



Chapter 5. Part 2

Adapting to living with heart disease

Learning to live with your coronary artery disease

Many things may change after you return home from the hospital. You may feel tired for a while; you may need a new daily routine to take your medication. Your diet, amount of exercise, need for rest, family roles (e.g., making meals, cleaning the house) may change. Remember — it takes time to recover and learn to live with coronary artery disease.

Returning home

Medical questions and care

- Before you leave the hospital, get the phone number of a healthcare professional you can call with questions or worries.
- Make an appointment with your family doctor within a week or two of leaving hospital.
- Get medical help if you have symptoms that worry you (e.g., angina that gets worse; dizziness; shortness of breath, especially if at rest; irregular heartbeats).
- Write down your questions and ask them! Knowing what you can and cannot do can help you worry less.

Your daily life

- Stay involved in your life, but don't try to do too much! Spread activities out during the day. Rest if you get tired.
- Do things that give you pleasure and make you happy. Being happy is good for the heart.
- Tell others what kind of help you need and do not need. Do not let them do everything for you.
- See family and friends. If you aren't up to seeing family and friends, keep in touch by phone or email which may be less demanding on you.
- Tell your friends and family about how your heart disease is changing your life. Help them understand your feelings.



Physical activity

- Ask your doctor about the amount of exercise or physical activity that is right for you. Increase your activity bit by bit. You may need to wait up to six weeks before you can start cardiac rehabilitation.
- For more tips on how to increase your physical activity, turn to page 76.
- Walk every day unless you are told by your cardiologist not to. Walking is a great way to get stronger. It helps your heart and your moods and feelings improve.



Image: Ontario Regional Chief Isadore Day

Back to work

Returning to work is an important part of living with your heart disease. Most people with coronary artery disease go back to work one to three months after leaving the hospital. Your cardiologist will tell you if it is safe to do your job, and when you can get back to work.

Some people believe that a physical job that makes demands on your body isn't safe. This is usually not true. Jobs that involve some physical activity are often better for the heart than desk jobs.

You may also think you should retire early. It is important to take your time and talk about it over with your healthcare team, so that your decision is based on facts — not fears — about your heart condition.

Tips to make returning to work easier:

- Talk with your doctor about any fears or worries you have about going back to work and when you should do it.
- Tell your cardiologist you want return to work bit by bit — not all at once.
 - Start with half days and build up to a normal schedule over two to four weeks.
 - Don't do anything difficult or hard until you are feeling strong again.
- Talk to your healthcare team if you are having trouble paying attention, concentrating or remembering things.
- Rest when you are tired.
- Make sure to take care of yourself at work.
 - Find heart-healthy ways to eat at work.
 - Try to manage your stress as best as you can (see stress management on page 88).
 - Take breaks if you are tired.
 - Use day timers, calendars and checklists to help you remember.
 - Do the hardest work early in the day and avoid distractions and interruptions.
- Get involved in cardiac rehabilitation. It can make it easier to get back to work.

Driving and travelling by air

Check with your doctor to be sure you are OK to drive or travel by air, since some conditions can restrict you for a while. Commercial drivers may need to wait up to three months after a heart attack or heart surgery before returning to work.

- Talk to your doctor if you have any fears or concerns about driving.
- Listen to your body. Avoid driving and rest when you are tired.

Being a partner in your healthcare

It is normal to have trouble remembering to ask all your questions or to remember all the things your doctor tells you. Medical appointments can make you nervous and tense, which can increase forgetfulness. Use the form on page 101 to help you prepare for a doctor's appointment.



Remember — you play the most important role in your healthcare. Your healthcare team is there to help you learn how to live with coronary artery disease. So do not be afraid to tell them anything about your health that worries you (e.g., problems you have in doing what they have told you, changing your lifestyle or taking your medications). Your team needs to know these things to make the best decisions with you.

Learning to manage your emotions, thoughts and behaviours

We know a lot about the physical causes of coronary artery disease and how to treat them with medications and lifestyle changes. But your mind and body are closely linked. Your emotions, thoughts and behaviours affect your heart condition and the success of your treatment. They can make heart disease worse if left unmanaged. As a result, dealing with your emotions, thoughts and behaviours is an important part of your recovery.

Facing the challenge of lifestyle changes

Your healthcare team may suggest you quit smoking, exercise more, eat healthier, drink less alcohol, or take new medications. Changing behaviour can be hard — almost everyone who has ever tried to diet or quit smoking knows this! This is true even when you know your health depends on change.

Typical barriers to change

- You do not know why or how you need to change.
- You enjoy things the way they are.
- Your habits and routines are tied up with other people. If they don't change, how can you?
- You are addicted to tobacco, alcohol, high-fat foods or sweets and do not know how to break the addiction.
- You have difficulty figuring out what is important and what isn't.
- You find it hard to set goals and work towards them.
- You don't have the energy or feel too stressed to deal with change.
- You are afraid of what might happen to your life or your relationships if you change.
- You think it is too late to change. The damage has been done.
- You tried to change before and failed. You do not want to fail again.
- You don't know where to go for help or what kind of help you need.



How to make lifestyle changes

It is up to you to decide what and how much to change. Ask yourself: “Is there anything I would like to do for my health over the next few weeks or months?” You can only change when you have a goal. So set a goal for each change you want to make. You may decide to quit smoking, drink less alcohol or become more physically active. You may have several lifestyle change goals. But remember, change can be hard — especially lifestyle changes — so tackle them one at a time. The approach on page 17 has helped many people to make healthy lifestyle choices. It can work for you too.

Get help

Cardiac rehabilitation programs are run by people who are experts in helping you make lifestyle changes and get comfortable with life with heart disease. Programs are offered in person, over the phone and online.

Check with the Canadian Association of Cardiovascular Prevention and Rehabilitation at cacpr.ca to find a program near you. If you cannot find a centre near you, talk to your doctor.

Recognizing and handling stress

Stress is a part of life for just about everyone. Sometimes it is not easy to recognize stress because we are caught up in the flow of life. The things in your life that cause you stress are called stressors. Often, stressors are things you cannot control. These could be events (like losing a job) or conditions in your life (like not getting along with a family member). Your responses to these stressors are your stress reactions. These are different for all of us. For example, if you hate your job, losing it can make you feel free. For someone else, losing a job may be terrible.

Although stress happens first in the mind, it has strong effects on the body. Stress can damage your heart health. Sudden intense stress increases the short-term risk of heart attack. Too much stress over a long time (months to years) is called chronic stress. It can also increase the risk of coronary artery disease.

Recognizing your stress reactions

Everyone has his or her own individual stress reactions. Think for a moment about when you are stressed out or upset. What happens to you?

- **Thoughts:**
 - Do you have trouble concentrating?
 - Do your thoughts race, or freeze up?
 - Do you start to think “the worst”?
 - Are you more likely to see yourself, your future or other people negatively?
- **Emotions:**
 - Does stress lead you to have angry, anxious or sad feelings?
- **Body:**
 - How do you feel physically?
 - What happens to your breathing?
 - Are your muscles tighter?
 - Does that create pain anywhere, like headache, back or jaw pain?
 - Does it make you tired?
 - What happens to your sleeping patterns?
 - How does your stomach feel?
 - Do you sweat, have dry mouth, diarrhea or constipation?
 - What happens to your heart rate?
 - If you measured your blood pressure, what would you see?
 - Are you aware of anything else physical?

- **Behaviour and actions:**

- How do your habits and behaviours change?
- Do you eat more or have more junk food and sugary drinks?
- Do you stop exercising? Do you start smoking? Drink more alcohol, use prescription or non-prescription drugs?
- Do you become nervous or keep to yourself?
- Is there anything else you notice?

All these signs point to something real that you can feel: your mind and body are connected. Stress happens first in the mind, but has effects all through the body, including, of course, the heart and circulatory system.

How can I manage stress?

It may be possible to change or remove the stressor — for example, you may be able to change your job, your work schedule, avoid difficult people or unpleasant situations. But in many cases removing the stressor is not possible. In this situation, you need to change your stress reaction. Here are some strategies to help you:

- **Mental responses:**

You cannot control all parts of your life, but you can control your response to stress and keep a positive attitude. Identify your “thought habits” that can make stress worse (most of us have a least one). Here are a few examples:

- Deciding right away that it is going to be really bad, without even looking closely at the facts
- Looking only at the bad parts and not seeing the good
- Worrying about problems that are really not yours.

- **Emotional responses:**

Figure out your emotional reactions to stress and talk about them.

- **Physical responses:**

Try deep breathing and relaxation exercises.

- **Behavioural responses:**

Decide what you can change about the stressor — for example, you may be able to change your job, your work schedule, avoid difficult people or unpleasant situations. Take action and do it. Keep up your healthy habits. Spend time with friends and family.



What else can I do to have less stress in my life?

Take care of your health and lifestyle.

- Learn about coronary artery disease and its treatments.
- Do what your healthcare team suggests.
- Follow a healthy, balanced way of eating.
- Watch how much alcohol you drink
- Cut down or stop the use of stimulants such as coffee, tea, chocolate, soft drinks and energy drinks.
- Get enough sleep.
- Exercise regularly and be physically active.
- Quit smoking.

Learn to relax and take care of yourself.

- Make sure you have enough rest.
- Take time for relaxation and vacations.
- Practice deep breathing and relaxation exercises, meditation or yoga.
- Laugh and use your sense of humour.

Make sure you have time for fun by doing things that you enjoy with your family and friends.

Change the way you think and act.

- Do only one task at a time.
- Set goals you know are reachable to avoid feelings of frustration and failure.
- Decide what it is important for you to do and don't try to do more.
- Learn to say no and get other people to help.
- Talk about your needs and emotions. Let yourself cry.
- Don't get upset about things you cannot control. Let them go.

Recognizing and managing anger and hostility

Anger is a normal and healthy emotion (for example, anger at something that isn't fair; protecting yourself or someone you love). It can be an emotional response to something you find threatening or frustrating. Anger can be mild or strong. Hostility is different — hostility is a personality trait. Hostile people tend to be aggressive and unfriendly. The combination of unmanaged anger and hostility can be dangerous for your heart health.

Anger is a normal response to a heart attack. But if you experience too much anger (for example, talking loudly, shouting, insulting, throwing things, becoming physically violent) it can damage your cardiac health. When you show your hostility openly and aggressively, your risk of suffering from complications following a heart attack or heart surgery goes up. On the other hand, trying to hold down anger and hostility does not really get rid of them, and may even make them worse. So “locking it up inside” isn't good for your heart either. So it is important to strike a balance — to manage your anger and express it in a healthy way, so that you don't hurt your arteries and heart.

Recognizing the signs of anger

Perhaps you can think of situations or people that might upset you. Are there patterns? How often does it happen? Try this scenario: Imagine you are on the highway, either driving or as a passenger. Suddenly another driver cuts in front of you without signalling, and slows down. What are your very first:

1. thoughts about the other driver?
2. emotional feelings about the other driver?
3. changes in your body?
4. behaviour and actions?

Now think: How long do these feelings last? Do they fade away in a few minutes, or do you keep thinking about the situation? Does it make you have trouble sleeping? Do you think about it the next day? Most of us might be bothered by this situation for at least a few minutes.

So how can you manage your anger?

- Learn how you personally respond to anger.
- Take care of your health and lifestyle.
- Express your needs and emotions. Allow yourself to cry.
- Calmly express your dissatisfaction right away, so it doesn't build up and make you explode later.
- Learn to say no and to get others to help.
- Don't react immediately and violently when a situation or person makes you angry.
 - Leave if you can't stay calm: Remove yourself from the situation until you are no longer angry. Tell the person in front of you that you will come back.
 - Take a step back and decide whether it is really worth getting angry about.
- Improve your communication skills; work with people, not against them!
 - Use "I" to explain how you feel. Using "I" instead of "you" helps the other person know how you feel and listen better. ("I feel angry when you watch everything I eat.")
 - Avoid blaming and generalizing. Instead, make comments on specific behaviours. ("I feel controlled and frustrated when you tell me what to eat," instead of, "You always try to control me and treat me like a child!")
 - Tell the person exactly what you want: no one can guess what you need. ("I would like you to make diet suggestions instead of telling me what I should or shouldn't eat.")
- Write down the causes of your anger and frustration and then throw them away to free yourself from them.
- Try to see both positive and negative sides of a situation.

Recognizing and dealing with depression

Most people feel sad once in a while — that's a normal part of life. But sometimes this can turn into a clinical depression, which is a painful and treatable health condition. People with coronary artery disease are at greater risk for having clinical depression. Depression increases the risk of developing heart disease and can even make heart disease worse. So it is important to know if you are depressed and get the right treatment for it.



I didn't think I could be depressed. I thought it could just happen to others."

— Natalie

What depression looks like

The two main signs of depression are: **low, sad mood**, and/or **loss of enjoyment and pleasure or interest**, most days for at least two weeks. In fact depression can last much longer than two weeks, and involve many of the following symptoms:

- Major loss or gain of appetite or weight, not explained by other causes
- Trouble sleeping or sleeping more than normal
- Change in activity, being nervous or slowed (movement, speech, etc.)
- General feeling of tiredness and low energy
- Feeling guilty and no longer believing in yourself
- Having trouble concentrating or paying attention
- Having trouble organizing, making decisions or plans
- Feeling hopeless
- Frequent thoughts of death or suicide (with or without a plan).

Everyone feels depression differently. Some people feel hopeless and suicidal; some do not. But in all cases, it is important to recognize and treat depression. Don't be afraid to talk about it. Depression is not a flaw, and doesn't make you a less important person. If you are suffering from depression, you may feel guilty because you can't explain what is happening to you. Feeling guilty is one of the symptoms of depression. Try not to feel ashamed. Talk to your family doctor or cardiologist about how you are feeling and the treatments that might help. A combination of antidepressant medication and psychotherapy is generally recognized to be the best form of treatment for depression. Each of these should be administered by a qualified and experienced mental health professional.

What can I do to get better from depression?

- Learn as much as you can about depression.
- Stick to a healthy lifestyle as much as you can. Eat a heart-healthy diet at regular times. Exercise or be active every day.
- Keep up a healthy routine in your life. Get out of bed and get dressed around the same time every morning — and stay up. Make sure you wash, brush your teeth and take care of your skin, hair and body. Respect yourself.
- Take care of your sleeping habits. Go to bed at a regular time every night.
- Reduce or avoid alcohol and tranquilizers.
- Be good to yourself. Be proud of your strengths and accept what you can't do.
- Stay connected with family and friends.
- Do at least one fun thing each day.



Recognizing and dealing with anxiety

Anxiety is one of our most common emotional experiences and is the normal healthy reaction to a threat. And coronary artery disease is a threat!

Anxiety is necessary for survival. When we are anxious, we pay all of our attention to what we believe is dangerous. Most of the time this is healthy and keeps us safe. However, anxiety can get to the point where it

isn't healthy. It can become an anxiety disorder that damages the quality of people's lives, keeping them from living a normal life, and it needs to be treated.

However, there is an interesting impact that anxiety has on people. There appears to be a moderate level of anxiety that is healthy. Anxiety levels that are too low or too high appear to worsen your heart disease.

Too little anxiety	Excessive anxiety
No action results and this could be problematic.	Could lead to avoidance of any reminders of coronary artery disease and contribute to the development of anxiety disorders (see below).
Example: A person suffering from coronary artery disease who needs to stop smoking but never does, because he/she has little anxious reaction to the fact that smoking can make their heart disease worse. "I feel fine; I don't see what the big deal is"	Example: People who have a lot of anxiety can avoid their medical appointment as well as taking their medication which are reminders of their coronary artery disease.
Not changing risky lifestyle behaviours increases the risk of another coronary event.	Not following medical advice may actually make coronary artery disease worse.

Recognizing anxiety disorders

Two types of anxiety disorders may be more common in people with coronary artery disease than in the general public.

Generalized anxiety disorder is when a person believes there is danger in almost any situation and develops feelings of anxiety about most things in life, such as family life and work. For a doctor to say you have generalized anxiety disorder you need to have three of these six symptoms for at least six months, causing you serious distress:

- Agitation or overexcitement
- Irritability
- Being easily tired
- Muscle tension
- Trouble with concentration or loss of memory
- Sleep disturbances.

Panic disorder is when a person has recurring panic attacks that start suddenly and reach a peak within a few minutes. Panic attacks are frightening experiences because the physical feelings are overwhelming and scary and linked to a feeling of losing control or fear of dying. Some people think they are having a heart attack.

You might experience some or all of these symptoms during a panic attack:

- a fast and pounding heartbeat
- nausea
- sweating
- light-headedness (feeling like you might faint and sometimes you do faint)
- shaking
- chills or heat
- trouble breathing (hyperventilating or feeling breathless)
- numbness
- choking
- fear of losing control or dying
- chest pain

Two other anxiety disorders are important to know about.

Post-traumatic stress disorder (PTSD) is a serious condition that causes terrible emotional upset. It happens after a person goes through an experience that has horrified them or traumatized them. It can happen after seeing the horrors of war or after violent bullying, but it can also happen when a person feels their life was threatened by a heart attack. The person has flashbacks or memories of the awful experience, thoughts they can't control, and images and feelings about the event. There may also be feelings of being alone and separate from everyone else, nightmares and a struggle to live a normal life.

Specific phobia is a strong fear or anxiety about an object or situation. For instance, someone might develop a phobia about driving after a heart attack. They become terrified they might have a serious car accident if they were to have another heart attack while driving.

What can I do to handle anxiety?

Because anxiety is a normal feeling, if you think you are in danger (from your heart disease), the best way to manage it is to find ways to make yourself feel safe.

- Talking about your feelings of sadness, anger, frustration and even excitement, can reduce your anxiety.
- Care for yourself, always! Learn what you need. Be proud of your strengths and accept your limits, without blame or criticism. Make time for fun.
- Learn to reduce your stress (see Managing stress, page 88).
- Learn deep-breathing exercises. They are the foundation of most relaxation strategies and can help prevent panic attacks.
 - Place a hand over your belly button.
 - Relax your stomach muscles.
 - Inhale slowly and deeply through your nose for a count of five: feel your abdomen rise.
 - Exhale slowly through the mouth for a count of five: feel your abdomen fall.
 - Keep breathing this way until you are calm and relaxed.
- Live a healthy lifestyle. Eat heart-healthy foods, exercise regularly, and get enough sleep.
- Get proper treatment if you have a respiratory disorder (e.g., asthma) which can increase anxiety if it is not controlled.
- Stay away from caffeine (in coffee, soft drinks, tea, chocolate, energy drinks) and other stimulants such as nicotine. Do not drink too much alcohol. Don't smoke or use illegal drugs.
- Do not spend most of your time alone. Spend enjoyable time with your family and friends, talk to someone you trust when you are not feeling well.
- Find meaning in your life. Having purpose and direction helps.
- Don't be ashamed or blame yourself for your difficulties. Ask for help from your healthcare team, your community, support groups, help phone lines, or a mental health specialist.

What should you do if you think you or someone close to you is suffering from depression or anxiety?

If symptoms of depression continue for more than two weeks or if you feel anxiety that keeps you from completing your daily activities, talk with your family doctor or healthcare team right away. They will figure out the problem and may treat your depression or anxiety with medication, and/or send you to a mental-health professional.

If you or someone you know is feeling like they might kill themselves, go to your local hospital emergency department immediately or call 9-1-1 or your local emergency number.

Sleep problems

Good sleep is necessary for good health. Experts say we need seven to nine hours of good quality sleep each night to stay in good health. Not getting enough sleep can stress the body in many different ways.

Over time, it can:

- Increase your risk of high blood pressure, diabetes and coronary artery disease
- Increase your risk of heart attack, stroke and death from cardiovascular disease
- Change the hormones that control your eating behaviour, possibly causing you to gain weight
- Increase tiredness: This makes you too tired to make healthy lifestyle changes, and causes unhealthy lifestyle choices. It makes you less able to cope well with the normal challenges of life
- Increase stress, anxiety and depression



Recognizing sleep problems

Many things can make you unable to get enough sleep. These include medical conditions and medications, pain, depression and anxiety, caffeine, alcohol, life stresses, environmental factors (like light and noise), shift work and even aging.

It can be helpful to think about the quality of your sleep on a regular basis. Many people have trouble sleeping once in a while. It is nothing to worry about. In fact, worrying about being unable to sleep only makes sleep problems worse. But if you often have trouble sleeping, you might be helped by keeping a sleep diary for a few weeks. If you write down how many hours you spend in bed, how many times you were awake, what woke you (e.g., pain, noise) and the overall quality of your sleep, this will help you figure out if you might be helped by changing your sleep habits or getting specialized sleep treatment.

Learn about sleep problems at [sleepfoundation.org](https://www.sleepfoundation.org)

Sleep hygiene: How to get a better sleep

Set up a sleep schedule

- Plan to sleep seven to nine hours every night.
- Have a regular bedtime and get up at the same time every day.
- If you have trouble sleeping at night, do not make up for it with naps or sleeping in.

Control your sleep environment

- Keep your bedroom dark and silent.
- Make sure that the temperature, bed and bedding (sheets and blankets) are comfortable.
- Use your bedroom only for sleep and sex (no work, TV or video games).

Set up a sleep routine (the things you do every night to get ready for bed)

- Have a calming routine before you go to bed.
- Do things that relax you at least one hour before bedtime, outside of your bedroom. These may be meditation, relaxation, yoga, reading or a calm conversation.
- Go to bed only once you are sleepy. Get up if you do not fall asleep within 20 minutes and do something that calms you in another room until you are ready to sleep.

Do not use substances or do anything in the evening that can damage your sleep

- No food or drinks with caffeine: it is a drug that keeps people awake. It can take four to six hours before it is out of your blood stream.
- No smoking (nicotine).
- No alcohol or drugs: they damage the quality of your sleep and make you wake up before you are rested.
- No physical activity for a few hours before sleep: it can wake you up.
- Be around natural light during the day. Don't look at the computer, television or electronic tablet screens a few hours before going to bed. The type of light they use stops our natural sleep hormone (melatonin) from working properly.

Try not to think about stressful things around bedtime

- Do not worry if you can't sleep well for one or two nights. This can happen to everyone! You will still be OK the next day. Stressful thoughts about sleep problems can make them worse. Learn to let them go!

Some people still struggle with sleep even when they try all of these suggestions. Talk with your healthcare team if:

- You continue to have trouble sleeping
- You are very sleepy in the day or if you have trouble concentrating on things you have to do
- You snore or if your partner notices that you stop breathing during the night (see Sleep apnea, page 14)
- You have trouble doing things where you need to concentrate or pay attention, like driving
- Your legs are uncomfortable or twitching and keep you from sleeping.

Talking about your sleep problems with your healthcare team can help you find out if you should visit a sleep clinic to learn if you have a sleep disorder.

Staying connected: Family, friends and intimacy

The company of other people

Although you might want to be alone, it is better for you to get the help and comfort of others while you go through your recovery. The support of family and friends after a heart attack or heart surgery can help you in many ways:

- Shorten the time you need in the hospital and improve recovery
- Help you take medication properly and make healthy lifestyle changes
- Help you remember what your cardiologist or other healthcare providers have told you.
- Get you using cardiac rehabilitation programs
- Reduce damage that stress can cause
- Reduce symptoms of depression
- Improve your quality of life.

Building, using and caring for social support networks

You need a social support network. That is the group of people you can count on to keep you on track. It can be your family and the friends you already have, or you can find new people. If you already have a good group ready to get involved, make sure you take care of your relationships. If you do not have many strong relationships, it is never too late to build them. Figure out the type of support you need for your recovery. You may decide you need some new people in your network who also have heart disease so they really understand what you are going through, or that give you more emotional support. Here are some suggestions for taking care of your social support network:

- Meet new people. You meet more people if you try new activities and if you introduce yourself to strangers.
- Join groups or clubs that interest you. Try a walking club, bridge club, meditation centre, book club, cooking class or anything else that fits your interests. See what is available at your local community centre.
- Join your local cardiac rehab program. Talking to other people with coronary artery disease, who have gone through some of the same things as you, can be a big help.
- Take part in your community. Get involved in something that has meaning for you. Think about becoming a volunteer. It feels great to help someone else.
- Try support or self-help networks and/or spiritual or religious groups. These may be in-person or online groups. The Heart and Stroke Foundation and the American Heart Association publish blogs where you can share your experience of coronary artery disease and hear about experiences people like you have gone through.
- Let go of unhealthy relationships. Don't be afraid to say "no" to a request that you think will cause you anxiety, stress or take up too much of your time. Problems with control, dependence, unreliability, manipulation, lies and lack of trust can cause pain and harm. Talk to a mental health professional if you need help to walk away from bad relationships.
- Be patient! Building trust and closeness may take time. You may have to meet several new people to make only one friend!
- Take the time to care for your relationships. It takes work to build and keep strong and caring relationships. Offer in return the same emotional support you expect in the relationship.
- Do not pay so much attention to your work that you ignore your friends and family. Use your time wisely.
- Ask for the help you need from your healthcare team and your social support network. Be specific when you ask for help to ensure you get the right kind of support.

Returning to sexual intimacy

Many people have anxiety or fears about having sex after a heart attack or heart surgery. They are scared that sex will be too much for their heart. Keep in mind that sexual activity (full intercourse) only uses the same amount of energy as climbing two flights of stairs (15 steps). The effects on the heart of masturbation or manual/oral stimulation are similar to that of intercourse.

Talk to your cardiologist about when you can safely have sex again. For most people, that is two to eight weeks after your heart attack or heart surgery. People with persistent unstable angina, shortness of breath or tiredness after climbing two sets of stairs should wait until they are doing better. In the meantime, work on your intimacy by having physical contact with your partner such as cuddling or holding hands.

Typical barriers to returning to sexual intimacy

Some people may be less active, develop temporary problems with their interest in sex or erectile dysfunction (problems getting or keeping an erection) while they learn to live with their new coronary artery disease. These difficulties can be caused by medical conditions (coronary artery disease, type 2 diabetes, prostate problems, hypertension), medication side effects, mental health conditions (depression, anxiety) or problems in the couple relationship.

A healthy sex life has many benefits. It can lower stress, make you feel better about yourself and deepen your relationship with your partner. Here are some tips for getting your sex life back:

- Understand that things will not be perfect at first. You might need to lower your expectations. Go slowly — at your own pace.
- Share your fears, needs, desires and wishes with your partner about having sex again. A lot of patients feel the closeness they have with their partner after their heart disease helps to improve the quality of their relationship and their sex life.
- Set up a healthy routine for eating, resting, sleeping, exercising and managing stress. This helps you feel good about your body, builds your confidence and looks after your heart health.
- Give quality time to your relationship with your partner.
- Plan to have sex when you are rested and not under stress. Choose a relaxing place where you will not be interrupted. Foreplay in a relaxed setting lets your heart rate and blood pressure increase gradually.
- Do not have sex in a very hot or cold place, after a heavy meal and after drinking a lot of alcohol. Sex in these situations can cause more stress for your heart. Wait two to three hours after eating before you have sex.
- Take your time. Stop if you have chest pain. Contact your cardiologist or family doctor as soon as possible.

Erectile Dysfunction

Some medications used to treat coronary artery disease or hypertension can cause a drop in your sex drive and difficulty with erections or orgasms. **Never stop taking your cardiac medication because you have side effects that affect your sex life.** Talk to your cardiologist to find out if your medication can be changed.

Medication that treats erectile dysfunction: e.g., Sildenafil (Viagra), Tadalafil (Cialis), Vardenafil (Levitra) can cause dangerous drops in blood pressure if taken within 48 hours of any form of nitrates (e.g., nitroglycerine tablets (ISMN or Imdur), patches or sprays). If you have cardiac symptoms for which you would normally use nitrates and you used medication to treat erectile dysfunction within 48 hours, do not take your nitrates and go immediately to the emergency room of your local hospital to get treatment. Talk to your healthcare team about any worries you may have about this.

Do not take herbal medications to treat erectile dysfunction, as they may affect your heart medication.

Talk with your healthcare team about any problems you have about the return to your sex life. They will be able to tell you the causes of your difficulties, and might be able to offer you treatments or send you to appropriate medical specialists, psychological or sexology services.

Dealing with heart disease as a family

Having a heart attack in the family can turn everyone's world upside down! The physical and emotional changes will also affect the people close to you and can mean big changes in your family routine.

Sources of stress

Intellectual

- Learning new information on coronary artery disease and its treatments.

Practical

- Changing how housework is done
- Adapting to lifestyle changes (diet, exercise, etc.)
- Keeping up your family, professional and social life while taking care of your heart disease

Interpersonal

- Getting used to changes in your family's needs and its social support network; for example, some friends may pull away, while others may become closer

Physical

- Dealing with tiredness

Psychological

- Feeling distress, uncertainty about the future, fear of change and death.

Just like you, family members may feel an emotional shock, fear, anxiety, anger, sadness, powerlessness or guilt to name a few common feelings. Ignoring these emotions may make things worse. You and your family must deal with these while you switch to heart-healthy behaviours and habits, to improve your heart health and to get back a good quality home life. Here are some tips to help you and your family cope:

- Ask your family members to learn about coronary artery disease and its treatment. You can all learn from your healthcare team, books, official medical internet sites and associations, community organizations, and mental health professionals.
- Talk openly about how your coronary artery disease is affecting your family. Talk about how hard it is getting used to it and making changes.
- Ask for help from your family, friends, community and healthcare team. The bigger your social support network, the easier it is to cope.
- Keep things at home as normal as possible. Keep up with the things you used to do with friends and family and on your own.
- Make sure you talk about something other than heart disease each day. Keep up with the news in the outside world, as well as with your interests and leisure activities.
- Understand that the feelings you and your family have about adapting to heart disease are normal, not bad.
- Share and listen to each other's feelings. Respect each family member's feelings and opinions. Sharing can bring you closer together and reduce stress. When talking about feelings, be calm, do not shout, blame or interrupt.
- Take good care of yourself, always before you try to take care of others. Remember, everyone is responsible for their own needs, well-being, emotions and reactions.



Image: Ontario Regional Chief Isadore Day

When to ask for psychological help

Talk to your healthcare team about any psychological problems you might have. They can help to get you the right mental health services. Asking for help is not a sign of weakness — it is a sign of courage!

You might want to ask for psychological help in the following situations:

- You have trouble dealing with your condition of coronary artery disease, your treatments, your limits and your grief or sadness.
- You find it hard to do what your healthcare team has told you (e.g., to take your medication as prescribed, to change your lifestyle).
- You are afraid of dying and that is damaging your quality of life, making it hard to do the normal things you did before.
- You feel depressed or anxious most days.
- You feel too much stress.
- You aren't sleeping well.
- You are drinking too much alcohol or taking too many drugs.
- You can't control your anger.
- You are having problems in your marriage, with sex or your relationships.
- You are having trouble going back to work.
- You are having trouble talking with your healthcare team.
- You feel the need!

Visit the Canadian Psychological Association at cpa.ca or your provincial psychological association to find a psychologist in your province.

The power of Community

Have you experienced heart disease or stroke, or are you caring for someone who has?

Our members-only Facebook groups are safe, welcoming and helpful online communities. Ask questions, give and receive support and get practical advice. You're among friends here.



Community of Survivors
– for people living with heart disease or stroke.



Care Supporters' Community
– share, support and lean on others who, like you, are caring for others.

Join a Community and learn more at heartandstroke.ca/connect

Worksheet: Preparing for a doctor's appointment

It is normal to have questions and worries about your health. It is also normal to have trouble remembering your questions or all the things the doctor tells you. Preparing in advance can help to make the most of your appointment.

What is the reason for your visit? What do you need from your doctor?

Find out (before the appointment) if there is anything you shouldn't eat or drink before a blood test.

Write a list of all your questions to make sure you get all the answers you need.

Here are a few examples:

- What caused my coronary artery disease? Why and how did it happen?
- What is causing the symptoms I am having now?
- What tests do I take? How often?
- What is the best treatment for my condition?
- How can I take care of my other health problems while I look after my heart disease?
- What are the side effects of my medications and what should I do about them?

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Make a list of any physical changes you have noticed (all your symptoms) so that you can tell your doctor.

Always carry a list of all your medications. Update the list if your doctor changes a prescription or prescribes a new medication.

Bring a note pad and pen to make notes that you can refer to later.

Bring a family member or a friend for support and to help you remember important information. If you are alone, ask the doctor's permission to record your conversation on your cell phone.





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