallen on patients and more on their caregivers
- CVD follows an unpredictable trajectory with alternating periods of stability and instability; this alters the caregiving experience, with changing caregiving demands and changing caregiving intensity over time
- Although the care provided by caregivers is of immense clinical and economic value, many caregivers experience adverse impacts on their physical, psychological, social, and financial health

Caregiver- Remember to:

Communicate how you are feeling

Allow time to grieve the lack of normal

Reflect on the journey—in writing

Educate yourself about the disease

Get involved in your loved one's care

Involve others who can help

Visit other support members

Eat right

Rest-get sleep and take breaks

Acknowledgements

- Australian Government-Institute of Health & Welfare
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- Baker Institute
- The European Society for Cardiology