



TAKE HEART



**Beta-Blockers
for Heart
Failure**



**Low Salt
Recipe**



Gotcha Boccia

A Day in the Life...

Hi, my name is Susan Haddow and for the last 4 years I have been working as a physiotherapist in the Skye & Lochalsh area. My role is very varied and includes seeing musculoskeletal out-patients, providing rehabilitation within the ward setting and in people's own homes. I also provide cardiac and pulmonary rehabilitation in both class and one-to-one sessions.

My role enables me to meet people of all ages, from all walks of life who have been born and raised locally, or moved here from other parts of the UK and beyond. Everyone comes with an interesting background and story to tell.

However, living in a rural area does have some disadvantages for people – there is not much of a transport network here. This means that people can find it difficult to attend classes, or the physiotherapy department, if they do not drive themselves or have help from family members or friends. Options to move onto something else after completing cardiac or pulmonary rehabilitation are also more limited, compared with a more urban setting. This is why the work CHSS is doing here is so important. Having a locally-based community support worker enables patients to access any information



they may need about varying conditions and helps ease stress.

We want to build on this through events like the Education Event below. Come along and **have your say** about the support services you'd like to see. Peer support groups, for example, would allow people to come together to share experiences and might even encourage them to plan activities outwith a 'traditional' rehab setting.

Living & working in such an idyllic setting does have its advantages though – rain, hail or shine the surrounding scenery is stunning. I often think our cardiac rehab class in Kyleakin should win a prize for class with the best view... with the sea, Skye Bridge & mountains in the background it provides therapy on its own!

Our first Patient Education Evening in Skye and Lochalsh will take place at Skye Camanachd Social Club in Portree on Wed 28th Sept at 7pm. Speakers include Prof Stephen Leslie, Consultant Cardiologist. It would be lovely to see you there. Details from:

Douglas MacDougall, CHSS Community Support Worker
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BETA-BLOCKERS FOR HEART FAILURE

Q: Who should take a beta-blocker?

A: The latest heart failure guideline from the Scottish Intercollegiate Guidelines Network (SIGN) recommends that everyone with heart failure and reduced ejection fraction (when the heart does not pump enough blood to the rest of the body) should be started on beta-blocker treatment as soon as their heart failure is stable.

The beta-blockers most commonly used to treat heart failure in Scotland are bisoprolol, carvedilol and nebivolol.

Q: Why does SIGN recommend this?

A: There is good evidence that beta-blockers can improve the symptoms of heart failure, reduce hospital admissions due to worsening heart failure, and increase survival.

Q: Is there anyone who shouldn't take a beta-blocker?

A: People who have asthma should not take beta-blockers, as they can trigger an asthma attack. People who have chronic obstructive pulmonary disease (COPD) can take a beta-blocker, but will need to be monitored closely.

Other people who should not take beta-blockers include people with heart block (an abnormal electrical activity of the heart), people with unstable heart failure, and people with low blood pressure (hypotension).

Q: How are beta-blockers taken?

A: When your heart failure is stable you will be started on a low dose of beta-blocker. The dose will be increased gradually every few weeks until you reach the recommended dose, or the highest dose that

you can tolerate. You will need to keep taking beta-blockers in the long term, so it is important that you feel comfortable taking the dose you are prescribed.

Q: Are there any side effects?

A: Side effects are most common when you start a beta-blocker or when the dose is increased. Common side effects include:

- Tiredness or fatigue
- Cold hands and feet
- Dizziness or light-headedness – be careful if you operate heavy machinery or drive for a living
- Problems for men in getting an erection (impotence)

If you think you are experiencing side effects, speak to your doctor as soon as possible.

Q: What else should I know?

A: When you start taking a beta-blocker, your symptoms may temporarily get worse. However, it is important that you keep taking them as they will improve your heart failure in the longer term. It may take 3-6 months for you to notice the benefit. Weighing yourself every day (before dressing, after going to the toilet and before eating) is a good way to tell if your symptoms are getting worse.

REMEMBER: Do not stop taking your beta-blocker without speaking to your doctor or heart failure nurse first.



To celebrate the Rio Olympics, here's a quiz to test your sporting knowledge....

1. How often are the Olympic Games held?
2. Where will the next Summer Games take place?
3. Which country does Usain Bolt represent?
4. Who carried the Team GB flag at the opening ceremony?
5. How far do you run in a marathon?
6. When were the Rome Olympics held?
7. Can you name three sports with referees?
8. What equipment do you need to play badminton?
9. Dumb-bells, snatch and jerk are used in which sport?
10. What happens in a velodrome?

(Answers on p4)

Low Salt Recipe CAMELISED ONION MASHED POTATO



CAMELISED ONIONS MAKE A DELICIOUS ADDITION TO MASHED POTATO.

**SERVES: 6 • PREP TIME: 20 MINUTES
COOKING TIME: 25 MINUTES**

INGREDIENTS

- 1.2kg potatoes, peeled and chopped
- 1 tablespoons olive oil
- 2 large onions, peeled and thinly sliced
- 50g low fat spread
- 100ml semi skimmed milk or to taste
- Ground black pepper

METHOD

1. Rinse the chopped potatoes under cold water. Bring a large pan of water to the boil and add the potatoes. Boil gently for 20 minutes or until tender.
2. While the potatoes are cooking, caramelise the onions. Heat the olive oil in a non-stick frying pan over a low heat. Add the onions and cook very gently for about 20 minutes, stirring occasionally, until they are dark brown.
3. Drain the cooked potatoes. Return them to the pan. Add the low fat spread, milk and black pepper. Mash the potatoes. The more you mash them, the lighter and fluffier they will be.
4. Stir in the caramelised onion and serve.

SUGGESTIONS

For a different flavour, stir 2 tablespoons of balsamic vinegar into the onions towards the end of their cooking time.

See more at: www.actiononsalt.org.uk

SAVE THE DATE – SATURDAY 5TH NOVEMBER – PATIENT EDUCATION DAY

The Scottish Heart Failure Hub will run the first ever Scottish-wide heart failure patient and carer event **‘Ensuring Success for people with Heart Failure’** at Dunblane Hydro between 10.am and 3.30 pm on 5th November 2016.

This free event will include lunch and refreshments. It will feature presentations from leading experts in different aspects of living with heart failure, practical workshop sessions and a panel session giving you the opportunity to ask questions and influence policy. The event is supported by a number of heart charities, including CHSS.

Find out more and register at: www.eventbrite.co.uk (ensuring success for people with heart failure), or phone Janet Reid, Heart Failure Hub Co-ordinator on 0131 242 1863.

RESEARCH UPDATE

Here is a brief guide to what’s just been published and on the horizon:

RECENT STUDIES:

Leadless pacemaker safe with MRI. Research into whether a new Medtronic leadless pacemaker is safe to use with magnetic resonance imaging (MRI). This case study found that there were no MRI related complications. Recently published in the Heart Rhythm Journal.

[www.heartrhythmjournal.com/article/S1547-5271\(16\)30493-3/abstract](http://www.heartrhythmjournal.com/article/S1547-5271(16)30493-3/abstract)

Anaemia and Iron deficiency linked to increase in mortality in individuals with Heart Failure. Specific causes of anaemia were difficult to identify and varying definitions of anaemia made the outcomes difficult to assess. Results can be used to inform future investigations into effective treatment of anaemia and iron deficiency.

www.medpagetoday.com/Cardiology/CHF/58844?xid=nl_mpt_DHE_2016-07-01&eun=g427504d0r&pos=1

Does Home Oxygen Therapy (HOT) in the treatment of intractable breathlessness associated with Heart Failure improve quality of life?

Initial results showed that (HOT) prescribed for 15 hours per day and used around 5.4 hours per day, has no impact on quality of life (as measured by the MLWHF questionnaire score at 6 months). Further research is needed to clarify results.

www.journalslibrary.nihr.ac.uk/hta/volume-19/issue-75#abstract

WATCH THIS SPACE:

REVIVED Trial – Researching how Percutaneous Intervention (PCI) and optimal medication therapy (OMT) can improve survival in individuals with poor left ventricular function and coronary artery disease. It will follow participants following intervention and will look at hospitalisation and survival rates.

<http://revived.lshtm.ac.uk/>

Iron-man – A big name study examining how Iron replacement therapy may have a role in patients with heart failure and Iron deficiency. It will compare Intravenous Iron replacement treatment with standard therapy.

<http://clinicaltrials.gov/ct2/show/NCT02642562>

SPRING PATIENT & CARERS MEETING

The turnout for the Spring meeting was excellent. Mandi Smith, Lead Heart Failure Nurse for NHS Highland told us about heart failure medication and new ones coming on stream. This was followed by a lively question and answer session. Connecting Carers joined us, providing answers to individual queries. The social aspect of the meeting was as vibrant as always.

I am very much looking forward to our next meeting on 7th September. I hope that a representative from Police Scotland will come and talk to us about topics like keeping safe.

If you would like more information about this or any future meetings or if you have any suggestions for speakers, please don't hesitate to contact June Macleod (details below).

Gotcha Boccia, by the beach!

June Macleod reports on a recent C&RSS Nairn Group event

The weather wasn't great, the traffic was significant but I was still in a really great mood! Why I hear you ask? Well, today was the day I picked up a mini bus, kindly made available to us by Sight Action, in order to embark on an epic adventure! I collected clients from Inverness and took them to Nairn to play Boccia together. I was sooooo excited (and had been since I had passed my MIDAS test earlier that month). My first pick up was at noon and I continued to collect clients on my way through to the Nairn Community Centre.

We were quickly thrown in to a mini Boccia tournament, hosted by Roy Anderson, LGOWIT Community Networker for Inverness and Nairn. It was just great to see people enjoy a game, with a little bit of competitiveness and a lot of encouragement (even from the opposition!) and a huge amount of fun! I am a big fan of Boccia, it is such an entertaining and inclusive game. As the daughter of one of our clients said, "my mum told me how much fun she had and that it is the first time in years she has been able to join in fully with a game". That statement sums Boccia up in a nutshell.

The drop offs were as much fun as the pick-ups, with lots of chatter and comments about the passing scenery and pretty gardens. My final drop off was at 6pm and I finally got home just before 7pm! Long day? Oh yes! Worth it? ABSOLUTELY!! Roll on the next bus trip and a big thank you to Sight Action for helping us to make it happen!



EDITORIAL CONTACT DETAILS

Your local co-ordinator is:

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Answers
1. Every four years; 2. Tokyo; 3. Jamaica; 4. Andy Murray; 5. 26 miles; 6. 1960; 7. football, rugby, boxing; 8. racket, net, shuttlecock; 9. weight lifting; 10. cycling

We try to be as up-to-date as possible with our newsletter, but sometimes we are unable to withdraw copies if a bereavement has happened close to mailing, or we are unaware of it. We would like to offer our apologies if this has happened to you. Please let us know and we will amend our records.