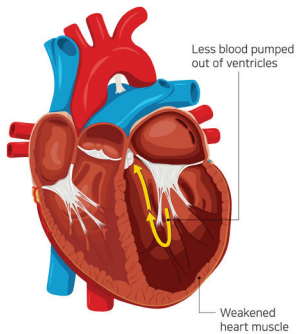
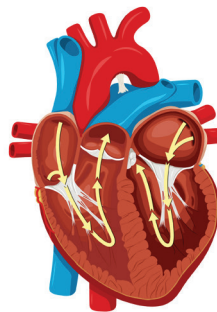


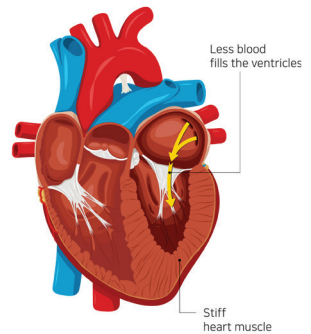
Heart Failure Management



Systolic Dysfunction



Normal

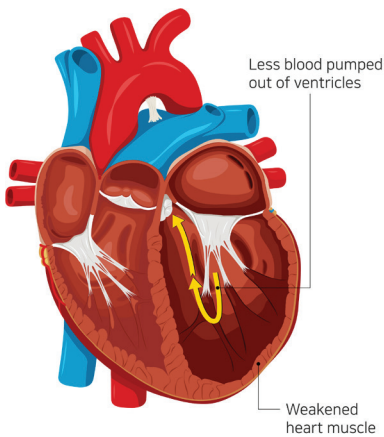


Diastolic Dysfunction

Heart Failure

When the heart is unable to pump blood to meet the body's demand, this can result in shortness of breath, fluid in the lungs, or leg swelling.

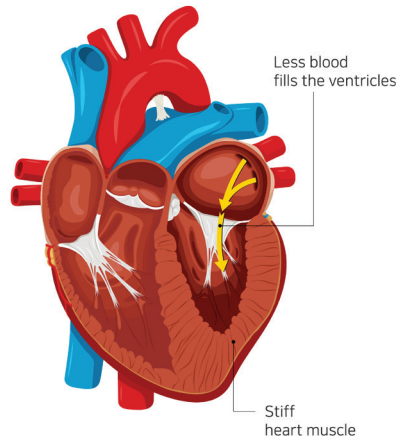
Types Of Heart Failure



Systolic Dysfunction

1 Heart failure with reduced ejection fraction

- The heart is enlarged, and the contraction force is weak.
- Pumping capability and efficiency of the left ventricle is abnormal.
- Heart attack is the most common cause.



Diastolic Dysfunction

2 Heart failure with preserved ejection fraction

- The heart size is typically normal, but the heart walls may be thickened.
- While contraction force is preserved, the heart walls are often stiff, and blood does not refill the heart's chambers easily.

.....

Common Causes

- Coronary artery disease and heart attack
- High blood pressure
- Abnormal heart rhythms (arrhythmias)
- Faulty heart valves
- Damage to the heart muscle
- Inflammation of the heart muscle (myocarditis)

.....

Symptoms

Symptoms of heart failure may be acute (sudden) or chronic (long-standing).

Heart failure signs and symptoms may include:

- Shortness of breath with activity or when lying down
- Tiredness and weakness
- Swelling in the legs, ankles and feet
- Fast or irregular heartbeat
- Reduced ability to exercise
- Persistent cough or wheezing with white or pink blood-tinged mucus
- Swelling of the belly due to accumulation of fluid in the abdomen
- Very rapid weight gain
- Difficulty concentrating

- Chest pain if a heart attack causes heart failure

.....

Management Of Heart Failure

1 Weight management

- Keep a record of your weight
- Weigh yourself in the morning, after emptying your bladder and before breakfast
- Try to wear the same amount of clothing and use the same weighing scale to avoid variations in readings.
- Record your daily weight in your diary or chart.

One of the most sensitive signs of worsening heart failure is weight gain due to fluid retention. Therefore, watch out for sudden weight gain and inform your doctor/nurse/care manager if the following scenarios occur:

- Weight gain more than 2 kg from your baseline
- Legs, ankles, or feet starts to swell for more than a day

Your doctor may have given you standby diuretics (water pills). If your weight does not improve in the next 2-3 days despite topping up the diuretics (Lasix/Furosemide or Burinex), please contact your medical team.

2 Fluid and Salt Management

When we take too much salt, our body retains extra sodium and fluid. Increased salt intake also leads to an increased sense of thirst and may cause one to drink more water. Therefore, patients with heart failure can benefit from reducing salt intake and reduce their risk of water retention.

Sodium In Food

- Salt contains high amounts of sodium
- Processed food products contain high amounts of salt. Examples include – Soy sauce, canned food, salted egg, salted fish, and pickled vegetables.

Reducing Salt Intake

- Your dietitian will advise you on the amount of salt (sodium) you can take.
- Limit the amount of salt you take to less than one teaspoon a day, which contains about 2g of sodium.

Fluid Restrictions

- Limit the amount of fluids to not more than 1.5 litres a day or as per advice provided by your doctor.
- This includes drinks such as coffee, tea, soup, porridge and water that you drink along with your medication.

Measure And Track Your Fluid Intake

- At the start, to help you monitor your fluid intake, write down how much you're drinking or eating throughout the day
- This will help you plan better your food and fluid intake and allow your doctor to titrate your diuretics better.

Blood Pressure Monitoring

- Record your blood pressure reading twice daily, or as instructed by your doctor/ nurse
- Measure your blood pressure at the same time everyday using the same arm.
- Be relaxed when taking the blood pressure
- Use the correct cuff size for accurate readings
- Avoid drinking coffee, smoking, or doing strenuous exercise 30 minutes before measuring your blood pressure
- Sit upright with your back supported, and place both feet on the ground
- Rest your arm on a table with the palm of your hand facing up
- Make sure the blood pressure monitor cuff around your arm is at the same level as your heart

If your blood pressure reading is high, rest for five minutes before measuring it again. Inform your doctor/ nurse/ care manager if your blood pressure reading remains high (10-20mmHg higher than baseline/ target) after three separate readings on three different occasions.





Excellent – Keep Up the Good Work!



No new or worsening shortness of breath



Physical activity level is normal for you



No new swelling, feet and legs look normal for you



Weight check stable
Weight: _____



No sign of chest pain

**GREAT!
CONTINUE:**



**Daily
Weight
Check**



**Meds as
Directed**



**Low
Sodium
Eating**



**Follow-up
Visits**



Pay Attention – Use Caution!



Dry, hacking cough



Worsening shortness of breath with activity



Increased swelling of legs, feet, and ankles



Sudden weight gain of more than 2-3 lbs in a 24 hour period (or 5 lbs in a week)



Discomfort or swelling in the abdomen



Trouble Sleeping

CHECK IN!

Your symptoms may indicate:



A need to contact your doctor or provider



A need for a change in medications



Medical Alert – Warning!



Frequent dry, hacking cough



Shortness of breath at rest



Increased discomfort or swelling in the lower body



Sudden weight gain of more than 2-3 lbs in a 24 hour period (or 5 lbs in a week)



New or worsening dizziness, confusion, sadness or depression



Loss of appetite



Increased trouble sleeping; cannot lie flat

WARNING! You need to be evaluated right away.

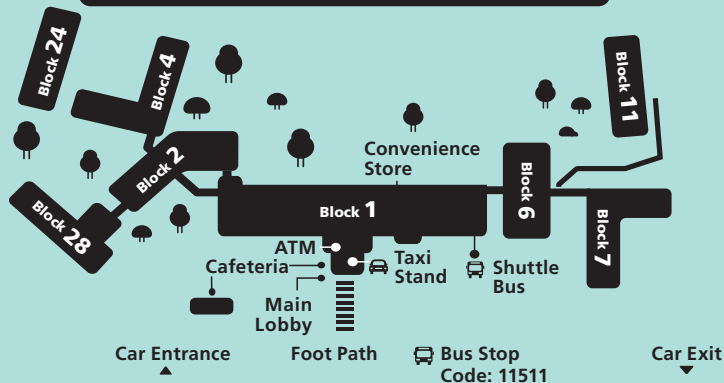


Call your physician or call 911



Notes:

How to Get Around Alexandra Hospital



Block 1

Level 1

- Clinic F, Clinical Measurement Centre
- Pharmacy

Level 2

- Clinic J, Integrated Care Clinic
 - Gynaecology Clinic
 - Outpatient Infusion Centre (OPIC)
 - Podiatry
- Clinic K, Healthy Ageing Clinic
 - Dietetics
 - General Surgery Clinic
 - Palliative Clinic
 - Physiotherapy
 - Plastic Surgery
 - Rehabilitation & Restorative Medicine Clinic
 - Staff Clinic
 - Urology Clinic
 - Vascular Clinic

Level 3

- Ward 7

Block 2

Level 1

- Clinic D, Dental Centre
- Clinic E
 - Anaesthesia Outpatient Consultation Clinic
 - Hand and Reconstruction Microsurgery
 - Neurosurgery
 - Orthopaedic Centre

Level 3

- Day Surgery Operating Theatre (DSOT)

Block 4

Level 1

- Ambulatory Surgery Centre
- Endoscopy Centre
- Rehabilitation 1

Level 2

- Wards 2 and 3

Level 3

- Wards 4 and 5

Block 6

Level 1

- Diagnostic Imaging 2 (DI 2)
- 24-HR Urgent Care Centre

Level 2

- Diagnostic Imaging 3 (DI 3)
- Major Operating Theatres 1 and 2 (MOT 1 & 2)

Level 3

- Intensive Care Unit 1 (ICU 1)
- Major Operating Theatres 3 and 4 (MOT 3 & 4)

Block 7

Level 1

- Wards 8 and 9

Level 2

- Wards 10 and 11

Level 3

- Wards 12 and 13

Block 11

Level 1

- Rehabilitation 2

Block 28

Level 1

- Care and Counselling
- Clinic A, Ear, Nose and Throat Centre (ENT Centre)

Level 2

- Clinic B, Eye Surgery Centre

The information provided in this publication is meant purely for educational purposes and may not be used as a substitute for medical diagnosis or treatment. You should seek the advice of your doctor or a qualified healthcare provider before starting any treatment or if you have any questions related to your health, physical fitness or medical conditions. Information is accurate at time of printing (November 2021) and subject to revision without prior notice.

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