

Recovering from coronary angioplasty and stent insertion

A new start

This booklet has been produced to help you to recover from your coronary angioplasty or stent insertion as quickly and safely as possible. It is for your relatives or carers too. It is suitable for adults of all ages.

The information should help with some of your questions. There is advice about what you can do to make a speedy recovery. Simple exercises to do in the first few weeks after your angioplasty are described. There is information about diet, your medicines, and when you can start doing certain activities again. There is a section about stress and how to deal with it.

The booklet has information about cardiac rehabilitation and support groups in your area, and useful addresses and telephone numbers.

Please take time to look at this. We hope that you find it helpful.

Members of the cardiothoracic service at Freeman Hospital produced this booklet in 2005. Review date: 2007

With many thanks to the local cardiac rehabilitation teams, members of the cardiology and cardiothoracic surgical services, as well as the many individuals who have had coronary angioplasty and contributed to, or commented on this information. We are grateful to Simon Thorp for the artwork.

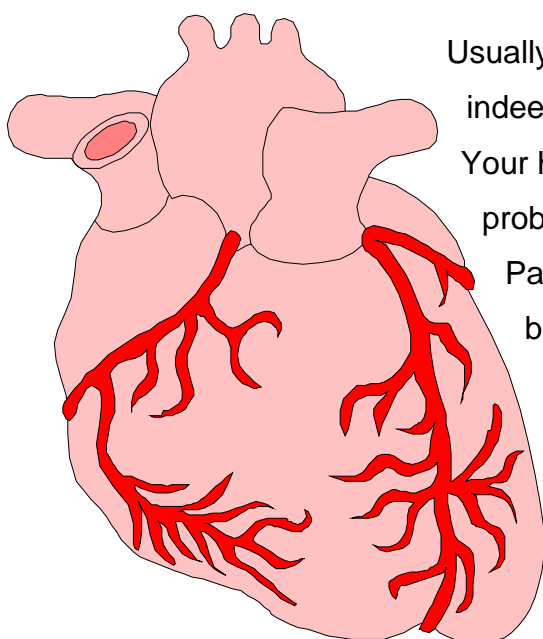
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Your Heart

Your heart is a pump made of muscle. It works non-stop throughout your life pumping blood around your body. Your blood carries oxygen from the air you breathe, and food from your stomach and gut to supply your body with all it needs to work. Your heart needs oxygen and food too. It gets these from its own blood supply – the coronary arteries.

What is coronary heart disease?



Usually there is nothing wrong with your heart – indeed, it is the strongest muscle you have. Your heart trouble has been caused by problems in your **coronary arteries**.

Parts of your coronary arteries have become narrowed over time. This is sometimes known as hardening of the arteries or *arteriosclerosis*. It is very common. Most people have some narrowing of their arteries as they grow older.

When the coronary arteries become narrow the blood supply to your heart is not so good. When your body needs more blood – usually when you exert yourself – your heart has to pump harder. It needs more blood itself. The heart muscle hurts when it does not have the supply of blood it needs – this is **angina pain**. This pain usually gets better with rest and with nitrate drugs like GTN (see page 18). Emotional upset or extremes of temperature can also cause angina pain.

A **heart attack** happens when part of the coronary arteries becomes blocked. One part of the heart muscle does not get its blood supply and is damaged. Resting or taking GTN does not relieve pain caused by a heart attack.

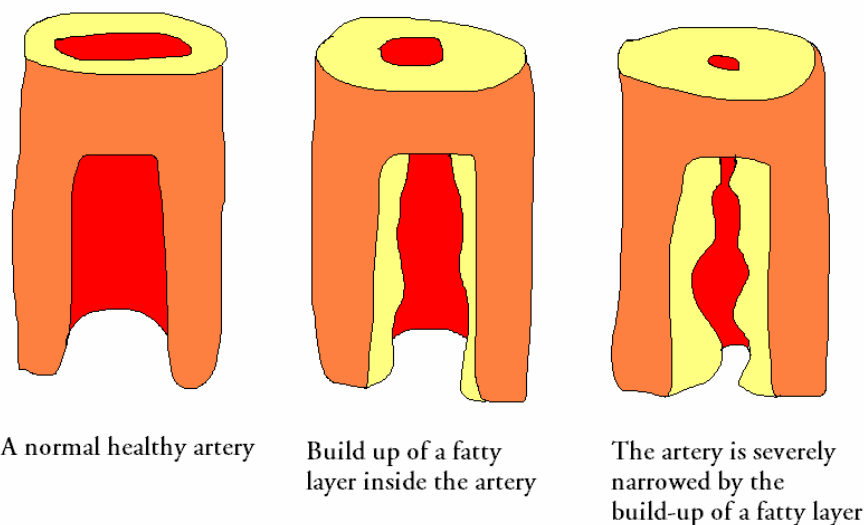
Why do the coronary arteries become narrowed?

Over a long time (perhaps starting when you were a teenager), a fatty layer builds up on the inside of your arteries. This layer gets thicker and thicker. Some parts of your arteries may become very narrow. Then it is difficult for your blood to get through. Usually there are only a few parts of your coronary arteries where there is this narrowing.

Sometimes your arteries deal with this local problem by growing new blood vessels in that part of your heart.

There is a danger of narrowed arteries becoming blocked by clotted blood sticking to the artery wall.

This picture below shows a bit of coronary artery becoming narrower and narrower as it becomes blocked up with a fatty layer.



Risk factors for heart disease include high levels of cholesterol in your blood, smoking, lack of exercise, and high blood pressure. These factors speed up the narrowing of the coronary arteries. There is more information about the risk factors in the section about maintaining a healthy heart (page 28).

What can I do about coronary artery disease?

There is a lot that can be done to help to treat this problem.

Coronary artery bypass graft surgery creates a bypass route around the narrowed artery or arteries to improve the blood flow to the heart.

Angioplasty (stretching an artery open), and putting in **stents** are ways to reopen the arteries that have narrowed.



There is **medicine** that helps to control coronary artery disease, (Page 15).

You can do a lot to reduce the risk of narrowing arteries and to stay well after this procedure. Take a look at the section on maintaining a healthy heart for ideas about staying well (page 28).

About angioplasty

Angioplasty is widely used to treat blockages or narrowing in the coronary arteries. The aims are to help you return to a fuller and more active life, and to reduce your risk of future heart problems.

A small cut is needed in the groin or arm. Local anaesthetic is used to reduce any discomfort. A small hollow tube on a wire called a catheter is guided into an artery and along to your heart. Using X-ray pictures as guidance, the catheter is positioned where the narrowing is. A balloon is inflated to open the artery and improve blood flow. A stent (a metal tube to hold open an artery) may be left in larger arteries. The catheter with its deflated balloon is then removed.

The procedure may be quite simple and completed in 20 minutes or so. Sometimes it can be technically difficult and take much longer.

Recovery immediately after the procedure involves resting. If the catheter was inserted in your groin, then you need to keep fairly still for several hours to allow the insertion site to heal.

After angioplasty or stent insertion

Most people do not need to be in hospital for long after this treatment. It is normal to go home the same or following day. Your heart is hopefully working much better straight after the treatment now that it has a better blood supply. You may find that you can immediately start to do much more than before. Don't forget that your level of fitness before the procedure will affect how much you can do. You may need to build up your activities gradually to increase your fitness.

Most people do make a straightforward recovery. However you may notice some after-effects of this treatment. Here are some ideas about what you can do about these. The good news is that these will usually clear up with time.

Bruising: It is normal to have bruising around the puncture site. You may discover a hard lump around the wound, especially if your wound is in your groin. This should resolve over time. Contact your GP surgery if you notice that the area has become inflamed and red, or if you have any concerns about the healing in this area. Take paracetamol for pain relief if necessary.

Constipation: This may happen because of your tablets or because you are less active than normal. Eating plenty of foods high in fibre like fruit, vegetables and grains, drinking plenty of water and exercising may help. Your GP or practice nurse can advise you about dealing with this.

Chest Pain: You may experience mild chest pain or ache following angioplasty and stent insertion, especially if several stents were put in place. This can take several weeks to settle.

Tingling and numbness: Some people notice tingling or numbness in their leg. This is due to the local anaesthetic and will settle after a few days.

Angioplasty is an effective treatment for most people. However, a few people may not get a long-lasting benefit. The coronary arteries may start to narrow again. Use your GTN spray if you think you are experiencing angina (see page 18). Contact your general practitioner if this continues. Don't forget that there is a range of treatments for angina.

Exercise after angioplasty or stent insertion

One of the great benefits of these heart treatments is being able to do more.

Taking exercise will:

- ◆ Make you feel good
- ◆ Help your heart recover
- ◆ Help you to sleep better
- ◆ Build up your fitness
- ◆ Lower your blood pressure
- ◆ Help you have a healthy weight
- ◆ Lower your cholesterol levels
- ◆ Help your heart stay well

Spending most of your time lying or sitting down will not help your heart recover and could cause problems. Don't be put off if you have arthritis or another physical problem – indeed, exercise may help.

When should I start to exercise?

Try to start as soon as you are settled back at home – certainly within the first few days. You should have no angina and more energy after the procedure. However, you may feel stiff around your wound. Try to balance activity with rest.

What should I do?

Walking is a great way of exercising – you can go at your own pace, and walk as far as you like.

Choose a route that allows you to rest if you want to – a wall or bench to sit on. Bit by bit build up the length of your walk. As you feel fitter, try walking up a slight slope or walk more briskly. You might aim to be walking 1 – 2 miles (about 30 to 60 minutes) or even 3 to 5 miles by six weeks after your treatment. However, everyone is different – plan your exercise to suit you and your recovery.

How can I tell if I am exercising at the right level?

Your breathing will tell you if you are exercising in a way that will help your heart. Aim to exercise so that your heart rate goes up and you are slightly out of breath. You should still be able to talk. You should not feel exhausted. Slow down or take a shorter walk if you find that you are uncomfortable and very breathless.

What else can I do if I can't walk, or the weather is bad?

Try these home exercises. As with walking, start slowly and build up. To start with, try to repeat each exercise for about 30 seconds and build up. Warm up first by starting slowly and gently.

Exercise 1. Heel raises on the spot.

Hold on to the back of a chair or the wall. Slowly raise your body up onto your toes, and then lower back down.

Exercise 2. Marching on the spot

March briskly on the spot, raising your legs and swinging your arms gently.

Exercise 3. Sit to stand.

Sit on a firm stool or dining chair, not a soft armchair. Lean forwards and stand up. Sit down again.

Exercise 4. Step-ups.

Use the bottom step of some stairs. Place one foot fully on the step. Step up with the other leg to stand with both feet on the step. Then step down again.

Exercise 5 Free arm movements.

Slowly raise both hands and touch your shoulders. Gently raise your arms over your head and stretch up to the ceiling. Slowly lower them again. Breathe in as you raise your arms. Breathe out as you lower them.

Remember to:

- ◆ Warm up and cool down when exercising – let your heart rate gradually go up– start and finish at a gentle pace.
- ◆ Wear comfortable loose clothing.
- ◆ Choose activities that you enjoy.
- ◆ Rest if you need to.
- ◆ Stop if you experience chest pain.
- ◆ Avoid exercising straight after a meal – wait for two hours.
- ◆ Avoid exercise if you feel unwell.
- ◆ Recognise your own achievements and don't compare yourself with others.
- ◆ Keep it up!

The exercise you do at home will help develop your fitness. It will also help you to get the most from the cardiac rehabilitation programmes, (more about these later).

How can I keep myself fit for life?

Physical activity is something that you can do to keep yourself fit and well into the future. Try to keep up your exercise and activities. Here are some ideas about how to keep yourself motivated:

- ◆ Remind yourself of all the benefits you can get from exercise.
- ◆ Remember that exercise will protect your heart.
- ◆ It increases your energy levels and boosts your mood.
- ◆ It doesn't have to cost you anything – walking is a simple and good way to keep fit.
- ◆ Choose activities that you enjoy and find satisfying.

Where can I get more information about exercise facilities?

- ◆ Cardiac rehabilitation staff (see page 38)
- ◆ Local leisure centres (see page 37)
- ◆ Your local library, local papers, telephone directory
- ◆ Cardiac support groups (see page 35)
- ◆ Your G.P. surgery
- ◆ Other people who have had angioplasty

There is a list of useful contact telephone numbers and addresses at the back of this information pack.

“My own experience, having been operated on at the age of 76 and now approaching 80, is that I have been able to undertake all the exercises recommended in the booklet without any ill effects at all, and have in fact found them to be highly enjoyable.”

Activities and tasks – When can I?

- ◆ Remember, **everyone is different**.
- ◆ Aim to take things at your **own** pace and increase activities a bit at a time.
- ◆ Try to be as active as you can to help your heart recover.
- ◆ Build up your activities day by day. Do things that you enjoy.

Back to work	One week, depending on the nature of work and hours.
Bath/shower	Straight away
Bowls and golf	One week
Cooking	Straight away
Cycling/dancing/jogging	2 weeks. Excellent for your heart.
Decorating	One week
Driving	Do not drive for at least one week (4 weeks if you have had a heart attack or acute coronary syndrome). Inform your insurance company – your insurance may have to be altered. Do not drive and inform DVLA if you have a HGV or PSV licence or any other disqualifying conditions.
Fishing	One week
Gardening	Weeding – 1 week. Digging, grass mowing – 2 weeks.

Getting up and getting dressed	Straight away.
Having visitors	Any time, but do not be afraid to limit visitors and telephone calls. Protect your rest time.
Holidays and air travel	Leave flying for at least 4 weeks and check with your doctor. You must inform your travel insurance company. Wear antiembolic stockings to prevent clots forming in your legs. During long journeys, take regular opportunities to walk and stretch your legs.
Housework	Dusting, washing –up – 1 week Hoovering, changing beds, ironing – 1 week.
Lifting/pulling/pushing	Nothing heavy for 2 weeks or until wound has healed.
Night out	When you feel ready.
Sex	Whenever you feel ready after 3 days
Shopping	Newspaper – straight away. Supermarket trolley and carrying bags – 1 week.
Stairs	The day after treatment
Swimming	Excellent exercise. You can start swimming after one week. More vigorous swimming can start 2 weeks later.

If you have any questions about starting or increasing activities, speak to the cardiac rehabilitation staff or your doctor.

Your medicines

Medicines play a vital part in your recovery. They help to avoid further problems and control symptoms.

- ◆ It is important to take your tablets regularly. Follow the directions on the bottle. Don't let yourself run out of tablets.
- ◆ Painkillers are usually better at preventing pain, and not so good at dealing with severe pain. If you experience troublesome pain it is better to take painkillers sooner than to wait until the pain is really bad.
- ◆ If you take regular medicine, do not stop it suddenly. Your body needs time to adjust to managing without it.
- ◆ Do not take double doses if you forget to take your medicine.
- ◆ If side-effects are a problem, contact your doctor as soon as possible.
- ◆ It is a good idea to carry a list of your medicines in your jacket or handbag. If a doctor or dentist wants to prescribe something for you, they can check your list of current medicines. Show your list of medication at each consultation or treatment.
- ◆ Always let the pharmacist know what prescribed drugs you are taking if you buy anything over the counter.

Drugs to reduce the chance of blood clots forming

Aspirin Reduces the 'stickiness' of the blood.
 Take with or after breakfast. Take in smaller doses than you would take to relieve a headache.
 Side effects: can cause indigestion, nausea and vomiting.
 Stomach problems can often be overcome by taking with food.
 If trouble continues speak to your doctor.

Warfarin This is also a drug to prevent your blood from clotting. It is often used for people with heart valve trouble or with an irregular heart rhythm.
 Different people need different doses. You need regular blood tests at a Warfarin clinic when taking this drug. You will be given a yellow book to record these blood checks. Take this to

any appointment you have with the doctor or nurse. If your Warfarin level becomes too high you may notice that you bruise easily, get nose bleeds or even find blood in your urine or stools. If this happens report it to your G.P. or Warfarin clinic straight away.

Avoid aspirin when taking Warfarin unless told to do so by your consultant. Paracetamol is the safest painkiller to take if you are taking Warfarin. Drink only small amounts of alcohol. Check with pharmacist before buying any other medicines. Always tell your doctor that you are taking Warfarin if your treatment is being changed.

Clopidogrel Action similar to Aspirin and can be used instead of aspirin for some people. Usually used in addition to aspirin for a spell following angioplasty and stenting to reduce the risk of blood clotting. Check with your doctor about how long you need to take both drugs together. If you need a painkiller – try taking paracetamol.

Beta blockers These drugs reduce the effects of natural adrenaline and have been shown to reduce the risk of further heart attacks. They are useful in preventing attacks of angina, lowering blood pressure, and treating some sorts of abnormal heart rhythms (arrhythmias).
Beta blockers include: Atenolol (Tenormin), Metoprolol (Betaloc), Bisoprolol (Monacor), and Sotalol.
Beta blockers are not usually given to people with asthma. Beta blockers do have some side-effects which some people find troublesome, and these may disappear after a short time or if the dose is reduced. You may experience cold hands and feet, tiredness, sleep disturbances, impotence, dizziness and slow heart rate. Contact your doctor if you have bad side-effects. You should not stop taking these tablets suddenly.

Calcium This sort of medicine increases the blood supply to the heart

Channel Blockers	<p>and reduces the work of the heart by relaxing the arteries. They are often used to treat angina or high blood pressure. Common drugs from this group are: Diltiazem (Tildiem or Adizem), Amlopodine (Istin), Verapamil (Cordilox or Securon). Side effects include flushing, headache, dizziness, ankle swelling and constipation. See your doctor if these side – effects are a problem.</p> <p>Diltiazem and Verapamil may also be used for treating some sorts of abnormal heart rhythms (called arrhythmias)</p>
ACE Inhibitors	<p>Ace-inhibitors are used to treat high blood pressure and heart failure (when the heart is not pumping as effectively as it should), and sometimes are given after a heart attack. The treatment opens the blood vessels to allow the heart to pump more easily.</p> <p>These drugs include: Lisinopril (Zestril), Enalapril (Innovace), Captopril (Capoten), Perindopril (Coversyl), Ramipril.</p> <p>Side effects include dizziness, a metallic taste, skin rash and dry cough. Your doctor may arrange for your blood to be tested. This is to check that your kidneys are all right.</p>
Diuretics (Water tablets)	<p>Used to treat high blood pressure and heart failure. They get rid of extra water and salt in your urine, and relieve congestion in your circulation.</p> <p>You will need to use the toilet frequently for a few hours after taking these tablets so find a time of day that suits you.</p> <p>Unless your doctor has told you to restrict your fluid intake, make sure that you drink just enough to avoid feeling thirsty. These drugs are: Furosemide (Lasix), Bendrafluazide (Neonaclex), Bumetanide (Burinex), Co-amilofruse (Frumil).</p> <p>Side effects occasionally include light-headedness, muscle cramps, stomach upsets and impotence.</p>

Drugs used to treat angina

Nitrates

This sort of treatment works by opening your veins and arteries and by increasing the blood supply to the heart.

Nitrates relieve angina pain and treat heart failure.

Glyceryl trinitrate (GTN) is mainly used to relieve sudden attacks of angina pain. It is used as a tablet (to be placed under your tongue, not swallowed) or spray. It will usually relieve the pain in 5 minutes.

If the pain is not any better:

- Take 2 sprays or 1 tablet
- If no better after 5 more minutes, take another 2 sprays or 1 tablet
- If still no better after another 5 minutes, again take 2 sprays or 1 tablet
- If the pain is still there after a further 5 minutes **DIAL 999.**
- **DO NOT WAIT LONGER THAN 15 MINUTES.**

Use GTN to prevent angina when you are about to do something that usually brings on an angina attack. You can remove the tablet from your mouth later to reduce side-effects. GTN tablets are only effective for 8 weeks after you open the bottle. **The tablets or spray can be bought without a prescription if needed at short notice.**

Isosorbide mononitrate (ISMN)/Dinitrate: A slower release, longer acting nitrate. Usually taken twice a day – swallowed. Second dose should be taken before 4.00pm.

Nicorandil:

Used to treat angina, usually taken twice a day.

Side effects of nitrates: throbbing headaches, dizziness, light headedness, flushing of skin. These should wear off over time.

Cholesterol (lipid) lowering drugs

Statins These drugs lower the amount of cholesterol in the blood.

Fibrates They include: Simvastatin (Zocor), Pravastatin (Lipostat), Fluvastatin (Lescol), Bezafibrate, Atorvastatin.

Each health district will have a protocol or plan for the use of statins. Statins should be taken at night to be most effective. Side effects include nausea, headaches, diarrhoea or constipation, and inflammation of muscles (rare). You must tell your doctor of any unexpected muscle pain, tenderness or weakness.

Anti-arrhythmic drugs

These are drugs for controlling the heart rhythm and to treat heart failure. These include: Amiodarone (Cordarone X), Digoxin (Lanoxin).

If you take Digoxin, you will be on a dose to suit your weight. Your blood levels may be monitored.

Amiodarone can take a while to have its full effect. It is therefore given in large doses to start with, and is then reduced. You need to have a blood check every 6 months to check the effect of this medicine on your liver and thyroid. You may become more sensitive to sunlight, so cover up your skin on sunny days, or use sun block.

Side effects of these drugs include loss of appetite, nausea, sickness, headache, flushing and dizziness.

Pain killers

Paracetamol: A good pain killer for mild to moderate pain, and helps if you have a fever. It has very few reported side effects. You must not take more than the recommended dose. Take 1-2 tablets 4 times a day. No more than 8 tablets in 24 hours

Codeine/ Dihydrocodeine: These are opioid drugs helpful for moderate levels of pain. They are stronger than paracetamol, but

have more side-effects. They should be taken 4 times in 24 hours. Best taken with food to avoid nausea and vomiting. They can also lead to drowsiness and constipation so be careful about driving or operating machinery. Co-codamol is a mixture of paracetamol and codeine.

Non-steroidal anti-inflammatory drugs (NSAIDs): These include Ibuprofen, Diclofenac, Naproxen and Indomethacin. These are helpful for reducing inflammation and pain. Especially pain caused by muscle strain, bone pain and arthritis. They should be taken with food to protect your stomach.

Side effects: some of these drugs may cause stomach irritation and bleeding, nausea, diarrhoea, rashes and swelling of the face in some people. Some are available with a coating to protect your stomach (EC tablets). If you are allergic to aspirin, do not use these tablets. Do not take these drugs if you have asthma, raised blood pressure or heart failure, or if you are taking ACE inhibitor medication, unless advised to by your doctor.

Tramadol: Opioid painkiller, which effects your nervous system. It is used for moderate to severe pain. Side effects may include nausea and vomiting, constipation, low blood pressure and hallucinations in some people. Take great care – if driving or operating machinery.

It may help you to keep a record of your medication, how much and how often you take it and any comments you have about it. There is a chart at the back of this booklet to record your medication.

**“Keep smiling.
You’ve got to take life in both hands and
make it happen.”**

Managing stress and tension

It is common to experience some anxiety after heart treatments, especially on leaving hospital. Some people think that stress played a part in their heart problem. Family members often feel very anxious. Many people start to feel more confident over the following weeks. For others stress can remain a problem.

There is evidence that reducing stress and tension can help your heart recover. This section will explain more about what is happening to you when you feel stressed and anxious. It suggests things you can do for yourself to make you feel better.

What is stress?

If you find it difficult to get off to sleep at night, or are prone to worrying a lot, or have butterflies in your stomach, you may be experiencing some stress. Stress can be short-lasting, or can go on for months or years. Stress that wears us down can affect our health and wellbeing.

Stress changes our body chemistry – more adrenalin is in our blood. This leads to all sorts of normal signs and symptoms. You may experience:

- ◆ **physical** symptoms: pounding heart, breathlessness, sweating
- ◆ unhelpful **thoughts**: *I can't cope, I'll have a heart attack*
- ◆ difficult **emotions**: anxious, frustrated, low, irritable
- ◆ stress-related **behaviours**: rushing, overeating, avoidance

One symptom can lead to another in a cycle. So, for example, you might notice that you are breathless and tired after a walk. This might make you **feel** worried. You might **think** "I'm never going to get over this", "The slightest exercise makes me pant", and "What if this damages my heart?" These thoughts might make you anxious. To feel safer you may **avoid** going out alone, or stop your exercise programme. Exercise is a safe and important aspect of recovering from heart problems, but stress can get in the way. Pains, including chest pain, a racing heart and breathlessness are common signs of stress. The more stressed you are, the more uncomfortable the symptoms become. Following angioplasty or stent insertion, it is normal to be

more aware of and worry about your heart. The worry may leave you even more stressed and the symptoms may get worse.

Checking

Some people regularly check their pulse, or monitor their blood pressure to make sure that everything is all right.

This checking can be unhelpful. Instead of making you feel reassured, checking can make you more worried and more aware of physical symptoms.

Breathing

Even low levels of stress can speed up your breathing. Over-breathing can cause many of the symptoms already mentioned – feeling dizzy, tingly and uncomfortable, and even panicky.

Panic attacks

You might have a churning stomach, a racing heart, rapid breathing, dizziness, and sweating. You might have a feeling of terrible fear and a pressing need to escape or call for help.

These attacks are the body's normal reaction to a feeling of threat or danger. It prepares the body to respond quickly to danger. It is an unhelpful reaction if it is caused by everyday stress and worry.

It is a horrible feeling, but panic attacks will not do you any harm. In fact, the panicky feelings will pass even if you do nothing at all.

Here are some ways of dealing with stress and tension:

If you practise the following advice, you could find a great improvement.

Don't be put off if this doesn't happen straight away. It takes time to change your response to stress – weeks or months. If you know someone who will be supportive, tell them what you are trying to do. They can encourage you to take the time you need to practise new skills like relaxation.

1. Relaxation

Research evidence shows that people who practise relaxation improve their heart's recovery.

Try starting to practise relaxation every day. A relaxation tape may guide you. With practice you may find that you can recognise tension and relax in a few minutes or less.

There are all sorts of ways to relax. Try to slow down and relax completely at least once a day. Slow down and make time for a lazy bath, a walk, music, a good book or radio or television programme. If you allow yourself to relax you will get more done with the time left because you are refreshed. Try it and see.

2. Think about your breathing

Breathing techniques are a good relaxation method.

Try this:

- Lie down or sit with good support
- Place your hands on your stomach – your stomach should move out slightly as you breathe in, and drop back as you breathe out. Your chest should not move at all.
- Take a breath in, and then breathe out **slowly**. Allow yourself to feel heavier and more relaxed as you breathe out. Continue breathing gently to this rhythm for a few minutes.
- With practice you will be able go into this comfortable breathing style when you feel tense.

3. Exercise

Regular physical activity that you enjoy is a good way to reduce stress (and is very important for a healthy heart too). Walking, swimming, dancing, going to an exercise class – all sorts of activities are good for burning up adrenalin and relaxing tense muscles.

It may also help you feel more confident in yourself. Try to make time for some physical activity every day.

4. Plan your time

Are you someone who is always on the go, rushing, and restless? Here are some ideas:

- Take time to list all the tasks you have to do and write them down. Include time for relaxation and pleasure.
- Ask yourself how much each task really matters.
- Ask yourself whether it has to be you? Who else can help?
- Choose the most important tasks to do first. Leave the tasks that don't matter.
- Do one task at a time.
- If a task seems too big, try to break it into smaller tasks.
- Pace yourself. Stop rushing. Have a break. Relax. You will get on better if you feel relaxed and refreshed.
- At the end of the day, be pleased with what you have achieved.

You can learn to take life at a more relaxed pace and still achieve a lot.

5. Be aware of any unhelpful thoughts.

The way you think about things may be causing stress. You may be able to change your unhelpful thinking and feel better. Here are some ideas:

- **Avoiding negative thinking**

Dwelling on bad things will probably leave you feeling low. Try to balance these thoughts with the ordinary and good things that happen each day.

When things go wrong, try to be forgiving towards yourself and others. Ask yourself how much it really matters?

Worrying is not helpful, and does not prevent problems from happening.

Again, try to balance worries with thoughts about things that do go your way; remind yourself of how you have managed to cope in the past.

- **Avoiding 'should', 'ought to' and 'must' thinking**

Ask yourself who is setting these rules. Are you setting too high a standard?

Relax your standards if you are stressing yourself.

- **Unhelpful beliefs**

Your thinking may be influenced by mistaken beliefs about your heart and its effects on your life. For example: *I will always have a weak heart. I must be very careful or I might damage the artery. Even: I have a heart problem - my life is over - I'm useless now.*

These are common unhelpful beliefs that are false. Here are some questions to help you question and change unhelpful thoughts:

1. Is this a fact or just a thought?
2. Is there a more helpful way of thinking about this?

Remember, for the great majority of people, these sorts of heart treatments allow you to do **more**.

6. **Watch out for avoidance**

After your treatment you may feel cautious about getting back into the swing of things. Fears of causing problems might make you avoid exerting yourself, or going out much.

In fact, it is very important to develop your hearts strength. Gradual exercise is very important in recovery. As soon as possible, start getting out and about. You might have to build up slowly and pace yourself to start with. Going to a rehabilitation programme is a very good way to develop your confidence and return to your everyday activities.

If you are stuck, talk to your cardiac rehabilitation contact, or your GP, who may be able help

Sex is good for your heart.

If you have enjoyed a sexual relationship in the past, then it is **safe** to develop this again after angioplasty or stent insertion.

In fact, sex puts no more strain on your heart than taking a brisk walk. If you can manage walking without chest pain or being puffed out, then you are certainly fit enough to enjoy sex if you want to.

Heart problems occurring during sexual activity are very rare.

Here are some points that may help:

- ◆ There is no right or wrong time to start sexual activity following heart treatment– discuss it with your partner. Make a start when you feel physically and emotionally ready.
- ◆ Work towards intercourse gradually. Spend more time kissing, caressing, cuddling and with foreplay. This allows your heart rate to gradually increase. It should also help you both to develop confidence again.
- ◆ If you develop chest pain or become very breathless, stop and take your GTN spray or tablets. You can use GTN before sex if you think it helpful. Be careful with Nitro-glycerine patches or cream – these may rub off on your partner and give them a nasty headache!
- ◆ **You cannot take Viagra if you take nitrate medications** (GTN spray or buccal tablets, IMDUR, Isosorbide mononitrate or dinitrate) – it can lead to dangerous drops in your blood pressure. (As can anal sex - seek information from your nurse or doctor.)
- ◆ As you feel up to it, enjoy a full range of sexual activity.

- ◆ Problems with sex drive or sexual responses? Feeling nervous about resuming sexual activity may be the problem. A few initial disappointments are normal – don't be put off. Talk with your partner and aim to build up gradually. Some drugs may cause problems – speak to your doctor who may alter the dose or try a different brand of medicine. Don't be afraid to ask for help – there is often a simple answer. If difficulties continue, or if you have had long-standing trouble, your doctor can assess this and may refer you for specialist help.

Aim to return to your past sexual activity in your own time, and enjoy it!

Returning To Work

If you are of working age, returning to work will help you recover some normality into your life. Indeed, rehabilitation aims to help you return with greater vigour to your usual activities, including work. If you have any questions or concerns about getting back to work, speak to your doctor or rehabilitation nurse. Your local re-employment officer is another good source of help.

Financial help

If you need help in finding out about financial benefits, call the

Benefit Agency Customer Service Department

On Tel: 0191 226 6047

If you live outside Newcastle, this department can give you details of your local service.

Maintaining a healthy heart

Your angioplasty or stent insertion treatment has treated some of the problems caused by narrowed arteries. But these treatments do not change the reasons that you had narrowed coronary arteries in the first place. To get the best from your treatment it is very important that you do what you can to prevent further artery narrowing. Here are some ideas:

Healthy food for a healthy heart

Some changes in what you eat may be a good idea following heart treatment. Make time to think about your diet. Watching what you eat will help keep your arteries clear and help you stay well.

For a healthy heart it is sensible to:

- Eat a variety of foods.
- Choose foods lower in fat.
- Eat the right amount to be a healthy weight.
- Include starchy foods such as bread, rice, potatoes and cereals.
- Include oily fish every week
- Have five pieces of fruit and vegetables every day.
- Have regular meals and avoid snacks.
- Do not have sugary foods and drinks too often.
- If you drink alcohol, drink sensibly.

Eating less fat

Try to reduce the amount of fat in your diet. Whilst we need a small amount of fat in our food to stay healthy, most people eat more fat than needed.

Raised cholesterol levels put your arteries at much greater risk of becoming narrowed again. You may be taking drugs to lower your cholesterol level, but a healthy diet is also important. It is worth thinking about the sorts of fats and oils you eat. Different fats have different effects on blood cholesterol levels.

1. It is a good idea to use olive oil and rapeseed oil and spreads made from these. These contain *Mono-unsaturated fat*. This type of oil helps to lower the level of "bad" cholesterol in your blood.
2. Sunflower, corn and soya oil and spreads are made from *poly-unsaturated fat*. These lower the "bad" cholesterol, but in large amounts can also lower the "good" cholesterol in your blood. Use these spreads and oils with care.
3. Eat less animal fats (butter, cream, cheese) and processed foods (cakes, biscuits, pastry). These contain *saturated fat*. These fats raise the harmful cholesterol in your blood.

Spreads and oils contain all three types of fats, but in different amounts. The nutritional information on the food label can help choose the best one.

4. *Omega 3* fat is a type of polyunsaturated fat found in oily fish: mackerel, sardines, pilchards, herring, salmon and trout as well as in seeds and some nuts. It has a useful effect on the blood - it helps to make your blood less sticky. We advise you to include oily fish in your diet at least twice a week.

Ways to eat less fat:

- Use spreads and oils sparingly.
- Use semi-skimmed or fully skimmed milk.
- Cheese is high in fat - use stronger varieties and less of it. Grated cheese goes further than sliced cheese.
- Thick cut oven chips are lower in fat than other varieties.
- Natural yoghurt or fromage frais can be used in place of cream or mayonnaise.
- Eat less cake, biscuits, and crisps.
- Choose lean meat. Have smaller portions of meat.
- Do not fry food.

Starchy foods

You can eat *more* of these foods: bread, potatoes, breakfast cereals, rice, pasta, beans, pulses and other grains.

- Starchy foods are filling, low in fat, cheap and easy to prepare.
- They should form the basis of each meal; many people need to include bigger portions of these at mealtimes.
- Starchy foods are only "fattening" when high-fat ingredients are used in their preparation, e.g. cheese sauce on pasta.
- Crumpets, crispbreads, English muffins, bagels, fruit malt loaf and teacakes can be useful as snacks - go easy on the spread.

Enjoy more fruit and vegetables

It is recommended that we eat 5 portions of fruit and vegetables each day.

They can be fresh, frozen, cooked or raw.

1 portion of fruit = 100 grams (3- 4oz.)

- Try adding fresh or dried fruit to cereal.
- Have thick vegetable soup at lunch.
- Eat fruit between meals.
- Include 2 portions of vegetables with your main meal.

Using less salt

If you have high blood pressure using less salt may help.

- Many tinned and packet foods are high in salt, as are smoked foods - limit these in your diet.
- Use less salt in cooking and at the table.
- Herbs and spices can be used instead.
- Salt substitutes are not recommended.

Make a plan – What change in your diet could make a difference? Don't forget to let your family know. It may help to write yourself a reminder of any eating changes you would like to make.

Changes I would like to make to my daily diet	How I will go about it

Your weight

Try to keep your weight at a healthy level. If you are overweight your heart has to work harder.

The best way to lose weight is to eat a low fat, healthy diet, and to exercise regularly. Gradual weight loss is sensible – it is not wise to lose more than 1Kg. (about 2lb.) a week. Keeping a record of what you eat may help. If you find it difficult to lose weight, contact your nurse or doctor for advice and help.

Sensible alcohol use

Alcohol is fine if enjoyed in moderation. The current advice for the **maximum** amount of alcohol that you should drink is given in the box below. All alcoholic drinks are high in calories. Do not drink much alcohol if you are trying to lose weight or if you have high blood pressure.

Men: 21 – 28 units per week
Women: 14 – 21 units per week

1 unit = ½ pint of normal strength beer, or
1 glass of table wine, or
1 small sherry, or
1 standard single measure of spirits.

Stopping smoking

If you smoke: smoking is a big risk factor in heart disease. If you continue to smoke it will double your risk of further serious heart problems.

Everyone will advise you to stop smoking. Easier said than done? Help is at hand. Stop Smoking services provide:

- ◆ One-to one help
- ◆ Group support sessions
- ◆ Advice about nicotine replacement therapy for some people

Here are the telephone contact numbers for some local Stop Smoking services:

Stop Smoking services

Cumbria: 01900 324134

Durham: 0191 3336570

Gateshead and South Tyneside: 0191 451 6605

Newcastle and North Tyneside: 0191 2195111

Northumberland: 01670 813135

Sunderland: 0191 5656256 extension 45304

Your Blood Pressure

As your heart beats it pushes blood around your blood vessels. The pressure in these blood vessels is your *blood pressure*.

High blood pressure or *hypertension* is an important cause of heart problems. High blood pressure makes your heart work harder. It leads to narrowing of your arteries, including your coronary arteries. High blood pressure can also cause strokes, kidney failure and eyesight problems. However, having high blood pressure usually does not make you feel unwell. Most people do not have any symptoms to let them know that their blood pressure is too high.

High blood pressure can be due to:

- ◆ Being overweight
- ◆ Eating too much salt
- ◆ Drinking too much alcohol
- ◆ Not enough exercise
- ◆ Heredity – running in your family

What to do about high blood pressure:

1. Have your blood pressure *checked* regularly at your doctor's surgery.
2. If you have been prescribed medicine to lower your blood pressure, please remember to *take this regularly*. If you have

any concerns about this medicine, talk to your doctor. Do not stop taking this medication suddenly.

3. You can help to reduce your high blood pressure by:
 - Being more physically active and fit
 - Maintaining a healthy weight
 - Reducing the salt in your diet (see section on healthy eating – p 28)
 - Sensible alcohol use (see section on alcohol use – p 31)

Diabetes

People with diabetes have a higher risk of developing heart disease. If you have diabetes it is very important to monitor and control your blood sugar.

Physical Activity

Taking some daily exercise is an important way to keep you and your heart healthy. See the section on exercise on page 7.

“Build your exercise up gradually, increasing regularly and exercise every day. If you are offered a rehab group, take up this offer – it’s well worth it.”

Cardiac Rehabilitation Programmes

Cardiac rehabilitation programmes offer regular sessions of supervised exercise. This is tailored to the abilities of those who attend. There is a chance to learn more about your condition, ways to relax, and how to promote better health and protect yourself for the future. Programmes cover a number of health topics. Specialists provide information and answer questions on topics: healthy eating and lowering cholesterol, the importance of exercise, the difference between heart attack and angina, and information about your medication. The programmes are relaxed, sociable and fun.

Experienced nurses and a team of other health and leisure professionals run the rehabilitation programmes.

There are many good reasons for coming along to one of the programmes:

- There is good evidence that people who go to cardiac rehabilitation programmes recover better, and keep doing well.
- It is an opportunity to learn more about your condition, recovering and staying well.
- It is a good introduction to enjoyable exercise.
- Most people report that they grow in confidence.

Cardiac rehabilitation is now offered to people who have had angioplasty or stent insertion in most areas. You will be referred to your local rehabilitation service when you are discharged from hospital. You should expect to be offered a place on a programme about 4 to 6 weeks following your treatment. If you do not hear from the rehabilitation service please get in touch with the local coordinator. The telephone numbers are provided at the end of this information booklet.

Cardiac Support Groups

These are social meetings for people who have had heart problems and their relatives and friends. Activities vary from group to group. These may include talks, excursions, walks, social events and fund raising. There is the chance to talk to others who have had similar experiences. Some groups are involved in the planning of cardiac rehabilitation services. The following contact numbers and names were correct at the time of writing this booklet (but of course may change over time).

Alnwick Cardiac Support Group

Contact Jack Ronaldson on Tel. No. 01669 620373

Ashington Support Group

Contact Mandy Hall on Tel. No. 01670 816875

Berwick Support Group

Contact Phil Harris on Tel. No. 01890 820280 or Lesley Angell on 01289 356960

Carlisle Cardiac Support Group

Meet on the last Tuesday of each month at the Sands Centre at 7.30 pm.

Contact Judith Brannen or Hilary Quinn on Tel: 01228 814733

Freeman (Newcastle) Cardiac Support Group

The cardiac support group meets on the 4th Thursday of each month in St. Francis's Hall (situated behind the Freeman Hospital) at 7.30pm.

Contact Ian Murray on Tel: 0191 419 1048

Gateshead Cardiac Support Group

Contact Bob Harrison on Tel: 0191 410 2973

North Northumberland Cardiac Support Group

Contact Jack Ronaldson on Tel: 01669 620373 or Anne Robinson on Tel: 01670 534362

North Tyneside Cardiac Support Group

Meet on the second Tuesday of each month at various locations at 6.30pm

Contact: Ms Cath McBryde on Tel: 0191 293 4125

Royal Victoria Infirmary (Newcastle) Cardiac Support Group

Meet on the 4th Wednesday of each month at various locations.

Contact Lillian Henderson on Tel: 0191 2820133

Second Chancers (West Newcastle)

ⁱSocial meeting on the 2nd Wednesday of each month at 7pm at Cochrane Street Social Club, Benwell. There is also a thriving walking group.

Contact Reg Hogg on Tel: 0191 2747051

South Tyneside Cardiac Support Group

Contact Pauline Slattery on Tel: 0191 4837925

Community Heart groups Contact Susan Warren on Tel: 0191 4516367

Sunderland Cardiac Support Group

Contact David Wood on Tel 0191 5203238

Wansbeck Hospital Support Group

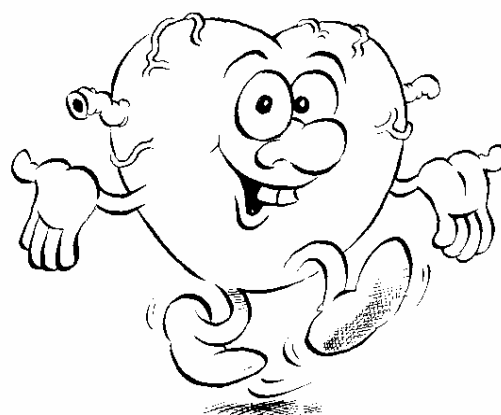
Contact Carol Ruddick on Tel. No.

01670 529389

West Denton 'Stepping Stones'

Contact Eddie and Sally Auld on Tel:

0191 242 2368



Newcastle and North Tyneside Leisure facilities

There are some excellent leisure facilities. It is worth calling in or telephoning to find out about facilities, classes, equipment and exercise referral schemes in your area. You could telephone the physical activity coordinator in your area to find out what might suit you (their telephone numbers are on page 44). Here are some of the Newcastle and North Tyneside facilities.

NAME OF CENTRE	ADDRESS	TELEPHONE
Lightfoot Centre	Wharrier Street Walker NE6 3BR	0191 265 5597
Newburn Leisure Centre	Grange Road Newburn. NE15 8ND	0191 264 0014
Scotswood Sports Centre	Denton Road NE15 7HB	0191 274 3716
Denton Park Swimming Pool	West Denton Way NE5 2QZ	0191 267 5628
East End Pool	Corbridge Road Byker NE61DY	0191 278 8444
Fenham Pool	Fenham Hall Drive NE49XD	0191 274 7210
Eldon Leisure	High Friars Eldon Square NE1 7XY	0191 232 5917
Jesmond pool	Regent Farm Road	0191 2812482
Gosforth Pool	Gosforth. NE3 3HD	0191 284 3696
City Pool	Northumberland Road NE1 8SE	0191 232 1981
Elswick Park and Leisure Pool	Beech Grove Road NE4 6SQ	0191 273 7801
The Parks Sports Centre	Howden Road, North Shields	0191 2006364
Blue Flame Sports Club	Whitley Road, Benton	0191 2700885
Tynemouth Pool	Beach Road, Tynemouth NE29 9PX	0191 2006192
Killingworth Sports Centre	Citadel East, Killingworth	0191 2008267
Wallsend Sports Centre	Rheydt Ave. Wallsend	0191 2007120
Whitley Bay Leisure Centre	Whitley Bay	0191 2008540

Useful Contact Numbers and Websites

NHS Direct	Tel: 0845 46 47
Health Information Line:	Tel: 0800 66 55 44
British Heart Foundation	Tel: 020 793 50185 www.bhf.org.uk
Royal Victoria Infirmary	Tel: 0191 2336161
Freeman Hospital:	Tel: 0191 2336161
Age Concern	Tel: 0191 2326488
Nexus Carebus	Tel: 0191 2320363
Department of Health website	www.doh.gov.uk
DVLA website	www.dvla.gov.uk
BBC Education Heart Special	www.bbc.co.uk/education/health/heart

Cardiac Rehabilitation Services:

Carlisle – 01228 814733

Gateshead – 0191 4820000

Newcastle Community Programmes – 0191 2724249

North Tyneside Cardiac Rehabilitation – 0191 2934184

Northumberland – 01670 782301

Freeman Hospital, Newcastle – 0191 2231399

Royal Victoria Infirmary, Newcastle – 0191 2820133

South Tyneside Hospital service - 0191 4548888

South Tyneside Community rehabilitation – 0191 4516367

Sunderland – 0191 5699159

Leisure centres in Newcastle and North Tyneside – see page 37

Stop Smoking Services – see page 31

Cardiac Support Groups – see page 35

Benefits Agency customer helpline – page 27

