The Palliative Approach for Advanced Heart Failure in Long Term Care

A Resource for Residents, Family and Friends

Version 3

Tips for Family and Friends

Before a care decision is made:

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

With a health care provider, explore and discuss options:

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

Your health is important too. If you are feeling overwhelmed, seek support from the Family Councils of Ontario.

www.fco.ngo
Phone: (416) 487-4355
Toll-Free: 1-888-283-8806

What Should I Ask About?

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

Online Resources

1) Heart Failure Matters: interactive website that explains HF
   www.heartfailurematters.org

2) BC Heart Failure Network: documents for HF self-care
   www.heartfailure.ca/for-patients-and-families/co-management-resources

3) American Heart Failure Society: 10 modules (medications, end of life)
   www.heartfailure.ca/for-patients-and-families/co-management-resources
This pamphlet was made to help persons with **Heart Failure (HF)** and their families know what to expect at the end of life so they can plan ahead. Talking about preferences early on is an important first step to a **Palliative Approach to Care**.

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

**What is HF?**
HF is a **chronic progressive life-limiting illness**. This means that symptoms worsen over time and may affect how long one lives. HF:
- Occurs when the heart is not pumping as strongly as it should
- Causes fluid to back up from blood vessels into the lungs and legs

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

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

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

**Talk to your or your relative or friend’s health care provider if you notice:**
- More weakness or tiredness (fatigue)
- More shortness of breath with little activity or at rest
- Weight gain (fluid retention) or weight loss (nausea or loss of appetite)
- More swelling in lower legs (edema) or in abdomen (ascites)
- Coughing (with or without sputum) that may worsen when lying down
- Rapid or irregular heart rate at rest
- More problems with cognitive function

For more information, please visit:
**www.virtualhospice.ca**
**www.advancecareplanning.ca**