

Tips for Family and Friends

Before a care decision is made:

- Consider your relative or friend's end of life values and preferences
- Stay informed and ask questions
- Encourage your relative or friend to be as independent and participate in as many decisions as he or she is able

With a health care provider, explore and discuss options:

- For drugs to help with shortness of breath and fluid retention
- Before you give your relative or friend any over the counter drugs (e.g. Advil) or natural health products
- For diet (e.g. low salt intake or dealing with low appetite)
- For dealing with fatigue (e.g. promote physical activity)

Your health is important too. If you are feeling overwhelmed seek support from the Manitoba Senior's Guide.

http://www.gov.mb.ca/shas/publications/docs/seniors_guide.pdf

Phone: (204) 945-6565

Toll-Free: 1-800-665-6565

What Should I Ask About?

- What are my or my relative or friend's biggest fears about his/her health?
- How can I help maintain my or my relative or friend's quality of life?
- What symptoms do I, my relative or my friend have that are related to HF?
- What are the options when I am or my relative or friend is no longer responding to the HF medications?
- What should I expect when I am or my relative or friend is dying?

Online Resources

- 1) **Heart Failure Matters:** interactive website that explains HF
www.heartfailurematters.org
- 2) **BC Heart Failure Network:** documents for HF self-care
www.heartfailure.ca/for-patients-and-families/co-management-resources
- 3) **American Heart Failure Society:** 10 modules (medications, end of life)
www.heartfailure.ca/for-patients-and-families/co-management-resources

The Palliative Approach for Advanced Heart Failure in Long Term Care

Version 1, September, 2017

A Resource for Residents, Family and Friends



What is a Palliative Approach?

This pamphlet was made to help persons with **Heart Failure (HF)** and their families know what to expect at the end of life so they can plan ahead. Talking about preferences early on is an important first step to a **Palliative Approach to Care**.

A Palliative Approach:

- Is for residents in long term care (LTC) with conditions that have no cure
- Shifts focus from prolonging life to maintaining quality of life
- Is an active approach that can start at **any stage of chronic illness**
- Is part of usual care
- Does not require a referral

A Palliative Approach includes:

- Treatment of curable conditions
- Pain and symptom management
- Social and spiritual support

For more information, please visit:

www.virtualhospice.ca

www.advancecareplanning.ca

What is HF?

HF is a **chronic progressive life-limiting illness**. This means that symptoms worsen over time and may affect how long one lives. HF:

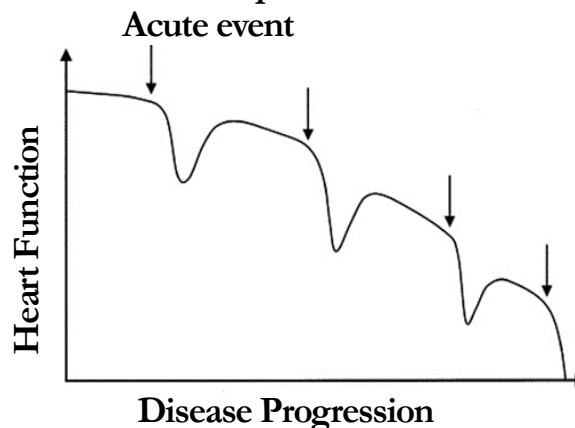
- Occurs when the heart is not pumping as strongly as it should
- Causes fluid to back up from blood vessels into the lungs and legs

Residents with HF:

- Will have bad days (more symptoms) and good days (less symptoms)
- Can live for months or years

How does HF progress?

It is difficult to predict how long someone with HF may live, so it is good to **hope for the best and plan for the worst**.



Living with HF



The progression of HF cannot be reversed and there is no cure. Being well-informed will help you to make care decisions if you are able.

Talk to your or your relative or friend's health care provider if you notice:

- More weakness or tiredness (fatigue)
- More shortness of breath with little activity or at rest
- Weight gain (fluid retention) or weight loss (nausea or loss of appetite)
- More swelling in lower legs (edema) or in abdomen (ascites)
- Coughing (with or without sputum) that may worsen when lying down
- Rapid or irregular heart rate at rest
- More problems with cognitive function