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## **Self-care key to improving heart failure patients' health**

Statement highlights:

- Teaching heart failure patients to take part in self-care is key to successfully treating their disease.
- In heart failure, self-care includes maintenance care: taking medicines regularly, eating a low-salt diet, preventing acute illnesses, exercising and limiting alcohol and tobacco use
- An important part of heart failure self-care is managing the disease by recognizing worsening symptoms and taking the appropriate action to address them.

DALLAS, Aug. 31, 2009 – Successfully teaching heart failure patients how to care for themselves is a low-risk, low-cost and effective treatment for these patients, according to a scientific statement published in *Circulation: Journal of the American Heart Association*.

Healthcare providers should strongly encourage patients to develop — and stick with — routines to manage their disease, according to the American Heart Association statement.

This “self-care” involves patients maintaining their health by ongoing practices such as:

- taking their medicines regularly and on time,
- limiting extra salt in their diet,
- eliminating or limiting alcohol,
- stopping smoking,
- exercising regularly, and
- getting appropriate flu and pneumonia vaccinations.

It also includes managing their disease by recognizing worsening symptoms, such as fluid retention, and knowing how to treat them. These simple and obvious behaviors can improve quality of life and keep heart failure patients out of the hospital.

“For heart failure patients to succeed at self-care, they must understand what signs and symptoms of heart failure feel like and what to do about them,” said Barbara Riegel, D.N.Sc., R.N., lead author of the statement and a professor in the School of Nursing at the University of Pennsylvania in Philadelphia.

“We need to get people to tune into their bodies and be able to recognize when they don’t feel well, figure out what happened and know what action to take to address it.”

Riegel said self-care can be challenging for many reasons. Depression and anxiety can interfere with patients’ willingness to actively take control of their care. Reading and understanding drug and food labels can also be difficult.

Most importantly, many heart failure patients have other illnesses and take multiple medications. They may not understand how the medications interact or how similar symptoms from the other diseases can mimic their heart failure symptoms.

“Patients wonder, ‘is that shortness of breath due to allergies, lung disease or heart failure?’ And if they treat one symptom they need to know how that will impact the other,” Riegel said. “So it’s not enough to just tell these patients, ‘you need to do X, Y and Z’. They need to have a full understanding of all their conditions, what they can do to monitor and treat them and when they can do that on their own versus when they actually need to reach out to their healthcare provider.”

Heart failure affects more than 5.7 million people and accounts for more than one million hospitalizations each year, many of which could be avoided if patients understood their condition better, said Clyde Yancy, M.D., president of the American Heart Association and a heart failure specialist.

“Self-care should be placed at the same tier as medicine and device intervention,” Yancy said. “Patients can be prescribed all of the best medicines and medical treatment available, but when they deviate from their diet or fluid regimen, all these best practices are for naught. When you introduce self-care into the regimen, that increases adherence and patients have better outcomes.”

That’s why self-care should be taught and be a highly valued part of the heart failure patients’ treatment, he said.

“We need to reconfigure our healthcare system to put a premium on the time doctors and nurses spend at the bedside going over this information with patients,” said Yancy, medical director of the Baylor Heart and Vascular Institute at Baylor University Medical Center in Dallas. “This is an opportunity we can’t miss. There is zero risk with self-care. It’s low cost and cost effective.”

Several components are needed for successful self-care, Riegel said. They include:

- better awareness and understanding among patients, along with developing skills to manage their health;
- increased involvement and instructions from healthcare providers;
- social and emotional support from family and friends;
- increased use of technology such as telemonitoring of patients by phone or Internet and
- more research into how all of these interventions can be used most effectively to achieve better outcomes.

“We’re learning more and more about the science behind self-care and what we need to tell patients and where they are going to struggle,” Riegel said. “But self-care has to be done all the time so patients don’t end up in the hospital, go home and a month later end up back in the hospital.”

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**The American Heart Association receives funding primarily from individuals; foundations and corporations (including pharmaceutical, device manufacturers and other companies) also make donations and fund specific association programs and events. The association has strict policies to prevent these relationships from influencing the science content. Revenues from pharmaceutical and device corporations are available at [www.americanheart.org/corporatefunding](http://www.americanheart.org/corporatefunding).**