TO YOUR HEALTH

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Keep it Pumping!

By Susan Cusson, NP

Heart failure, also known as congestive heart failure or CHF, is a condition in which your heart muscle doesn't



pump blood as well as it should. As a result, fluid backs up in the body. If you have heart failure, your heart has not actually "failed", it just isn't working as well as it should. Over time, certain conditions such as narrowed arteries in your heart (coronary artery disease) or high blood pressure leave your heart too weak or stiff to fill and pump efficiently. Other conditions that can damage or weaken your heart include faulty heart valves, abnormal heart rhythms such as atrial fibrillation, diabetes or cardiomyopathy. Some of these might be present without any symptoms.

How would I know if I have heart failure? At first you might have no symptoms but over

time CHF can lead to:

- Swelling in the legs, ankles and feet
- Trouble breathing which might lead you to be less active or need extra pillows at night
- Feeling tired, weak, lightheaded or dizzy
- A racing heartbeat, even at rest

How is heart failure diagnosed?

If you have symptoms, talk with your healthcare provider. After an exam your doctor or nurse practitioner might order some tests. Common tests that are used to diagnose heart failure might include electrocardiogram (ECG), blood tests, chest x-ray and echocardiogram.



An echocardiogram (also referred to as "echo") measures an ejection fraction, this is an important measure of how well your heart is pumping and is used to help classify heart failure and guide treatment. In a healthy heart, the ejection fraction is 50% or higher meaning that with each heart beat more than half of the blood that fills the ventricle is pumped out. Heart failure can also occur with a normal ejection fraction, when that is the case it means the heart is too stiff, often a result of poorly controlled high blood pressure. Other tests or referral to a specialist are sometimes indicated.

How is heart failure treated?

Heart failure is not curable but can be managed with medications and lifestyle changes. Not all conditions that lead to heart failure can be reversed but treatments can control symptoms, help you live longer and improve quality of life. A wholistic approach that includes lifestyle changes and

medications is most effective. Lifestyle changes include low salt diet, limiting alcohol, staying physically active, managing stress and maintaining a healthy weight.



Medications for heart failure usually include a diuretic or "water pill". Furosemide (brand name Lasix) is probably the most commonly prescribed diuretic. It is still important to drink enough water when you take diuretics to avoid dehydration which can have damaging effect on kidneys and can lead to fainting. A range of other medicines are often used to control heart rate and blood pressure also.

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Monitoring daily weight can help identify fluid retention before symptoms worsen. An increase of 3 or more pounds in a few days is enough to warrant a call to your doctor's office. Watch for changes in breathing such as getting out of breath doing things you normally do without a problem. New or worse swelling is also worrisome and should be reported.

What can I do to protect my heart?

One way to help prevent heart failure is to control the underlying conditions that cause heart failure including coronary artery disease, high blood pressure, diabetes and obesity. If you already have a diagnosis of heart failure the same lifestyle changes reviewed earlier can help prevent further damage. Certain over the counter medications should also be avoided because they are not good for people with heart failure. NSAIDS are well known pain relievers and readily available without prescription. These medications are generally very effective for relieving arthritic pain but come with significant health risks. In addition to the risk of stomach bleeding and kidney damage, NSAIDS can actually worsen heart failure. Examples of NSAIDS are ibuprofen (brand names Advil, Motrin) and naproxen (brand name Aleve). An alternative option is Acetaminophen (brand name Tylenol) this medication does not carry the same risk.



FLU CLINICS COMING IN OCTOBER

Dates will be posted in Bits & Pieces soon. If you get a flu shot outside CWV please bring documentation to the Clinic so that we can update your medical record.

ANNOUNCEMENT

Acupuncturist, Barbara
Blanchard is currently on medical leave. We are happy to announce a new acupuncturist, Nina
Warburton, who will be filling in during her absence. Nina has an extensive background as a pharmacist and now practices acupuncture and Herbal Medicine in Arlington, MA. She is available by appointment on Tuesday afternoons in the Clinic. Please call the Clinic to schedule an appointment.

HEALTH EDUCATION LECTURE

Back by popular demand! Dr. Peter Gibb will give a talk on "The Vanishing Ulcer and Flourishing Acid Reflux"

Please join us for this informative lecture.

Wednesday, September 11, 2019 10:30am -11:30am Auditorium Center