



British Heart
Foundation

**Caring for
someone
with a heart
condition**

John Stewart

**FIGHT
FOR EVERY
HEARTBEAT**

bhf.org.uk



ABOUT THE BRITISH HEART FOUNDATION

As the nation's heart charity, we have been funding cutting-edge research that has made a big difference to people's lives.

But the landscape of cardiovascular disease is changing. More people survive a heart attack than ever before, and that means more people are now living with long-term heart conditions and need our help.

Our research is powered by your support. Every pound raised, every minute of your time and every donation to our shops will help make a difference to people's lives.

If you would like to make a donation, please:

- call our donation hotline on **0300 330 3322**
- visit **[bhf.org.uk/donate](https://www.bhf.org.uk/donate)** or
- post it to us at BHF Customer Services, Lyndon Place, 2096 Coventry Road, Birmingham B26 3YU.

For more information, see **[bhf.org.uk](https://www.bhf.org.uk)**

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ABOUT THIS BOOKLET

If you live with, or are caring for, someone who has a heart condition, you may find this booklet helpful. It may also be useful for other members of your family and for friends. It looks at:

- what has happened to the person you are caring for
- how to help them develop a healthy lifestyle, to try and reduce their risk of further heart problems
- how to help them to get back to normal and encourage them to be independent
- financial help for carers, and carers' assessments
- the emotional aspects of caring for someone and how to cope if things are difficult, and
- who to contact if you need help or support.

Whatever your circumstances, we hope this booklet will give you ideas and information to help you cope with your situation and plan for the future.

This booklet does not replace the advice that health professionals may give you or the person you are caring for, but it should help you to understand what they tell you.

ARE YOU A CARER?

05

You may have just taken on the role of carer, or you may have been caring for someone with a heart condition for a while. The person you look after may get his or her independence back soon and your role as a carer may be temporary. Other people may need longer-term care.

The person you look after may have had a **heart attack**, or may have been diagnosed with **angina**. These are both forms of **coronary heart disease**. Or they may have **heart failure**, or another type of heart condition.

Angina and heart attacks

Coronary heart disease begins when your coronary arteries (the blood vessels that supply your heart muscle with oxygen-rich blood) become narrowed by a gradual build-up of fatty material within their walls. This condition is called **atherosclerosis** and the fatty material is called **atheroma**.

Over time, your arteries may become so narrow that they cannot deliver enough oxygen-rich blood to your heart muscle. This can cause **angina**. Angina is usually a pain or discomfort in the chest, but it can also cause shortness of breath.

If the narrowed coronary artery suddenly becomes blocked, usually by a blood clot, part of the heart muscle will not get enough oxygen-rich blood. This is called a **heart attack**.

 For more information about angina and heart attacks, see our booklets **Angina** and **Heart attack**.


Heart failure

Heart failure happens when your heart muscle becomes less efficient at pumping blood around your body. One of the most common reasons for this is heart muscle damage caused by a heart attack.

The symptoms vary from person to person, but the main symptoms include unusual tiredness, shortness of breath, and swollen ankles and feet.

Other heart conditions and illnesses

The person you look after may have another type of heart condition, or they may have had a stroke. We have a wide range of resources about different conditions and treatments. See page 62 for more information on these.

 For more information on heart failure, see our booklets **Heart failure** and **An everyday guide to living with heart failure**.

When someone is first diagnosed with a heart condition

Many people feel shocked and frightened when their partner, relative or friend is diagnosed with a heart condition. Whatever type of heart condition they have, it can help to find out as much as you can from the doctor, cardiologist or nurse, so that you can prepare for the future.

If someone is admitted to hospital suddenly or as an emergency, they may have some tests and treatment very quickly. This whirlwind of activity can be frightening. At this time, the main focus of attention has to be on the patient. As a relative or friend you may feel excluded from what is going on and sometimes you may need to wait a while before you can get much information. Once the person is a bit more stable, you will be able to ask questions and find out about their condition.

The person you are caring for may need to have various tests, and perhaps treatments such as medicine or surgery. We explain more about these below. To find out more, talk to the person's doctor or nurse.

Tests

A doctor or nurse may arrange further tests for the person you're looking after, to find out more about the condition of their heart. If you don't understand something about a test, ask for an explanation that you find easy to understand. This can help ease your worries.



For more information about tests:

- see our booklet **Tests**
- look at the short films about tests on our website bhf.org.uk, or
- phone our **Heart Helpline on 0300 330 3311** and talk to one of our **Cardiac Nurses**.

If the person needs treatment

It's natural for anyone needing heart treatment to feel concerned or anxious. Their carer and family may be worried too. It's important that you both understand what to expect when the person goes into hospital and during the recovery period. If you have any questions or if anything is worrying you, talk to the doctor or nurse.

Waiting for heart surgery or a procedure

Most people who need to have surgery or a procedure will go on a waiting list. Some waiting lists are shorter than others, so the treatment may be scheduled within a few weeks, but for others the waiting time could be a few months. Some people need urgent treatment and may be admitted to hospital straight away.

Waiting for an operation or procedure can be a difficult time. Some people find it hard to get on with life and plan for the future, particularly when a date has not yet been set.

The hospital may ask the person to go to a **pre-admission clinic** before the operation, to have some tests that need to be done before they have

the surgery or procedure and to get information about what is going to happen when they are in hospital. This is a good time to ask questions – such as where it will be performed and how long it will take – and to ask about the risks and benefits. You, the carer, may find it helpful to go along to the pre-admission clinic too. At this clinic, the hospital staff may also assess the person's care needs and organise any extra help they may need when they go home. If you think you may need extra help at that time, let them know.



For more information on heart surgery, see our booklet **Heart surgery.**

For details of other treatments, such as angioplasty or pacemakers, see the booklets in our **Heart Information Series. There is a list of booklets on page 64. You can also find information on our website at bhf.org.uk**

Questions you may want to ask

There may be many thoughts going round in your head. Below are some of the questions that carers may want to ask.

- Why does the person I care for have a heart condition?
- Will their condition improve or will it get worse?
- Will they need any more tests or treatment?
- What medicines is he or she taking, and what are the possible side effects?
- Is it likely that the person I am looking after will have another heart attack (or more angina)?
- What should I do if I think the person I am looking after is having a heart attack, or is unwell?

- How much physical should they be doing, and how often? And what sort of activities can they do?
- Can they go back to work?
- Is it OK to go on holiday?
- Is it OK to have sex?
- How often will the person I am looking after need to go for appointments at the hospital or with the GP?
- Will anyone visit us at home?
- What help is available?

You might find it useful to make notes of what the doctors or nurses tell you.

**Caring for someone
can be immensely
rewarding, but physically
exhausting and
emotionally draining too.**

Few of us are trained to be carers, so it can be difficult and stressful at times – both for you as the carer, and for the person you're caring for.

Caring for someone can be not only physically exhausting, but emotionally draining too. Some carers will juggle working, as well as home and family life, with looking after someone. And this can be harder for those carers who may have their own health problems too.

However, caring can also be immensely rewarding. Many carers want to look after their loved ones to try and make their life better and more comfortable. Carers can make a big contribution to the recovery and the life of the person they are looking after.

Your own life may have changed just as much as the life of the person you care for. You may have had to adjust your routine and change your working arrangements. Your social life or hobbies can also be affected.

A confusing mix of emotions is quite normal. You may feel love and concern, mixed with sadness, anger and guilt. You may also feel frustrated that life is not the same as it was before, and worry that it may never be the same again. You may sometimes feel isolated or frightened, and can feel that nobody listens to you or understands how you feel.

Talking things through can help you to keep your worries in proportion. Talk to the person you care for about how you feel, as this can be comforting and helpful to you both. You may also find it helps to talk to a friend or another member of the family. For more about the emotional aspects of caring, see page 40.

To continue in your caring role, you also need to take care of yourself, so make sure you make time for yourself too.

Some of us are not always very good at asking for help, or accepting it. But asking for or accepting someone's help is not a sign of weakness. Offering help is one way that other people show their affection and support for you and the person you care for.

Everybody seems to know someone who has a heart condition, and they often want to tell you all about it. Sometimes this can be useful – to see how other patients and carers have coped. However, every person is an individual, so what worked well for one person may not be relevant to you or the person you are caring for.

Here are a few tips for carers.

- Try not to let the person's condition take centre stage all of the time.
- Try to make time for yourself, and keep doing the things you want to do.
- Tell your GP about your caring role, because it's important to look after your health too.
- If you're working, tell your employer that you are now caring for someone. If you have been an employee with them for at least six months, they have to consider any request you may need to make for flexible working.

- If you are feeling down or depressed, make sure you get some help, by talking to someone about it. This could be a friend or family member. Or for professional help, speak to your GP or a counsellor.
- Try to accept help when it's offered.
- Learning more about the person's heart condition can be very reassuring. See our website **bhf.org.uk**
- Get a benefits check to make sure that you, the carer, as well as the person you are caring for, are getting all the financial support that you are entitled to. For more on this, see page 35.
- Think about asking for a carer's assessment. Your local authority has a responsibility to assess a carer's needs. We explain more about this on page 36.
- Get support. Find out if there are any carers' organisations nearby. See page 67.

Many carers want to know what they can do to help the person they look after to reduce the risk of any future heart problems. This section explains what they can do, and how you can help and encourage them. If you, the carer, follow this advice yourself, it will help to keep your heart healthy too.

Encourage the person you are looking after to do the following.

- **If they smoke, stop smoking.**
- **Eat a healthy, balanced diet.**
- **Do regular physical activity.**
- **Keep to a healthy weight and body shape.**
- **Drink within the recommended alcohol limits.**

It's also important that the person you're caring for has their blood pressure and cholesterol checked by their GP or nurse. They will tell you how often this needs to be done.

Stopping smoking

Stopping smoking is the single most important thing a person can do to improve their heart health. If the person you are caring for is a smoker, they can ask their doctor or nurse for information, advice and support about ways to help them stop smoking. Or they can try one of the following helplines or websites.

- **QUIT**
www.quit.org.uk
0800 00 22 00
- **Smokefree**
www.nhs.uk/smokefree
0300 123 1044

 For more information, see our booklet **Stop smoking.**

Eating a healthy, balanced diet

Eating a healthy, balanced diet can help to protect your heart. Following the advice below can help both you and the person you care for to look after your heart health.

Fruit and vegetables

Eating a healthy, balanced diet which includes at least five portions of a variety of fruit and vegetables a day, will make sure that you get a combination of vitamins and minerals to help keep you healthy.

Fats

Cutting down on saturated fats and choosing healthier fats can help to reduce your cholesterol and protect your heart. Saturated fats are found in foods such as butter, cheese, sausages and fatty meat products.

Salt

People who have a lot of salt in their diet are more likely to have high blood pressure. Most people eat far more salt than they need. It's recommended that adults have no more than 6 grams of salt a day – that's about one teaspoonful.

Cut down on salt by not adding salt to your food, and using alternatives such as herbs and spices when cooking. And use food labels to help choose foods that are low in salt.

 **For more detailed information, see our booklets *Eating well* and *Reducing my blood cholesterol*.**

Physical activity

Regular physical activity has many benefits, both for the heart and for general wellbeing. If the person you look after has recently been in hospital, physical activity can also help with their recovery.

They may be invited to take part in a **cardiac rehabilitation** programme. The aims of cardiac rehabilitation are:

- to help the person recover and get back to as full a life as possible
- to promote health and reduce the risk of further heart problems, by making sure the person fully understands their heart condition, and

- to help improve fitness, and confidence for everyday life.

If you go along to the programme with the person you look after, it can help reassure you about their recovery. It can also give you a chance to meet other carers while the person is taking part in the programme.

It is recommended that adults aim to do a total of at least 150 minutes (two and a half hours) of moderate-intensity physical activity a week.

One way of doing this is to do 30 minutes' activity on five days each week. 'Moderate-intensity' means that the activity should make you breathe more heavily than usual and feel warm, but you should still be able to talk. Examples include brisk walking or cycling.

Some people with a heart condition may not be able to do as much as 30 minutes a day, and some people may be limited due to mobility problems or difficulty walking. However, it's still important that they try to be as active as possible. Even a small amount of activity can help, and is better than doing none at all.

It's important that the person you care for speaks to their nurse, doctor or other health professional about what types of activity are suitable and safe for them to do, how much activity they can do, and how to increase their level of activity to build up their fitness.

If the person you look after isn't used to doing activity, or hasn't been active for a while, or is recovering from a heart attack or heart surgery, it's important that they build up their activity level gradually.



For more information on physical activity for people with a heart condition, see our booklets *Get active, stay active* or *Cardiac rehabilitation*.

Physical activity – safety tips

The following advice applies both to the person you're caring for, and to you, the carer.

- Build up your physical activity level gradually.
- Make sure you warm up before and cool down after each period of exercise. That means starting slowly for the first few minutes and building up gradually, and at the end, spending some time slowing down gradually.
- Avoid doing activities after a large meal, or in very hot or very cold temperatures, or at high altitudes.
- Speak to your GP before you start exercising, especially if you have a long-term illness, or have high blood pressure, or are taking medicine, or if you're not sure about the level of exercise you should be doing.
- Stop exercising if you feel tired, breathless or dizzy, or if you have pain or feel unwell. If your symptoms continue while you are resting, get medical attention immediately.

Looking after your own health will help you cope with being a carer.

Keeping to a healthy weight and body shape

People who are overweight or obese, and in particular those who carry too much weight around their middle, have an increased risk of developing coronary heart disease or of having a stroke.

Keeping to a healthy weight and body shape can help to protect against diabetes, high blood pressure and high cholesterol levels.

If someone is overweight, the best way to lose weight is through a combination of physical activity and eating a healthy diet.



For more information on how to lose weight, see our booklet **Facts not fads: Your simple guide to healthy weight loss.**

Alcohol

If the person you look after drinks alcohol, or if you do, make sure to drink within the recommended limits and avoid binge-drinking. For anybody who drinks alcohol, it's important to keep within these guidelines:

- Men and women shouldn't drink more than 14 units of alcohol each week.
- You should have several alcohol-free days each week.
- If you drink as much as 14 units a week, spread this out evenly over three days or more.

These guidelines apply whether you drink every day, once or twice a week, or just occasionally.

1 unit of alcohol =



- a small glass (100ml) of wine (10% ABV [alcohol by volume])



- **or** a pub measure (25ml) of spirits



- **or** half a pint (about 300ml) of normal-strength lager, cider or beer (for example, 3.5% ABV).

If the person you care for has recently been unwell or has been in hospital, or takes any medicines, and if they drink alcohol, they should ask their doctor what is a safe amount of alcohol for them to have.

There may be some benefits to heart health from moderate drinking (1 or 2 units a day). However, there are healthier ways to look after your heart. Drinking more than the recommended limit on a regular basis can lead to heart muscle damage, high blood pressure, stroke and some cancers.

Alcohol is high in calories too, so it can lead to weight gain.

ANN'S STORY

Ann Danks, 51, looked after her daughter following heart surgery.

“My daughter Leanne is 33 and was born with a heart defect. She had surgery when she was five. Last year she had open heart surgery to repair her mitral valve as it got worse after her son, Harley, was born. You worry they might not come back, but the staff explained everything and the care was brilliant.

She came home from hospital five days later. I looked after her for three weeks, as her fiancé was on nights and she couldn't lift Harley. I helped her wash and dress, including putting those special stockings on, and did the cooking. She had to go back into hospital for a couple of days but then, thankfully, she started to recover day by day, doing more walking around the house.

Luckily, my employer at the time was really good. They let me have time off. I even used up all my holiday but it was worth it. Leanne's a little fighter. She's just started a new job.”



Regaining independence and getting back to normal are important factors in recovering from, or living with, a heart condition. Try to encourage the person you are caring for to be as independent as possible, and offer support so they can gradually do more things on their own.

Try to let the person you care for be the judge of what their limits are. Being overprotective can sometimes prevent the person becoming independent. However, if you are concerned about certain activities, speak to them about it and remind them about the advice their health professionals have given them.

Noticing changes in the person you care for

When someone has been diagnosed with a heart condition, they can often experience a mixture of feelings and emotions. For example, they may feel relieved that they are alive, sad about the life they have left behind, and worried about the future.

They may also have good days and bad days, and may find it difficult to take responsibility for certain things – such as taking their medicines. They may become frustrated, angry or irritable, or unable to share their feelings with you, or they may deny that anything has

happened. Feeling low and mood swings are common in people who have been unwell.

It can be very hard to deal with and accept these changes in the person you are caring for, particularly as you may also be going through a difficult time yourself. Fortunately, in many cases these changes are only temporary and things eventually return to normal. If the problems continue and you think the person you are caring for is not coping well or not getting any better, encourage them to speak to their GP.

If the person you're caring for is your partner, you may have concerns about your sex life. Many people with a heart condition, or who have had treatment for a heart condition, are able to continue to enjoy a healthy sex life.

People with a heart condition and their partners are often understandably anxious about how sex may affect the heart. Like any other physical activity, having sex can temporarily increase the heart rate and blood pressure. This increases the work of the heart and, in people with coronary heart disease, may occasionally lead to symptoms such as shortness of breath or chest pain. However, sex is just as safe as other equally energetic forms of physical activity or exercise.

If the person you care for is your partner and they've had a **heart attack**, it's important to remember that most people can return to having sex after a heart attack.

There are no strict rules about when you can start having sex again, but you should wait until your

partner feels well enough. If you don't yet feel ready to start having sex again and are not sure how long you should wait, get advice from your partner's doctor or cardiac rehabilitation team.

If your partner has had **heart surgery**, you can have sex as soon as he or she feels they have recovered. For most people this is within a few weeks, but some people prefer to wait a bit longer. Be careful not to put the chest wound under too much pressure.

If you're not sure whether it's safe for your partner to have sex, get them to talk to their GP or cardiac rehabilitation team about this.

Loss of sex drive is not uncommon after illness. Some men may experience impotence (when they are unable to get or maintain an erection). This may be the result of the emotional stress, or the effect of the heart condition. Sometimes it can also be the result of taking certain medicines, including beta-blockers, which can affect sex drive, especially in men. Or it may be the result of diabetes or a condition which affects the circulation. If you, the carer, or your partner is

having difficulties, speak to the doctor or cardiac rehabilitation team about it.

People who have a heart condition and who take GTN or nitrate medicines should be cautious about taking PDE-5 inhibitors such as Viagra. So it's important always to check with a doctor before taking them.

Financial worries can put a strain on you as a carer, as well as the person you are caring for, but there are various benefits you may be able to claim.

Carer's Allowance

If you are caring for someone, you may be able to get a benefit called **Carer's Allowance**. To be eligible to receive this benefit, you have to be providing care for at least 35 hours a week, and the person you are caring for should already be getting certain benefits such as Attendance Allowance, Disability Living Allowance (DLA) or Personal Independence Payment (PIP). There are other criteria which may apply too, so for more information about Carer's Allowance and how to claim it, visit www.gov.uk and see their 'Carer's Allowance' page. Or contact:

Carer's Allowance Unit

Palatine House, Lancaster Road, Preston PR1 1HB.

Phone: 0345 608 4321 Textphone: 0345 604 5312

Other benefits

You or the person you care for may be entitled to other benefits too. The website www.gov.uk provides advice on the benefits you may be able to claim.

For more information and help with finding out about the benefits you can claim, you can contact one of the carers' organisations on pages 67 and 68, or a Citizens Advice Bureau (www.citizensadvice.org.uk). You can also ask your local social services to help you with a benefits assessment for yourself and the person you are caring for.

Getting a carer's assessment

To find out if you are entitled to extra support and services to help you look after the person you are caring for, you will need to have a **carer's assessment**. All carers have a legal right to an assessment of their needs.

The process usually involves you, the carer, filling in a form or having a telephone interview and then having a follow-up visit with someone from the local authority. A carer's assessment looks at how being a carer affects you, how much caring you can realistically do in your normal daily life, and any help you may need.

After you've had a carer's assessment, you should be sent a written care plan outlining the support and services that can be provided for you. This might include:

- practical help at home, such as helping the person you care for with washing and dressing, or help with preparing meals
- financial help – for example, for taxi fares
- information about local support groups for carers
- counselling for you, the carer, and
- arranging cover so you can take a break.

If there is something in particular that you think will help you to continue in your caring role, ask about this at your assessment.

To ask for a carer's assessment, contact your local authority's social services department. If the person you care for has a social worker, it's best to contact the social worker directly. Or, you can contact one of the carers' organisations on pages 67 and 68 and ask them for advice and information.

JOHN'S STORY

John Stewart, 81, cares for his wife Elizabeth.

“Elizabeth and I have been married 60 years. Six years ago she had a heart attack, but recovered well. Her health has gradually got worse though, and she needs a wheelchair now. Before she became ill I didn't cook, but I've surprised myself. I have all our meals planned to keep ahead.

As well as caring for my wife I look after myself too and am in pretty good shape, partly due to a lifetime of cycling. Now I stay fit on an exercise bike at home. I also like gardening and still find time to potter and grow my own veg. Elizabeth enjoys getting out and about too.

I have some help which makes it easier. Two care workers come to the house four times a day.

You get the odd day when you don't feel like it, but then you get on with it. I care for Elizabeth out of love and when I look at her I see that it has to be done.”



Each person reacts to their role as a carer in very different ways. Some carers may be frightened to show how they feel and put on a brave face, always appearing cheerful and optimistic. Some may bottle up their feelings. This doesn't help, and may lead to anxiety and depression. Talking about your feelings – to a friend or relative, or maybe even to someone who doesn't know the person you care for – can be a great help.

Resentment

It is quite natural for carers to feel resentful about the changes to their own lives. If you are looking after your partner and it feels like he or she has changed, you may resent this too – for example, if they can't do the things they used to do around the house, and you end up taking on some of those tasks yourself. Or, if they are irritable, or seem ungrateful or moody, you might feel unappreciated. The most important thing is to talk about any resentment you are feeling, and try and clear the air. If you feel you can't talk to your partner about this, it can help to speak to a friend or relative, or even another carer, or your GP.

Worry

You may feel worried about the health of the person you are caring for, or about the financial issues and the future. If the person you care for is also anxious, it can be hard for you not to share their anxiety too. Try to think about what is really worrying you. It may help to speak to a member of the health care team looking after the person you are caring for.

Stress

Caring for someone can be stressful for many reasons. You have the extra pressures of the caring role, as well as juggling the rest of your home and work life.

Some people cope well with stressful situations, while others may not cope so well. When the stress becomes too much, it can often lead to exhaustion, and feeling unwell yourself. It's important to recognise this and take steps to look after your health.

The following can be signs of stress:

- difficulty getting to sleep, waking early, or disturbed sleep
- feeling tired and having no energy
- weight changes – either gaining or losing weight
- poor concentration
- feeling angry and irritable
- feeling unhappy and low in mood.

Try to work out the triggers that may be causing your stress. It can be useful to keep a 'stress diary'. Any time you feel stressed, record in the diary what you think may have caused the stress, and how you felt at the time. Knowing the causes of your stress can help in addressing and dealing with it.



For more information on dealing with stress, see our booklet **Coping with stress**.

Depression

Life may seem very up and down at times. You might feel very positive and reassured one day and then very low the next. It's natural for people and their carers to feel low after any illness or health problem, but things should get easier as life starts to get back to normal. However, if you or the person you care for feel low a lot of the time, or have feelings of despair, speak to your GP.

Anger

It is possible to feel angry that the person you care for has a heart problem. You may be angry at the unfairness of this happening, and wonder why it has happened at all. You may feel angry because you feel the situation could have been prevented – for example, if they had stopped smoking or taken more exercise.

It's important to find a way of dealing with your anger before it builds up. Speaking about your feelings to a friend or relative, or to another carer or counsellor, may help you to feel less angry.

Isolation

You may feel like you are on your own and that nobody else can possibly understand what you are going through. Caring can become your main focus, and may cause other parts of your life to be neglected. Once you get into this habit, it can be hard to break it. Try not to make caring the only focus of your life all the time. Even if the person you are caring for is waiting for more tests or treatment, life should not stop. Joining a heart support group or getting in touch with a carers' organisation may help you to feel less isolated. See page 67 for details of organisations that might be able to help.

Guilt

At times we all feel that we could have done more, or done something differently. Some people may feel guilty because they didn't identify the symptoms of the person's heart condition. Talking about these feelings can help.

How to cope

Identify yourself as a carer

Many carers don't see themselves as a carer. They are just looking after their partner, parent or friend and are just getting on with it. Some carers are reluctant to talk about it, but this can often mean that they may struggle on their own even more. Actually identifying yourself as a carer and acknowledging this can be a positive step that may help you to feel more valued and get more help and support.

Don't try to solve everything at once

Some carers feel they must try to find a solution to every problem for the person they are caring for. Setting realistic goals, rather than trying to achieve everything at once, can help to make things clearer and make it easier to plan ahead.

Look after yourself

Taking care of yourself is just as important as your role of caring for someone else. Eating healthily, doing regular physical activity, and getting a good night's sleep will help you to look after your health and to cope with being a carer.

Make sure you try and do something that you enjoy on a regular basis, to help maintain your health and wellbeing.

Try to put things into perspective

Problems can sometimes seem huge, particularly if you are worrying at night, but in the morning they may not seem quite so overwhelming after all. Concentrate on the main issues you need to face, and try not to worry about smaller problems that can be put on hold for now.

Have a break

Caring can be not only physically exhausting, but mentally tiring too, so it's important to make sure you have regular breaks to give yourself some time off. Having regular breaks from caring is vital for your wellbeing and quality of life. It's normal to feel that you want to spend some time apart from the person you care for, and doing this can help you to feel better able to cope and deal with your caring role. It can also give the person you are caring for a break in the normal routine and a chance to meet some new people, learn some new things and maybe experience a different environment too.

**Try to make some
time for yourself, and
keep doing the things
you want to do.**

There are many different options for arranging cover while you are having a break, including the following. (This is sometimes called **respite care**.)

- You may be able to have someone come into the person's home and take over caring for the person for a while (for a few hours or sometimes overnight), so that you can go out or have some time to yourself.
- Some areas run day centres which the person you look after can go to for a few hours on one or more days a week, or just occasionally. This is a good chance for them to socialise and they may be able to have a meal there too. Contact your local social services for more information about the day care facilities in your area.
- Residential care homes and nursing homes can also provide short-term care for the person you look after, so that you can get a break. This could be for a weekend or longer.

Some of the services listed above will be free, while others may charge. Your social services department will tell you about any costs and whether the services are means-tested.

During your carer's assessment you can ask for information about local services that would allow you to take some time off. Or contact one of the organisations on page 67.

Share the job

It can often help to share the caring with other people. This will give you a bit of a break and help to recharge your batteries, so that you are able to offer the best care possible. Accept help when it's offered. Don't feel you are not coping if someone offers help.

Relaxation

Some people find relaxation, meditation or yoga sessions very helpful. You may want to ask at your local library, community leisure centre or gym for more information about classes.

Any activity that helps you to relax – such as going for a walk or listening to music – can be helpful. It's important to try to do these things regularly.

Talking it over with someone

Some carers who are finding it hard to cope may find it helpful to talk things over with someone else.

Sometimes **speaking to another carer** who is in the same situation as you can be really helpful. He or she can offer support, understanding and advice, such as helpful coping strategies. It can also be reassuring to know that you are not the only one in your situation. One of the organisations listed on pages 67 and 68 may be able to put you in contact with someone who is also a carer.

Online support is another valuable tool which allows you to share views, information and tips online with other carers. For more information visit www.carers.org/carers-chat

Talking to a counsellor can be helpful for many people. This gives you the chance to talk in confidence with someone who will listen carefully and try to help you understand and make sense of your feelings. The counsellor can help you to come to terms with the condition of the person you are caring for, and support you to find your own way forward.

To find a counsellor:

- Ask your GP to refer you to one.
- Ask the British Association for Counselling and Psychotherapy to give you a list of private counsellors in your area. (Their contact details are on page 67.)

If you want to talk about relationship problems, you may want to contact the organisation Relate to find out about the services they can offer. (Their contact details are on page 68.)

If the person you care for is disabled

Caring for someone with a disability, or someone who is very limited in their daily activities, can be particularly challenging.

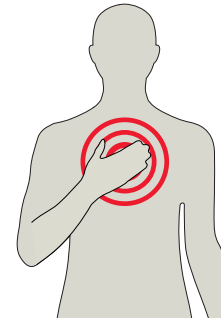
Getting a carer's assessment will help to decide on the type of support and services you need and are entitled to (see page 36). The person's social worker or healthcare professional will be able to discuss different ways of offering you support – such as social care services, a day centre, or temporary care in a

residential home. They can also discuss any equipment or adaptations you need for your home to help you look after the person you are caring for.

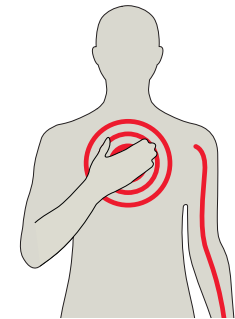
Make sure that you find out about the benefits that you and the person you care for may be entitled to (see page 35).

A heart attack is when a part of the heart muscle suddenly loses its blood supply. This is usually due to coronary heart disease.

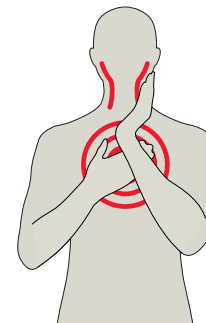
The symptoms of a heart attack



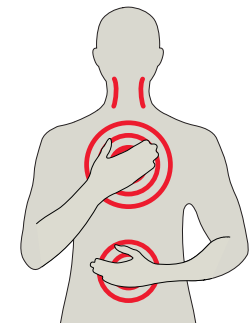
Pain or discomfort in the chest that doesn't go away.



The pain may spread to the left or right arm ...



... or may spread to the neck and jaw.



You may feel sick or short of breath.

Think quick ... act fast. Call 999 immediately.

ACT FAST...

What to do if you think someone is having a heart attack

- 1** Send someone to call 999 for an ambulance immediately.
If you are alone, go and call 999 immediately and then come straight back to the person.
- 2** Get the person to sit in a comfortable position, stay with them and keep them calm.
- 3** Give the person an adult aspirin tablet (300mg) if one is easily available, unless they're allergic to aspirin or they've been told not to take it.
If you don't have an aspirin next to you, or if you don't know if the person is allergic to aspirin, just get them to stay resting until the ambulance arrives.

A **cardiac arrest** is when a person's heart stops pumping blood round their body and they become unconscious and stop breathing or stop breathing normally.

A person who is having a cardiac arrest may develop a dangerously fast heart rhythm which can be fatal. It is sometimes possible to shock the heart back into a normal heart rhythm by giving **defibrillation**. This means giving the heart an electrical shock using a defibrillator.

There are now **public access defibrillators** – or **PADs** for short – in many workplaces, shopping centres, train stations, leisure centres and village halls. It's very easy to use a PAD. The machine gives clear, spoken instructions and you don't need training to use one.

Once attached to a person in cardiac arrest, the PAD will instruct you whether or not a shock is needed and how to deliver it.

Find out where the PADs in your local area are. For more information, go to bhf.org.uk/defibs

The most important thing you can do to help save a person's life is **CPR – cardiopulmonary resuscitation**. This, along with defibrillation, can double someone's chance of survival in some cases. We explain how to do this on the next page.

CALL PUSH RESCUE

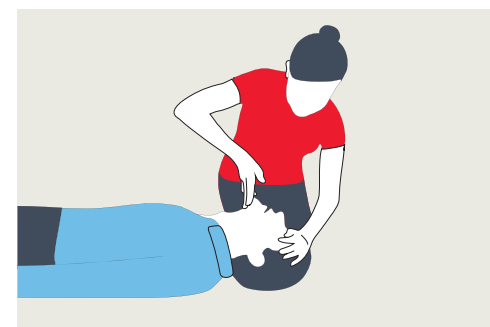
If someone has had a cardiac arrest, they will be unconscious, and either not breathing or not breathing normally. The person needs immediate help or they will die within minutes.

First check that it is safe to approach the person.

To find out if the person is conscious, gently shake him or her, and shout loudly, 'Are you all right?' If there is no response, the person is unconscious.

You will need to assess the person's **airway** and **breathing**.

Open the person's airway by tilting their head back and lifting their chin.



Look, listen and feel for signs of normal breathing. Only do this for up to ten seconds. Don't confuse gasps with normal breathing. If you're not sure if their breathing is normal, act as if it is not normal.

Now remember: **Call Push Rescue**

CALL...

Call for help.

If the person is unconscious and is either not breathing or not breathing normally, they are in cardiac arrest.

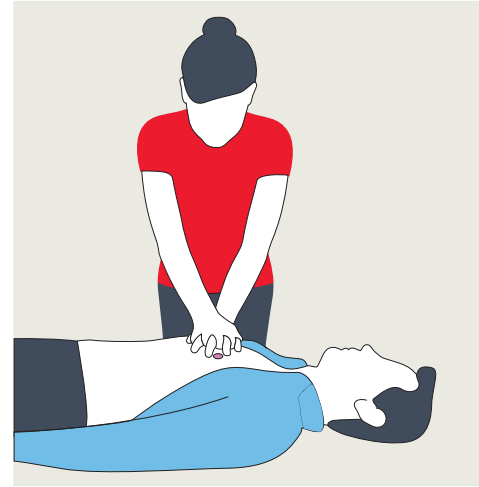
Call 999 immediately.

- Send someone else to call 999 for an ambulance while you start CPR.
- **Or, if you are alone with the person, call 999 before you start CPR.**



PUSH...

Push hard and fast on the centre of the chest.



Start chest compressions.

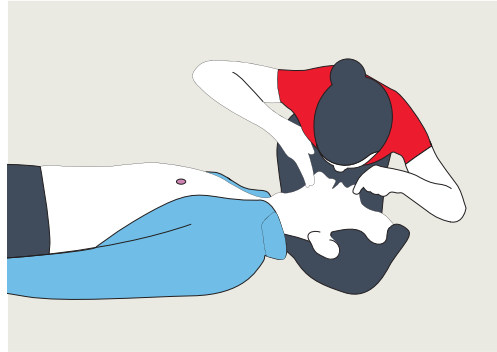
Place the heel of one hand in the centre of the person's chest. Place the heel of your other hand on top of your first hand and interlock your fingers. Press down firmly and smoothly on the chest 30 times, so

that the chest is pressed down between five and six centimetres each time. Do this at a rate of about 100 to 120 times a minute. That's about two each second.

RESCUE...

Give rescue breaths.

After 30 compressions, open the airway again by tilting the head back and lifting the chin, and give two of your own breaths to the person. These are called rescue breaths.



To do this, pinch the soft parts of the person's nose closed. Take a normal breath, make a seal around their mouth with your mouth, and then breathe out steadily. The person's chest should rise and fall with each breath. It should take no more than five seconds to give the two rescue breaths.

Then give another 30 chest compressions and then two rescue breaths.

Keep doing the 30 chest compressions followed by two rescue breaths until:

- the ambulance crew arrives and takes over, or

- the person starts to show signs of regaining consciousness, such as coughing, opening their eyes, speaking, or moving purposefully and starts to breathe normally, or
- you become exhausted.

If you prefer not to give rescue breaths

If you'd rather not give rescue breaths, call 999 and then deliver **hands-only CPR**. Keep doing the chest compressions – at a rate of about 100 to 120 times a minute.

For more on this, see [bhf.org.uk/handsonly](https://www.bhf.org.uk/handsonly)



For more information about training in how to do CPR, see page 65.

**British Heart
Foundation website****bhf.org.uk**

For up-to-date information on cardiovascular disease, the BHF and its services.

**Genetic
Information Service****0300 456 8383**

(A similar cost to 01 or 02 numbers.)
For information and support on inherited heart conditions.

**Online community
community.bhf.org.uk**

Share your experiences, stories, tips and ideas with other people like you in our online community.

Heart Helpline**0300 330 3311**

(A similar cost to 01 or 02 numbers.)
For information and support about your heart condition and keeping your heart healthy.

Twitter**@TheBHF**

Get our latest news and views directly into your Twitter feed.

Facebook**facebook.com/bhf**

Join the conversation and get our latest news and updates on Facebook.

Booklets and DVDs**To order our booklets or DVDs:**

- call the BHF Orderline on **0300 200 2222**
- email **orderline@bhf.org.uk** or
- visit **bhf.org.uk/publications**

You can also download many of our publications from our website.

Our resources and services are free of charge, but we rely on donations to continue our vital work. If you'd like to make a donation, please call our donation hotline on **0300 330 3322** or visit our website at **bhf.org.uk/donate**

Heart Information Series

This booklet is part of the *Heart Information Series*. The booklets in this series are:

- Angina
- Atrial fibrillation (AF)
- Blood pressure
- Cardiac rehabilitation
- Caring for someone with a heart condition
- Coronary angioplasty
- Diabetes and your heart
- Heart attack
- Heart failure
- Heart rhythms
- Heart surgery
- Heart transplant
- Heart valve disease
- Implantable cardioverter defibrillators (ICDs)
- Keep your heart healthy
- Living with a pacemaker
- Medicines for my heart
- Peripheral arterial disease
- Reducing my blood cholesterol
- Returning to work
- Tests

Our services

For more information about any of our services, contact the BHF on **0300 330 3322** or visit **bhf.org.uk**

Nation of life savers

The BHF has a vision to create a nation of life savers. As part of that vision, we're doing everything we can to make sure the UK public know CPR and can use public access defibrillators. Join the fight for every heartbeat and help us save the lives of thousands of people across the UK every year. Find out more at **bhf.org.uk/cpr**

- **Heartstart** is a free, two-hour course where you can learn CPR and other emergency life saving skills.
- Our **Call Push Rescue** training kit is available free to eligible secondary schools, and for a small fee to workplaces and community groups. It has everything you need to learn CPR, including a training DVD.

Heart Matters

Heart Matters is the BHF's free, personalised service offering information to help you lead a heart-healthy

lifestyle. Join today and enjoy the benefits, including *Heart Matters* magazine and access to online tools. Call the **Heart Matters Helpline** on **0300 330 3300**, or join online at **bhf.org.uk/heartmatters**

Heart Support Groups

Local Heart Support Groups give you the chance to talk about your own experience with other heart patients and their carers. They may also include exercise classes, talks by guest speakers, and social get-togethers. To find out if there is a Heart Support Group in your area, contact the **Heart Helpline** on **0300 330 3311**.

Help shape the BHF – Heart Voices

Heart Voices is a growing network of heart patients who use their experiences to make sure our work meets the needs of patients. By signing up, you'll get the chance to shape the BHF by getting involved with anything from helping us to make new resources to informing our research. Visit **bhf.org.uk/heartvoices** for more information and to sign up.

Useful organisations

There are many organisations that can offer support to carers. Also, talk to the staff at the hospital and doctor's surgery, to find out what help and back-up they can provide.

British Association for Counselling and Psychotherapy

01455 883300

www.bacp.co.uk

Can tell you about accredited counsellors in your area.

British Cardiac Patients Association

01223 846845

www.bcpa.uk

Provides support, reassurance and advice to heart patients, and to their families and carers.

Carers Direct

0300 123 1053

www.nhs.uk/carersdirect

Provides information, advice and support for carers.

Carers Trust

0300 772 9600

Scotland: 0300 123 2008

Wales: 0292 009 0087

www.carers.org

Provides information, advice, and practical support and services to carers of all ages.

Carers UK

0808 808 7777

www.carersuk.org

Provides information for carers about caring, support, looking after yourself, money matters, time out from caring, employment, and carers' rights.

Gov.ukwww.gov.uk

Provides information on Carer's Allowance and other benefits.

Crossroads Caring Scotland

0141 226 3793

www.crossroads-scotland.co.uk

Provides practical support to give carers within their own homes the opportunity to have short breaks, or time to themselves in their own home.

Relate

0300 100 1234

www.relate.org.uk

Offers advice, relationship counselling and a range of other relationship support services, face-to-face, by phone or through their website.

Samaritans

116 123

www.samaritans.org

Provides confidential, emotional support, 24 hours a day, for people who are experiencing feelings of distress or despair.

Stroke Association

0303 3033 100

www.stroke.org.uk

Offers information and support for stroke survivors to help them make the best recovery they can.

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HAVE YOUR SAY

We would welcome your comments to help us produce the best information for you. Why not let us know what you think? Contact us through our website [bhf.org.uk/contact](https://www.bhf.org.uk/contact). Or, write to us at:

BHF Customer Services
Lyndon Place
2096 Coventry Road
Birmingham B26 3YU.

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The British Heart Foundation would like to thank all the doctors, nurses and other health professionals who helped to develop the booklets in the *Heart Information Series*, and all the patients who commented on the text and design.

THANK YOU

This booklet is part of the *Heart Information Series*. We distributed 2 million booklets from this series last year. Without your hard work and support the British Heart Foundation wouldn't be able to provide this vital information for people with heart conditions.

Donate to the fight at [bhf.org.uk/donate](https://www.bhf.org.uk/donate), or text **FIGHT** to **70080** to donate £3 to fund our life saving research.



**British Heart
Foundation**

For over 50 years our research has saved lives.

We've broken new ground, revolutionised treatments
and transformed care.

But heart and circulatory disease still kills one in four
people in the UK.

That's why we need you.

With your support, your time, your donations,
our research will beat heart disease for good.

**FIGHT
FOR EVERY
HEARTBEAT**

bhf.org.uk

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