

The ICD Support Group of Manitoba

Volume 20

May 2018

SUPPORT GROUP MEETINGS

Estrellita Estrella-Holder RN, NP was the presenter at our December 2, 2017 meeting. Estrellita is the Nurse Practitioner from the Heart Failure Clinic at St. Boniface Hospital. Her presentation "Let's Talk About Heart Failure" helped us to better understand what heart failure is, risk factors, causes, diagnosis and treatment options. Congestive Heart Failure is a chronic condition that currently affects approximately 600,000 Canadians with some 50,000 new cases each year. Heart Failure is NOT a heart attack. It does not mean the heart has stopped working or that it is about to. It means that the heart can not pump enough blood to supply the body's needs. Some of the symptoms of Heart Failure include: shortness of breath, chronic lack of energy, cough with frothy sputum, swelling of feet and legs, difficulty sleeping at night due to breathing problems, swollen or tender abdomen with loss of appetite, increased urination at night and confusion and/or impaired memory.

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NEXT MEETING - SATURDAY, JUNE 9, 2018

RECEPTION: 1:00 p.m.
GUEST SPEAKER: 2:00 p.m.-3:00 p.m.
ST. BONIFACE HOSPITAL ALBRECHTSEN RESEARCH CENTRE
351 TACHE AVENUE
SAMUEL N. COHEN AUDITORIUM, MAIN FLOOR

The closest parking lot is at the south end of the Hospital near Emergency. The Albrechtsen Research Centre is at the southwest end of the Hospital.

Our guest speaker will be Rhea Vaags-Olafson, BA (Pass), CSEP-CEP, EIMC-Level 2. Rhea is the Chronic Disease Program Coordinator for The Wellness Institute at Seven Oaks General Hospital. The Wellness Institute offers many evidence based programs for people recovering from and living with chronic disease and illness. Some benefits of regular exercise can include decreased symptoms, improved blood pressure and improved psychological well being.

Please join us for refreshments, fellowship and information. We encourage you to bring along a family member(s) and/or guest(s) as this provides a great opportunity to meet informally with others in a similar situation.

THERE IS NO NEED TO CONFIRM YOUR ATTENDANCE

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VOLUNTEER BOARD OF DIRECTORS

- Larry Sherman, President
- Greg Smith, Director
- Dianne Brown, Director
- Bob Mawson, Director



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There are several causes for Heart Failure. Some are related to the hearts "plumbing". i.e. a heart attack and/or blocked arteries, long term high blood pressure or heart valve problems. Other causes could include: viral infection, heart problems you are born with, family history of heart failure, long term alcohol or drug abuse, diabetes and chemotherapy. Heart Failure affects males and females equally. It is diagnosed via a medical history being taken to reveal symptoms, a physical exam, chest x-ray, EKG, echocardiogram and MUGA scan. A key indicator for diagnosing Heart Failure is the hearts Ejection Fraction or EF as it is commonly referred to. EF is the percentage of blood that is pumped out of your heart during each beat. A normal heart will usually have an EF in the 50 - 70% range while a Heart Failure heart will be less than 40%. Heart Failure can be managed in a number of ways: Medication (health care professionals will work with the patient to prescribe the heart failure medications and doses that will work best for the individual), specific Pacemakers and Defibrillators that in addition to pacing and/or shocking the heart can also treat the heart's pumping function, surgery and angioplasty, salt and fluid restrictions, self management/care, physical activity, heart pumps or heart transplant.

DIDYOU KNOW....??

ELECTRIC CARS

Have you ever wondered if riding in an electric car could affect your defibrillator? According to preliminary research presented at the 2017 American Heart Association Scientific Sessions 2017 sitting in or standing close to the charging port of a Tesla electric vehicle did not trigger a shock or interfere with ICD performance. Also the Medtronic website asktheicd.com says "it is safe to drive an electric car if you have an ICD".

CARING FOR THE CAREGIVER

A cardiac event is a major event. It has an effect that impacts not only the patient, but family and friends as well. Often a loved one takes on the role of caregiver which sometimes causes feelings of depression, anger or distress. In some ways the patient often has it easier as they are simply "along for the ride". Family members on the other hand can feel overwhelmed being put into an abnormal situation with lots of questions and uncertainties. Caregivers are often scared. Scared their partner may not wake up or scared of what their loved ones' condition might mean for their daily lives. Caregivers can go through a range of emotions including anxiety, stress, frustration, anger and much more.

Here are some tips for caregivers.

<u>Communicate</u> - communication is the foundation of any good relationship. It is important for patients and partners to know that each is accessible and responsive to the other.

<u>Compassion & Empathy</u> - Remember that your loved one is feeling the same anxiety, stress and frustration you are.

Write It Down - When a loved one is ill, important information comes to you at times when it can be hard to absorb and retain. Consider keeping a journal.

<u>Make Time For Yourself</u> - Take time to recharge. Even a half hour each day to see a friend, read a book, go for a walk or just take some alone time can make a huge difference in your well being.



DID YOU KNOW....??

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Accept Offers of Help - You can't do everything yourself. Say yes to offers to fix a meal, drive your loved one to an appointment, cleaning house, etc.

Give Control Back To Your Loved One - Both you and your loved one may be put into unfamiliar roles. There is a natural tendency to want to do everything you can for your loved one. At some point it is important to let him/her take back some of the activities of daily life. It is an important part of the recovery process and can offer a greater sense of control.

Remember You Are a Helper - Not a Policeman - Recovering from a cardiac event or managing chronic heart disease often requires lifestyle changes. You may see yourself as responsible for making those changes (i.e. healthier diet, more physical activity, quitting smoking etc.). You can't force these things and they may actually create resistance to change which may have a harmful effect on your relationship. The most you can do is encourage and support your loved one.

<u>Focus On Priorities</u> - You can't do everything at once. Pick your priorities and focus on those first. Write down the things you want to deal with later and stop thinking about them until it's time.

This information is from "The Beat" issued by The University of Ottawa Heart Institute. Copies of The Beat can be found at: www.ottawaheart.ca/the-beat

FREQUENTLY ASKED QUESTIONS

The following questions and answers are from the Medtronic website "asktheicd.com"

Can I use a Fitbit?

Yes, Fitbit trackers and other similar products have a low probability of interfering with your ICD.

Will Wi-Fi mess with my ICD?

Wi-Fi shouldn't be a problem as long as you keep your ICD at least 6 inches away from the wireless router and the receiver on your computer.

Is it safe to use a mobile phone?

Mobile devices are safe to use as long as you maintain proper distance between them and your ICD. This means no more carrying your phone in your front shirt pocket. If your phone is too close to your device, it could create cross-talk or interference with your ICD. Phones that operate at 3 watts or lower should be kept at least 6 inches away from your ICD. Phones that operate at higher than 3 watts must be kept 12 inches away.

I like falling asleep reading my Kindle and it usually ends up on my chest. Will this interfere with my ICD?

E-readers have wireless transmitters to work on data networks, so we recommend keeping them 6 inches away from your ICD. So, no, you shouldn't fall asleep with them snuggled up close.



THE ICD SUPPORT GROUP OF MANITOBA

www.icdsupportgroupofmanitoba.com

MAILING ADDRESS

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WEB SITES OF INTEREST:

WAVE is Winnipeg's Health and Wellness magazine. It is published 6 times per year by the Winnipeg Regional Health Authority. Hard copies are available throughout Winnipeg Hospitals. It can also be found online. If you want you can even subscribe for all future editions to arrive via email. Previous versions are available on the website. Articles often include updates on cardiac related topics. i.e. the Nov/Dec 2017 edition contains an article which says "The Winnipeg Regional Health Authority has welcomed the results of a report by the Canadian Institute for Health Information (CIHI) on cardiac care across the country. The Region's Cardiac Centre at St. Boniface Hospital is one of the highest volume cardiac centres in Canada and scored among the best in the country for all performance indicators - with particular success for indicators related to cardiac surgery results."

- www.wavemag.ca

The 16 week Cardiac Rehabilitation Program operates out of two medical facilities in Winnipeg, the Reh-Fit Centre and the Wellness Institute at Seven Oaks General Hospital. Review the Winnipeg Region Annual Report 2016-17.

- https://wellnessinstitute.ca/wp-content/uploads/2016/12/CRP-annual-report-2016-17final.pdf

STAFF CHANGES IN THE PACEMAKER / DEFIBRILLATOR CLINIC

Esther McGimpsey, Unit Coordinator for the Pacemaker / Defibrillator Clinic retired in May. Esther was the primary contact in the Clinic for our support group. We thank her for her guidance and support over the past several years and wish her the very best in retirement.

VOLUNTEER OPPORTUNITIES

We continue to be on the lookout for new additions to our volunteer board of directors. New thoughts and ideas are always welcome. We generally hold 3 or 4 board meetings per year. If you would like more information please contact Larry Sherman.

FEEDBACK

Let us know what types of topics you would like to read about in the newsletter or hear about at our support group meetings. Again, please contact Larry Sherman.