

Please take a few minutes to read this month's Report on **Chronic Heart Failure (CHF)**. You'll soon discover why Licking Memorial Hospital is measurably different ... for your health!
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Chronic Heart Failure (CHF) ... a community report on patient care quality.

HEALTH TIPS

You can take steps to lower your risk for chronic heart failure. Do the following for a heart-healthy lifestyle:

- Lose excess weight. Consult your primary care physician for advice.
- Don't smoke.
- Eat a low-sodium diet.
- Limit your intake of fats and cholesterol.
- Watch your blood pressure.
- Exercise regularly.



Chronic Heart Failure: How Do We Compare?

At Licking Memorial Hospital, we take pride in the care we provide. To monitor the quality of that care, we track specific quality measures and compare them to benchmark measures. Then, we publish them so you can draw your own conclusions regarding your health care choices.

1 This indicator measures the average number of days chronic heart failure (CHF) patients are hospitalized during each inpatient stay. Length of stay is one indicator a hospital should consider in determining if it is using resources for inpatient care appropriately. CHF average length of stay should be close to the benchmark.

	LMH 2003	LMH 2004	LMH 1/05-10/05	Benchmark ⁽¹⁾
Average length of stay for CHF patients	3.4 Days	3.2 Days	3.1 Days	5.4 Days

2 Inpatient mortality measures the percentage of inpatient deaths among all CHF patients admitted to Licking Memorial Hospital.

	LMH 2003	LMH 2004	LMH 1/05-10/05	Benchmark ⁽¹⁾
CHF inpatient mortality	2.9%	0.9%	1.2%	3.7%

3 The left ventricle is the chamber of the heart that pumps blood out of the heart and into the body. Measuring left ventricular function (LVF) helps determine how well a CHF patient's left ventricle is working.

	LMH 2003	LMH 2004	LMH 1/05-10/05	Benchmark ⁽¹⁾
LVF assessment	93%	95%	97%	92%

4 Medications beneficial to many CHF patients include angiotensin-converting enzyme (ACE) inhibitors, beta blockers, and angiotensin-receptor blockers (ARBs). ACE inhibitors and ARBs have been shown to lower mortality and improve functional capacity and quality of life. Beta blockers can reverse or prevent some of the health effects associated with heart failure. Patients treated with beta blockers may see significant improvement in heart function after three months. The Licking Memorial Health Professionals (LMHP) physician offices also monitor quality data for CHF patients seen in each office.

	LMH 2003	LMH 2004	LMH 1/05-10/05	Benchmark
CHF patients on ACE or ARB at discharge	85%	91%	99%	86% ⁽¹⁾
CHF patients on Beta at discharge	77%	96%	99%	90% ⁽²⁾
LMHP office patients on ACE or ARB	LMHP 3Q 2003 98%	LMHP 3Q 2004 94%	LMHP 3Q 2005 96%	LMHP Goal greater than 90%

5 It is vital that CHF patients be involved in their own care to reduce health complications and improve quality of life. They need to monitor their weight, limit their salt intake, and take their medications regularly. Health care providers need to give thorough discharge instructions to help these patients effectively manage their condition.

	LMH 2003	LMH 2004	LMH 1/05-10/05	Benchmark ⁽¹⁾
All discharge instructions completed	85%	85%	91%	62%

Data Footnotes:

(1) Comparative data from the MIDAS Clinical Comparative Database for second quarter 2005.
(2) Benchmark indicates LMH goal

Patient Feature: Joe Heist

Joe Heist went to see his primary care physician for a nagging cough and congestion. His physician ordered a chest X-ray to view his lungs, suspecting that Joe had pneumonia. The X-ray revealed that Joe had an enlarged heart.

“I had a medical history of moderately high blood pressure, about 140/90. This stretched all of my tissues and caused my heart to have to work harder to supply oxygen and caused my overall muscle strength to decline,” said Joe. Upon the discovery of Joe’s enlarged heart, he was referred to a pulmonologist. “It was the pulmonologist who discovered the heart failure. He told me that the angle that I was lying on the exam table allowed him to see that my jugular vein pulsed when he pushed on my stomach. The pulsing of the jugular meant that there was blood backed up in my heart and that I had chronic heart failure,” stated Joe. He was then referred to Bryce Morrice, M.D., Director of Cardiology for Licking Memorial Hospital (LMH). Through further testing, Dr. Morrice informed Joe that his left ventricle of his heart was working at only 35 percent capacity. “He put me on hypertension medication to relieve some of the stress on my heart and blood vessels,” Joe continued. Joe was also advised to take a beta-blocker medication to reduce his heart rate. “Basically my heart would have worn itself out trying to pump blood throughout my body. It was working so hard and fast, due to the decreased capacity, that it was wearing itself out,” said Joe.

Joe was first diagnosed with chronic heart failure more than four years ago. Dr. Morrice and the Cardiology Department of LMH monitor him regularly. “I am delighted at what the Hospital and the Cardiology Department have done for me. I received top-notch care that I probably wouldn’t have received elsewhere,” said Joe.

Living With Heart Failure

What is heart failure? Many people mistakenly believe that heart failure means the heart has stopped or is about to stop. Heart failure simply means that the heart is not pumping blood through the body as well as it should. As the heart’s pumping action weakens, blood backs up into the vessels around the lungs and causes seepage of fluid into the lungs. The fluid causes congestion and makes it hard to breathe. Many people with heart failure also have swollen feet and legs. That is why heart failure is sometimes called chronic heart failure, or CHF.

Heart failure is a serious illness that can affect how long you live. You may have heard that some people may die sooner because of heart failure. But, with proper medications in the right doses and careful management, you can live longer and feel better.



Thanks to the care Joe Heist received at Licking Memorial Hospital, he is still able to take care of the animals on his farm in Alexandria, Ohio.

Today, Joe remains active, working on his cattle farm in Alexandria, Ohio. “I can’t bale a wagon of straw, run a race or ice skate anymore – but I am still able to cut a wagon of wood with a hydraulic splitter and get six bales of straw ready to feed my cattle every day,” Joe said.

Joe and his wife, Jane, have lived on their farm since 1968. “I am a farmer by hobby, I worked as an engineer as my occupation,” stated Joe. He retired from engineering at the Newark Air Force Base in 1994. He has a Bachelor of Arts in physics from Thomas More College in Crestview, Kentucky and a Master’s degree in engineering from George Washington University in Washington, D.C. Joe and Jane have five children – one son and four daughters, and seven grandchildren.

What Can I Do To Avoid Worsening Heart Failure?

One of the most important things to do is to follow the orders given by your physician. Be sure to take any medication prescribed at the correct time and follow the dosage or food requirements. Be sure that you have a clear understanding of the directions. There are also three things that you can incorporate into your everyday routine to prevent the worsening of heart failure – weigh yourself daily, avoid high-sodium foods, and develop an action plan to follow if heart failure symptoms worsen.

Weight Management/Exercise Tips

In heart failure, the heart isn’t working properly; so many people think that exercise will hurt them. Actually, moderate physical activity can help the heart work more efficiently. With daily exercise, most people will find that they don’t feel as tired; they have less stress, and their energy level increases. Other advantages include weight

Living With Heart Failure (continued from previous page)

control or weight loss, better circulation, and lower blood pressure and cholesterol levels. It’s important to plan your physical activity with your health care professionals. How much exercise you can do will depend on your specific condition. Even a small amount can improve the way you feel and help you have a more positive attitude. If you can enjoy some recreation, family outings or other leisure activities, you’ll get more pleasure out of life. Whether you take part in a formal exercise program or if you have heart failure, you need to make time for moderate aerobic physical activity, like walking, swimming or biking. You should always stay within your physician’s recommendations and your own comfort zone. Here’s a checklist of what to do and what to avoid.

To do ...

- Wear comfortable clothes and flat shoes with laces or tennis shoes.
- Start slowly. Gradually build up to at least 30 minutes of activity, five or more times per week (or whatever your doctor recommends). If you don't have a full 30 minutes, try two 15-minute sessions or three 10-minute sessions to meet your goal.
- Exercise at the same time of day so it becomes a habit. For example, you might walk Monday through Friday from 9:00 to 9:30 a.m., to avoid extreme hot or cold temperatures.
- Drink a cup of water before, during and after exercising (but check with your doctor, because some people need to limit their fluid intake).
- Ask family and friends to join you. You'll be more likely to keep exercising.
- Note your activities on a calendar or in a logbook. Write down the distance or length of time of your activity and how you feel after each session. If you miss a day, plan a make-up day or add 10 to 15 minutes to your next session.
- Use variety to keep your interest up. Walk one day, swim the next time, and then go for a bike ride on the weekend.
- Look for chances to be more active during the day. Walk the mall before shopping, choose a flight of stairs over an elevator, or take 10 to 15 minute walking breaks while watching TV or sitting for some other activity.

Avoid ...

- Getting discouraged if you stop for a while. Get started again gradually and work up to your old pace.
- Doing isometric exercises that require holding your breath, bearing down or sudden bursts of energy. If you're taking part in an exercise class or physical therapy, ask the leader or therapist what these are. Also avoid lifting weights and competitive or contact sports, such as football.
- Engaging in any activity that causes chest pain, shortness of breath, dizziness or lightheadedness. If these happen, stop what you're doing right away.
- Exercising right after meals, when it's very hot or humid, or when you just don't feel up to it.

Stop Smoking

Smokers who have heart failure can automatically eliminate a major source of stress on their hearts by quitting. Each puff of nicotine from tobacco smoke temporarily increases heart rate and blood pressure, even as less oxygen-rich blood circulates through the body. Smoking also leads to clumping or stickiness in the blood vessels feeding the heart. People who quit smoking are more likely to have their heart failure symptoms improve. Lifetime smokers often need help to quit successfully. These tips may also help smokers quit:

- Keep busy doing things that make it hard to smoke, like working in the yard, washing dishes and being more active.
- Fight the urge by going to places where smoking isn't allowed and staying around people who don't smoke.
- Avoid situations that tempt you to smoke, like drinking coffee or alcohol.
- Find a substitute to reach for instead of a cigarette. Try a hard candy.

- Don't give up if you smoke a cigarette. Just resolve not to do it again.
- Remind yourself that you're likely to feel better if you stop smoking.
- Tell family members and friends that you need to quit smoking and need their support. If your husband, wife, son or daughter smokes, ask them to quit with you.

Action Plan

Heart failure requires you and your caregivers to pay close attention to any changes in symptoms. If you notice something new, or a sudden worsening of a current symptom, notify the doctor immediately. Here’s what to watch for:

- Sudden weight gain — 3 or more pounds in one day, 5 or more pounds in one week, or whatever amount you were told to report. That’s why it’s so important for people with heart failure to weigh themselves every day – preferably every morning, before breakfast and after urinating, with the same type of clothes on, without shoes, on the same scale and in the same spot.
- Shortness of breath while at rest or with changes in activity level.
- Increased swelling of the lower limbs (legs or ankles).
- Swelling or pain in the abdomen.
- Trouble sleeping (awakening short of breath, using more pillows).
- Frequent dry, hacking cough, especially at night.
- Loss of appetite.
- Increased fatigue or feeling tired all the time.