

Healthier Communities,
Outstanding Care



Sherwood Forest Hospitals
NHS Foundation Trust

Returning to normal and beyond after a heart attack

Information for patients



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Introduction

This booklet is a general guide to supplement the individual help and support which you will receive.

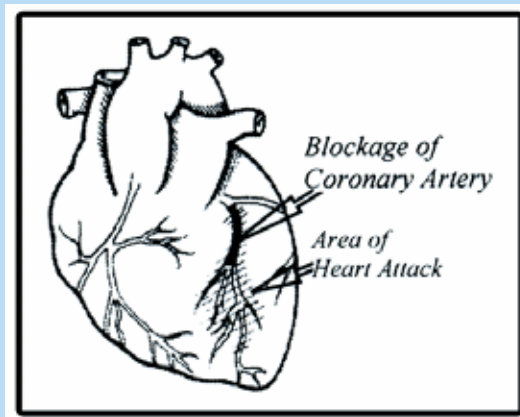
Always remember that you are an individual and that people vary considerably in how quickly they progress after a heart attack.

This is due to a variety of factors such as age, health and fitness prior to the heart attack. If you are worried or unsure about your progress, please ask.

Having a heart attack is a very frightening experience but the chances of making a good recovery to normal life are excellent. It may not feel like it now but many people find that they re-assess their lives and lead a more enjoyable lifestyle after their heart attack than previously.

See this as an opportunity to make positive changes which will enhance your life.

What is a heart attack?



The heart is a muscular pump supplying the body with oxygen-rich blood and receiving its own blood supply from pipes running around the outside of the heart – the coronary arteries.

These coronary arteries can narrow in patches over many years due to the gradual deposition of atheroma (fatty substances lining the artery). During a heart attack a blood clot becomes lodged where the artery is already narrow. This

cuts off the blood supply to an area of the heart muscle by blocking or severely narrowing the coronary artery. The portion of the heart muscle affected is the area of the heart attack. This area will heal over in a few weeks and scar tissue will form.

A heart attack usually only affects a small part of the heart, the rest of it is as good as ever. In most cases your heart is easily able to make up for the damaged part.

Recovery

The heart is a muscle which has suffered some damage and needs help to achieve its best recovery. Finding the correct balance between exercise and rest is the key to recovery. Both are equally important. Learn to 'listen' to your body and rest, when you feel tired, after exercise and after meals.

Feeling weak?

It is normal to feel weak so do not get too worried if you feel tired or slightly breathless. It is mainly due to the result of shock and being laid up in bed.

Visitors

It may be sensible in the first couple of weeks to limit your visitors to set times of the day to allow you to rest and have time to yourself.

Future pain?

Most people do not suffer further chest pain or symptoms after their heart attack; although there may be some tiredness and possibly some mild shortness of breath on exertion for the first few weeks, until the heart has healed.

However, if you do suffer any symptoms of chest pain it may be due to angina. If you do have symptoms of shortness of breath or angina you should discuss them with your doctor.

Some people do find that they notice odd sensations in their chests. These are often to do with anxiety. It is natural to notice these sensations as you will be paying more attention to the chest area. If you are unsure please do not hesitate to ask your specialist nurse or doctor.

What is angina?

Most people do not suffer angina after a heart attack, but some may, and for this reason all heart attack patients are given information about angina. Angina is usually felt as a tight/gripping/central pressure, pain or ache across the chest, sometimes spreading to the left arm (less often to the right arm), or up into the neck or jaw. Occasionally it is felt between the shoulder blades. It is usually brought on by exercise, stress, emotion or anger, as this is when the heart beats faster. It is due to a narrowed coronary artery (restricted by a fatty substance called atheroma) limiting the rate of blood flow.

At rest enough blood can reach the heart muscle to feed it, but when the heart is beating faster the blood supply may be inadequate. The heart muscle is starved of the blood/oxygen which it needs and angina is the result.

What to do in the event of angina / cardiac pain:

- 1. Rest for a few minutes (rest alone may alleviate the angina).
If the pain does not go:**
- 2. Take GTN (1-2 sprays) or tablet under your tongue as instructed in hospital. Rest and wait 5 minutes.
If the pain does not go:**
- 3. Take another GTN (1-2 sprays) or tablet under your tongue and wait another 5 minutes.
If the pain still does not go:**
- 4. Take another GTN (1-2 sprays) or tablet under your tongue, still resting, and wait a further 5 minutes.
But if the pain still has not gone following rest and the use of 3 GTN sprays over 20 minutes:**
- 5. Call an emergency ambulance (999) to bring you to hospital.**

If the pain has not gone following all these stages then you need to be medically assessed promptly. There is a risk that it could be another heart attack.

If the pain is unbearable or just like your previous heart attack, call an ambulance straight away.

GTN spray lasts for a couple of years (but please check the expiry date) and then must be renewed even if it has never been used. GTN tablets must be renewed within 6/8 weeks of opening the container.

Exercise plan after your heart attack

Remember that you are an individual and that this booklet is given to all heart attack sufferers of all ages. This plan may vary and is only designed to supplement individual advice.

In hospital

You can begin exercising when you feel well, rested and free from discomfort. Start gradually by pottering around your bed at first, then round the bay and finally up the ward corridors and stairs. Increase your distances daily. Rest when you feel tired and for one hour after meals in the early stages. Before you leave hospital you should ensure that you have carried out all the activities you will need to do at home such as bathing / showering, walking good distances around the ward and climbing the stairs. It may also be useful to have started practising relaxation.

It is a mistake to be impatient about relaxation. You can't relax if you are trying to force it to happen. People who practice get good at it – people who don't practice don't.

Following a heart attack, most people tend to be concerned about whether they are doing too much or not enough. To help you assess yourself look at the rating scale on page 6 for reactions to exercise. During the early stages of rehabilitation you should be aiming to exercise around ratings 1-2. You should build up gradually over a few weeks, as your heart heals. You should be aiming to exercise at ratings 3-4 in four to six weeks. (You should never work at rating 5).

At home

Try to have a walk once or twice a day.

Remember that you are an individual and even if all you can manage is a few minutes of home exercise every day it will be helping to keep your heart healthy. The most likely time to have another heart attack has now passed.

To start, select a distance that you think you can easily achieve and set off. When you have completed your short walk, think about how you feel. If it is about rating 1 or 2 then use the same distance for the next couple of days, once or twice a day, resting afterwards. If you feel that the walk was rated higher than 2 then start with a shorter distance the next day and follow the same procedure. You may prefer to increase the time that you are walking instead of distance. This is fine. Follow the same guidelines and use the rating scale.



Rating scale – reactions to exercise	
Rating	During exercise
1	Easy, effortless, breathing, comfortable. No muscular tension.
2	Mild effort, breathing more difficult. Can feel muscles.
3	Breathing harder, slight sweat, muscles working, heart beating.
4	Breathless but not speechless, sweating, muscles working hard, heart beating strongly.
NOT	Very breathless, speechless, uncomfortable.
5	Chest tight, muscles hurt. Dizzy, nauseous.

If, during or after physical activity, you suffer more than a comfortable degree of breathlessness or tiredness and / or develop chest pain, stop, rest and in the case of pain use your GTN spray as explained.

Rest afterwards and start again the next day with a shorter distance or a slower pace. Ask for help if you are concerned and don't forget the 'three GTN sprays in twenty minutes' rule.

You may find that you have days when you do not feel as energetic for no apparent reason. This is quite normal. Remember to listen to your body. Rest that day and return to your exercise on the next day.

To increase your exercise / physical activity

When you have been comfortably using the same distance for 2 days (i.e. it has felt around rating 2) then select an increased distance which you feel you can easily achieve. If this longer walk feels about rating 2 then use this distance until you feel you can increase it again in the same way. Only increase a distance if it has felt relatively easy on two occasions.

When, as most will, you are walking once or twice a day for 1 or 2 hours in total (4 to 6 weeks after your heart attack) you should aim to increase your speed to produce a level that requires moderate effort causing a comfortable degree of breathlessness (around ratings 3 or 4).

This is necessary because it is better to exercise for 15 to 20 minutes at a more strenuous level than to exercise for an hour at a gentle pace.

After recovery

When you have recovered you will not need to exercise every day but you will need to keep your heart muscle in shape. Ideally the minimum exercise you need is around 20 to 30 minutes, 5 times a week, at a reasonably strenuous level (around ratings 3 or 4).

Other exercises / physical activities

Unless you have discussed the matter with your doctor or the specialist nurse, it is best to stick with walking as an exercise for the first few weeks as it is easier to assess yourself. When you are walking good distances you may wish to resume such activities as cycling or swimming. Build these up gradually also and if you feel that you need further advice then ask. Everyday activities such as housework, and gardening may also be built up as your exercise program develops.

Exercise points to remember:

1. Always remember to warm up before and cool down after exercising. When walking start off and finish at a slower pace to warm up and cool down.
2. Remember that strong winds, very high or very low temperatures, steep hills or rough surfaces significantly increase the effort required to walk. Dress appropriately and cut down the time or the distance that you are walking and / or slow down your pace in these conditions. Walking up hills is good for you, as long as you are sensible. Neither is there any reason you should not walk in the wind or rain.
3. Always carry your GTN.
4. Avoid any activities which are so strenuous that you have to push, tug, strain or lift with all your might to carry them out. Avoid short, sharp efforts that make you grunt (like knocking in fence posts).
5. Avoid exercising after a meal. Leave a little time for digestion.

Feelings after a heart attack

It is most common in the initial days and sometimes weeks after a heart attack to feel low and sometimes irritable. Many people cry more, are anxious and are prone to outbursts of bad temper and irritability. These feelings are normal.

They are difficult to cope with but they do subside and will eventually disappear as you feel more positive about the future. It is part of adjusting to what has happened and becoming yourself again.

However, if the feelings persist and you are actually feeling not just low but depressed, you need to speak to someone and may require further help.

It is a difficult time for partners and families too. They do not want you to do too much and may 'wrap you in cotton wool'. This is not necessary. Both you and your partner need to discuss these feelings with each other or someone else. You may need to reassure your partner / family by ensuring that you do tell them how you feel and don't keep things from them.

Try to think positively. Notice what you can do today that you couldn't do yesterday, as opposed to what you still can't do. (See section on stress)

Advice for partners and family

It is normal for relatives to have the same feelings of anxiety. Sometimes they feel worse than the patient, as they can feel helpless. As a partner you may have a tendency to keep asking if he / she is all right. Try to discuss your worries and build up your own confidence to avoid doing this.

Please ask if you wish to talk to someone. You and your partner / family can be supported through this by the specialist nurse and / or your GP / practice nurse.

Resuming your sex life

Research has shown resuming your sex life to be an area of unwarranted anxiety for both the heart attack sufferer and his/her partner. There is no reason why you should not return to your normal sex life and there is no time limit at which you should resume. It is suggested that when you can take a brisk walk without suffering more than mild breathlessness, then you may resume your sex life. A brisk walk has been proven to be physically no more strenuous for your heart than sex.

This may mean you are able to resume your sex life within a week of your discharge from hospital or it may be a case of several weeks. There is no difference, physically, which sexual positions you prefer to adopt, or for masturbation or oral sex.

If you have difficulties do not be discouraged. Be loving towards each other and try again another time. It may take a little time to overcome initial worries. Please ask to talk to the specialist nurse if you want more individual advice or if difficulties persist.

Work

Returning to work really needs to be discussed on an individual basis. If it is possible to arrange it, it is recommended that you start back with a period of part time only work, building up to full days to ease yourself back into the swing of things.

Driving

You must not drive for four weeks from the date of your heart attack, unless, following inpatient treatment, your consultant advises that you may drive sooner. You must inform your insurance company about your heart attack but you do not need to inform the DVLA at Swansea (unless your insurance company requests it).

If your premium is increased then shop around, many companies do not increase your premiums.

If you hold a PSV or HGV licence then this needs to be discussed individually.

Risk factors

Risk factors make some people more prone to coronary artery disease than others.

The more risk factors which apply to you, the more likely it is that you will have coronary artery disease that may lead to a heart attack. This is not the same as saying they are directly the cause. We don't understand exactly how the atheroma (fatty deposit) builds up. What we do know is that some things (risk factors) make it more likely to happen. The risk factors are:

Smoking	*Family history	Excess alcohol
Raised cholesterol	High blood pressure	Diet
*Being male	Stress / inability to relax	Being overweight for your height
Lack of exercise	*Diabetes	

As you will notice there are some factors which you cannot influence (*) but even so you can reduce your overall risk by tackling those factors which you can influence as guided in this booklet.

Some of these factors carry higher risks than others – for example smoking carries a much higher risk factor than an unsuitable diet.

Every risk factor you eliminate or reduce can have a positive effect of reducing your health risks.

Do not get into the blame game. Changing your lifestyle will positively affect your health but that doesn't mean you should blame yourself for your past behaviour.

'Uncle Norman' and the 'Last Person'

Everyone knows someone (an 'Uncle Norman') who smoked 40 a day, ate all the 'wrong' things, never exercised and is still alive in his nineties. Most people have also heard of someone who was the 'last person' you would have expected to have a heart attack because he 'did all the right things'. But there are exceptions to every rule. The bottom line is that you have had a heart attack so you know you have some coronary artery disease. It would therefore be sensible to minimise your risk factors by looking at your lifestyle.

Make changes gradually by prioritising which one or two risk factors you feel you can tackle first. Don't try to do everything at once.

Smoking

If you were a smoker prior to your heart attack and now stop the risks get less each day. Your chances of another heart attack will go down by half in the first year; within five years it will be the same as if you had never smoked.

Please ask for individual advice on how to stop, or contact the **Your Health Notts team (Tel: 0115 772 2515)** or ask the nurse to refer you to the **Tobacco Dependency team (Tel: 01623 622 515 ext 6066)**
Here are a few tips that might help you:

- 1. While still in hospital.** Ask someone at home to remove the temptations there, in preparation for your going home. Encourage your partner to stop too. Think about the most important cigarettes of the day for you and how you could make those times less difficult, e.g. by being busy, by changing your routine after a meal or by drinking juice instead of tea or coffee, particularly if you always associate a hot drink with a cigarette.
- 2. Save the cash.** Work out exactly how much you will save and plan a luxury for yourself (or for someone else). Most people will save at least £2,000 a year.
- 3. Take one day at a time.**
- 4. Try to avoid putting on weight.** If you must snack, do so healthily or use sugar free gum.

5. Eat plenty of fruit and vegetables. Vitamin C particularly can help to minimise the adverse effects of stopping smoking.
6. Take regular exercise.
7. Be positive. Use phrases like “I do not smoke” rather than “I am trying to give up”. It helps you to be positive and makes others less likely to encourage you to smoke. No one tries to encourage non-smokers to have a cigarette.

Eating for health

Changing your diet after a heart attack is an important part of your rehabilitation, and can help reduce the risk of another heart attack. You will see a dietician at the post-discharge talk but the main points are below.

It is the total diet which is important, not individual items. Within this healthy balance there are important points to remember:

1. Enjoy your food.
2. Eat a variety of food from each group, including plenty of fruit and vegetables.
3. Cut down on the total amount of fat eaten.
4. Replace some of the saturated (animal) fat with poly-unsaturated or mono-unsaturated fats.
5. Maintain your ideal weight.
6. Take no more than the recommended intake of alcohol.

Balance of good health



Meat, fish and alternatives:

- Eat a variety of lean meats. Red meats such as beef, lamb and pork can be eaten up to three times a week. Try poultry, fish and beans as alternatives.
- Oily fish such as salmon, sardines, mackerel and herring help to keep the blood less sticky, and should be eaten three to four times a week.
- Up to seven eggs can be eaten each week. (Allowances should be made from these for any eggs contained in made-up foods, such as cakes).

Fruit and vegetables:

- These are sources of vitamins, especially the anti-oxidants. Vitamins may be very important in preventing damage to arteries and cells.
- Fruit and/or vegetables should be eaten every day. Aim for at least five helpings.
- Particularly good are citrus fruit, berries, green vegetables, carrots and other orange or yellow fruits and vegetables. Fruit juices can be taken as one portion daily.

Bread, other cereals and potatoes:

- These starchy foods are very important in a balanced diet and should be eaten at every mealtime.
- Wholemeal varieties contain more fibre and vitamins, and help you feel fuller.

Milk and dairy foods:

- These can be high in fat. Use low-fat varieties wherever possible.

Fatty and sugary foods

- Use these in small amounts only.

How to eat less fat

Most of the fat in the diet comes from four types of food. Below are some ideas to help you eat less fat.

Butter, margarine and cooking oils:

- It can be difficult to decide which of these to choose. All fats used should be either high in poly-unsaturates (such as sunflower or corn oil) or high in mono-unsaturates (such as olive or rapeseed oil).
- For spreading it is better to choose a spread which is also low in fat.
- Whichever spread or oil you choose use it only in small amounts.
- Use other cooking methods – grill, bake, steam, microwave instead of frying and roasting.

Cakes, biscuits and pastry:

- These are all high in fat. Aim to eat these less often (even rarely).

Dairy foods – milk and cheese:

- Use semi-skimmed or skimmed milk.
- Cheese is generally high in fat. A lower fat variety such as half-fat cheddar or cottage cheese may be useful.
- Eat cheese as part of a main meal, and not as a snack or supper.

Meat and meat products:

- Processed meats are very high in fat. Look for lower fat varieties of sausage, beefburgers etc., and eat less often.
- Cut visible fat from meat and skin from poultry before cooking.

This should help you change to a healthier way of eating.

The British Heart Foundation also publishes some useful information, or it is available on their website: www.bhf.org.uk.

Alcohol

In moderation alcohol does not pose a problem after your heart attack or for your health in general. The recommended weekly limit for men and women 14 units. (This should be spread over the week not all on one or two nights).

It may be suggested that you cut down your alcohol intake further than the limits shown above if you need to lose weight.

One unit of alcohol is about equal to:

- A half-pint of ordinary strength beer, lager or cider (3/4% alcohol) **or**
- A single pub measure (25ml) of spirits **or**
- A standard pub measure (50ml) of fortified wine (eg sherry or port).

There are one and a half units in:

- A small glass (125ml) of ordinary strength wine.

It is also recommended that you have a couple of alcohol free days per week.

Being overweight

Extra weight means extra work for your heart. This risk will disappear completely when you get to your recommended weight. You will also feel and look younger and be less tired.

To lose weight follow the advice on diet and take regular exercise as discussed. Seek help from your dietician/specialist nurse/practice nurse if you require more help or advice. Don't worry if you put on a little extra weight during giving up smoking as this is far more important for you. You can tackle the extra weight afterwards.

Lack of exercise

Your heart is a muscle which needs to be kept in shape. Many people believe that they get enough exercise: "My job keeps me active", "I'm doing housework and on the go all day", "I do two gardens", "I'm always busy". But these may not be enough of the right sort of exercise for your heart.

Different exercises promote different types of fitness – strength, speed, suppleness, skill (co-ordination) and stamina (endurance). It is quite possible to be fit in one area but not in another. To improve the health of your heart you need to concentrate on stamina using exercises which work your heart and lungs harder, aerobically, such as walking, cycling and swimming. Stamina building exercise should require moderate effort causing a comfortable degree of breathlessness. (See rating scale 3-4 on page 7).

To be beneficial this type of exercise should be taken for at least 20-30 minutes duration, at least five times a week. Exercise needs to be regular and enjoyable in order for it to become readily incorporated into your daily life. Exercising regularly causes a 'training effect' to take place which is beneficial to the heart.

Other benefits of exercising generally are:

- Increase in self confidence and energy to perform other activities.
- Improvement in other types of fitness as well as stamina.
- Reduction of stress by providing a means of expending energy and releasing frustration.
- Helping relaxation and encouraging better sleep.
- Helping reduce high blood pressure, cholesterol and weight.
- Reducing fatigue.
- Reducing angina.
- Promoting a general feeling of well being.

High blood pressure

Having high blood pressure (or hypertension) means that the heart is working harder than it should and makes atheroma more likely to form in the coronary arteries.

To reduce high blood pressure:

- Take medication as prescribed and do not stop medication without consulting your doctor.
- Have regular blood pressure check, even if it has come down to normal.
- Do not smoke.
- Exercise regularly.
- Keep your weight down.
- Eat sensibly, minimise your salt intake and keep your alcohol consumption down to healthy limits.
- Learn relaxation and make it part of your everyday life.

Raised cholesterol

One of the main conditions which makes a heart attack more likely is having too high a level of cholesterol (a fatty substance) in the blood. Research has shown that eating foods which contain a lot of fat (especially saturated fat) has a much greater effect in pushing up the blood cholesterol level than dietary cholesterol. This is because most of the cholesterol in our blood is made (by the liver) from saturated fat.

Some cholesterol in the bloodstream is necessary for normal body processes, but too much of it can narrow the vessels which supply blood to the heart and so increases the chance of a heart attack. Blood cholesterol levels may well be too high in most British adults. Cholesterol levels in the blood can be reduced by reducing the amount of animal fat in the diet. Further reductions in blood cholesterol levels can be achieved by cholesterol-lowering drugs. Following a heart attack even patients with a normal level of blood cholesterol will be commenced on a cholesterol-lowering drug as it has been found to be beneficial in reducing risk.

Lowering cholesterol has been clearly shown to reduce the chances of having another heart attack or of needing heart surgery. A desirable level of blood cholesterol following a heart attack, or for people with coronary heart disease, is below 4.0 mmol/l. Blood cholesterol levels change only slowly and a check should be made by your GP three months after a heart attack.

Stress and you

Stress means very different things to different people. One person's experience will be entirely different from that of another and will vary depending on what the individual can cope with at that particular time in his / her life. Things one person finds stressful, another finds relaxing or exciting – take lying on a beach for example, or watching motor racing on TV.

We all need a certain amount of stress or healthy tension. It is this which stimulates us to get the things we want in life. We often deliberately create stress in our lives by psyching ourselves up to achieve something important, such as passing an exam, winning a game or meeting a deadline. Stress is not caused by hard work. Only when the amount of stress in our lives exceeds these healthy limits does it become harmful and pose a threat to our health.

The tread-wheel is a useful model for considering stress. The wheel represents the effort required by a person in his / her daily life. This includes everything you do each day from when you get up in the morning to when you go to bed at night. As you can see, the man on the left is clearly well and in control of his life. He keeps the wheel turning with just the right amount of effort by balancing his work and leisure with sleep and rest. The man on the right, however, is having to work much harder to do the same amount of work, i.e. to keep the same wheel turning. The physical and mental strain shows as his system breaks down and he is no longer able to cope.



Both of these images can apply to the same person at different times in his / her life. Our ability to cope with the various contingencies of life depends on remaining well and keeping the amount of stress in our lives within healthy limits. We need to recognise the signs that tell us it has exceeded these limits.

What are the tell-tale signs?

Do you:

- Feel guilty when relaxing?
- Plan more and more into less and less time?
- Feel tense?
- Frequently experience a dry mouth, pounding heart, sweaty palms and butterflies in the stomach?
- Have difficulty concentrating?
- Feel frustrated and irritable?
- Eat in a hurry?
- Finish other people's sentences?
- Feel impatient whilst they are talking / interrupt them?
- Feel panicky and afraid for no reason?
- Feel low and everything you do seems such an effort?

If you recognise some of the tell-tale signs, don't worry. They are there to help to teach us to listen to ourselves. They may be better explained by considering what happens to us in a stressful situation, such as: You have stepped into the road without looking, a bus is coming towards you, you look up and...

What happens next?

Your senses sharpen, hormones rush into your bloodstream, causing your heart to beat rapidly and your breath to quicken, your muscles tense ready for action. You are able to think quickly and your body is prepared to leap out of the way – just in time!

This is known as the 'fight or flight' response. It is an in-built reaction designed to protect us. When man relied on hunting for survival, it equipped him with strength to fight or fly. No longer is it the sabre tooth tiger which threatens us, but instead situations we face every day of our lives.

Where does stress come from?

We experience stress from three basic sources:

- The environment.
- The body.
- Thoughts / dreams (i.e. the mind).

In the environment we are bombarded with demands to adjust, such as the weather, noise, crowding, the people we meet/live with, time pressures, standards we are expected to reach.

In the body – growth, excess weight, the menopause in women, ageing, illness, lack of exercise, smoking, poor diet and lack of sleep are all taxing on the system.

Thoughts and dreams can be so powerful that they trigger the 'fight or flight' response by simply recalling a situation which has caused fright in the past or which causes worry now. In this way they can be one of the most potent inducers of stress of all.

What can you do about it?

Start by listing all the things that cause you stress. Is it the neighbour's cat? The queue at the checkout? Being stuck in a traffic jam? The prospect of returning to work? A difficult relationship? Unemployment?

Next, notice what happens to you in these situation (or when you think about them). Do you become tense? (If so where?) Have difficulty breathing? Feel angry? Feel low?

By recognising what happens to you, you can begin to do something about it. It is vitally important that you include some form of relaxation in your daily routine. This is time set aside for you to do nothing but rest. Relaxation gives your body time to rest and repair physically and mentally. Regularly practising relaxation can help to lower your blood pressure. Become familiar with the instructions and you will be able to use them at any time during the day, or when you go to bed at night.

You might also benefit from a relaxation tape, yoga, gentle exercise, meditation or some form of complementary therapy such as aromatherapy, Shiatsu or Tai Chi.

Try to avoid smoking, excess alcohol, too much caffeine (found in coffee, tea and cola) and food with lots of additives. All these things are only a temporary relief and put extra stress on the system in the long term.

Remember, health is a means, not an end. See this as an opportunity to make positive changes which enhance your life.

Top tips for reducing stress

- When you find yourself in a stressful situation take three or four deep breaths. Breathe in through your nose and out through your mouth. As you breathe out, tell yourself "Relax". (You could also try to make your exhalations longer to relax you).

- Think how silly it is to let minor hassles (like being stuck in a traffic jam or having to queue) bother you. Use these situations as a cue to stay calm and/or practice being relaxed.
- When you feel yourself becoming bad tempered, smile. See what effect this has on you and on those around you.
- If you are a constant worrier, wear an elastic band around your wrist and each time you start to worry, flick the elastic band. Set aside 30 minutes each day just for worrying. Tell yourself you are not allowed to worry until that time, then go ahead and worry all you like.
- Find someone to talk to whom you feel you can trust. If you can't talk to anybody at home, please ask. We all need to offload every now and then.
- Be positive. Someone who says "I can't relax", never will! Change words like 'can't' and 'won't' for 'can' and 'will'.
- Raise your self esteem. Make positive statements like "I am going to make a full recovery", "I am getting stronger every day" to replace negative thoughts like "I am finished".
- Accept the things you cannot change and have courage to change the things which you can.
- Master the art of relaxation.
- Keep fit.
- Hold onto happiness – carry a happy photo of yourself around with you. Take it out when you feel low and recall happy memories. Look around you, see the beauty of life, the changing seasons, savour it.
- Enjoy life. See this as an opportunity to learn about yourself.

Relaxation technique

Spend about 20 minutes doing the following exercise. Find a quiet place where you will not be disturbed. Make sure you are warm or cover yourself with a blanket as it is natural to lose heat from your body as you relax:

- Loosen any tight clothing, e.g. shoes, ties, belts.
- Remove spectacles.
- Lie or sit down on a bed or in a comfortable chair with your head, arms and legs supported.

- Allow your feet to fall gently to the sides, your hands to rest either by your sides, palms uppermost or across your belly, and allow your thighs to roll out gently. Close your eyes. Find yourself in a comfortable and relaxed position.
- Let the bed or chair take the entire weight of your body, (so that if someone else tried to lift your leg or arm it would seem extremely heavy to them).
- Now, become aware of your surrounding, of everything that is going on around you in your external world. Say to yourself, "I am aware of... feeling tense between your shoulder blades... the warmth of this blanket... the darkness (for example)..." Repeat this until you have become aware of all that is happening in your inner world.
- Now, move your awareness back and forth between your inner and outer world until you can distinguish clearly between what you are experiencing and what is going on around you.
- Take a deep breath and sigh away any tension, just let yourself sink down into the bed / chair. Breathing in and breathing out in your own time, never forcing the breath. Think of one word which you associate with being relaxed. It doesn't matter which word you choose. (Try using the word "relax").
- Now with every breath you breathe out, say this word to yourself. For example; breathing in, taking energy with the air that you breathe in, breathing out "Relax". Continue to do this for a few moments.
- Now bring your attention and awareness into your feet. Let every muscle go limp and slack. Allow your toes to relax, the muscles in your feet, supporting the ankles, all the smallest joints; let every muscle go. limp and slack.
- Now work your way up through your body, taking your time, not forgetting your joints, all the smallest parts of you. Allow this heaviness to spread, like a warm, soothing liquid into every part of your body, soothing away any tension, easing any discomfort or pain.

Work slowly up from your feet to the top of your head in this order

- Feet, legs, stomach, chest, shoulders, arms, neck, head / face. Spend time on those parts of your body where you store tension. (The most common places are the shoulders, the muscles around the neck, the chest area, the jaw and the cheeks).

Lie there for a few moment enjoying the feeling of being relaxed, warm and at peace with yourself.

When you are ready, open your eyes and become aware of your surrounding. Stretch gently and roll onto your side as you prepare to sit up, taking your time, bringing these feelings of relaxation with you.

Don't be discouraged if you find this difficult the first few times. Like anything else it takes practice and will become easier and more rewarding. Try practising daily for the first few weeks.

Useful numbers / information:

• Cardiac Rehabilitation Specialist Nurses: King's Mill Hospital (Monday to Friday)	01623 672296
• Newark Hospital (Monday, Wednesday and Thursday)	01636 685725
Ward 23, King's Mill Hospital – direct line	01623 672237
Medicines helpline – King's Mill Hospital	01623 672213
For smoking advice: Your Health Notts	0115 7722515
Tobacco Dependency team I King's Mill Hospital Email: sfh-tr.tobaccoteam@nhs.net	01623 622515 ext: 6066
British Heart Foundation (BHF) Heart Helpline www.bhf.org.uk	0300 3303311

Calling for NHS advice – use the 111 service

If you are feeling unwell and need a telephone health assessment, please call the NHS 111 service free of charge from any phone by dialling 111.

Notes

Glossary of terms

Aerobic exercise	Repetitive, rhythmic exercise involving the large muscle groups. It is usually moderate-intensity activity that maintains a raised heart rate for a period of time. Examples include brisk walking, cycling and swimming.
Angina	Angina is caused by the heart muscle not receiving enough blood and oxygen from the arteries.
Atheroma	Fatty material within the walls of the arteries.
Cholesterol	A fatty substance mainly made in the body by the liver.
Coronary arteries	The arteries that supply blood to the heart muscles.
Coronary heart disease	When the walls of the coronary arteries become narrowed by a gradual build-up of fatty material called atheroma.
GTN	Stands for 'glyceryl trinitrate'. A drug to relieve and prevent angina.
Heart attack	When one of the coronary arteries becomes blocked by a blood clot and part of the heart muscle is starved of oxygen, causing damage to the heart.
High blood pressure	When the pressure of the blood flowing through your arteries is abnormally high.

Further sources of information

NHS Choices: www.nhs.uk/conditions

Our website: www.sfh-tr.nhs.uk

Patient Experience Team (PET)

PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

King's Mill Hospital: 01623 672222

Newark Hospital: 01636 685692

Email: sfh-tr.PET@nhs.net

If you would like this information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email sfh-tr.PET@nhs.net.

This document is intended for information purposes only and should not replace advice that your relevant health professional would give you. External websites may be referred to in specific cases. Any external websites are provided for your information and convenience. We cannot accept responsibility for the information found on them. If you require a full list of references (if relevant) for this leaflet, please email sfh-tr.patientinformation@nhs.net or telephone 01623 622515, extension 6927.

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