

Editorial

Heart, Health, & Life

Mohsin Masud Jan

Editor

Some people think heart failure means the heart has stopped working. But what is it really?

Heart Failure is a condition in which the pumping ability of the heart becomes limited, leading to a reduced supply of blood to the rest of the body for normal functions. It is a grave diagnosis; however, it does not mean that the heart has stopped working. It describes a weak heart that needs support for survival. It can occur at any age but most commonly occurs in older people who have a history of angina, heart attack, hypertension and diabetes. Heart failure needs active treatment and lifestyle changes to prolong survival and improve quality of life.

The prevalence and burden of Heart Failure: The patients of heart failure should know that they are not alone. Approximately 26 million of the adult population worldwide has heart failure.

Heart Failure can be a deeply burdensome condition. It is one of the most common causes of hospitalization for people over the age of 65. After being discharged from the hospital, the HF patients are still at risk. Nearly a quarter of discharged patients will be readmitted within a month and mortality during this month can be up to 10%. Nearly 44% of the discharged patients are readmitted within the first year after discharge. And each hospitalization increases the chances for future hospitalizations. This can put severe mental and social strain on the patients and their families; and once you add the cost of the hospitalizations, it places an enormous economic burden as well.

HF carries a high risk of mortality as well; approximately 50% of the patients die within 5 years of diagnosis. So as you can see, a diagnosis of heart failure should not be taken lightly. It is vital that the condition be managed properly.

Causes of Heart Failure: There are a number of causes for heart failure.

Coronary artery disease (CAD) is the most common cause of heart failure. CAD occurs due to the accumulation of fatty deposits and narrowing of the arteries that supply blood to the heart. When blood supply to heart is blocked, the heart gets damaged. The damaged heart can result in heart failure.

Other risk factors that can progress to heart failure are:

- Any previous episode of heart attack that has caused damage to heart muscles
- Congenital Defects in the heart
- High blood pressure
- Valvular Heart disease
- Cardiomyopathy
- Infection of the heart and/or heart valves
- Abnormal heart rhythm (arrhythmias)
- Being overweight
- Diabetes
- Thyroid problems
- Alcohol or drug abuse
- Certain types of chemotherapy
- Failure to take preventive medications
- Diet (excessive salt or fluid intake)

The Symptoms of Heart Failure: Symptoms are due to the inadequate pumping function of the heart. They can be as seen below.

- Breathlessness on exertion or at rest.
- Swelling of the lower limbs
- Chronic lack of energy
- Difficulty sleeping at night due to breathing problems
- Swollen or tender abdomen with loss of appetite
- Cough with frothy sputum
- Increased urination at night
- Confusion and/or impaired memory

Because of these symptoms, the patients can also experience depression, social isolation, limited ability to travel, to socialize, and to go shopping; they can be unable to take part in recreational activities. It can further lead to a negative effect on personal relationships.

Managing Heart Failure: The first step in managing heart failure for healthcare professionals is its proper diagnosis and then to evaluate etiology or the cause behind it. They need to go through an initial clinical assessment including a careful history for symptoms, and a thorough physical examination to assess signs, and then ordering appropriate investigations like echocardiography, chest x-ray and ECG and other tests to finally confirm the clinical diagnosis.

After that, the clinician focuses on specific management strategies to improve functional capacity and the patient's quality of life. Preventing

hospital admissions and reducing mortality are also management objectives. There are multiple drugs available with different modes of action to take care of heart failure patients in achieving the above mentioned objectives which heart failure specialists use according to patients clinical condition; this is the key behind successful management to choose right drug at right time.

The doctor may change therapies according to patient situations, reassess symptoms, and consider additional therapies as needed. If the patient shows no improvement despite optimal medical therapy, device or surgical intervention may be offered to some patients.

The patient's role in managing Heart Failure: The patient's and their family's role is just as important as the doctor's in the management of heart failure. The patient must take the medicines as prescribed and not make changes to the regimen without consultation. If patients experience side effects, they should inform their doctors promptly so they can make the required adjustments. The patient must

maintain a healthy lifestyle by correcting diet, exercising every day, quitting smoking and stopping other unhealthy activities.

Some heart failure patients reduce their level of activity to avoid experiencing symptoms anymore. However, this can fool the patient and the doctor into thinking that the patient is getting better; the patient must be honest about their condition and remain positive about their outlook. The patient's family should be there at every step of the way, encouraging the patient to eat healthily, to exercise, and to maintain medication regimens. The family's presence will help keep the patient motivated to take better care of themselves.

Heart failure is a progressive condition, meaning it gets worse with time. This happens even if the patient starts to feel better after start of their appropriate management. Therefore, if the patient wishes for a healthier future, they should stick to the treatment advised and remain motivated for a healthy life style.