Aloha mai kākou,

Welcome to the Ho’omau Ka Pu’uwai Program, a heart failure education program made especially for Native Hawaiians and the people of Hawai‘i. This program consists of lessons, or ha‘awina, that are provided to you by trained health educators.

Ho’omau Ka Pu’uwai means to maintain the heart. You and your ‘ohana family will learn how to care for your heart and health so that you can live better and feel stronger.
Piha ‘ia ka pe’a, pi‘i ke ‘au, ke holo nei ka wa’a
“The sail is full of wind, the swells are rising, and the canoe is on its way”.

This ‘ōlelo nō'eau or Hawaiian proverb talks about the start of a new journey. You, the patient, are the ho’okele (navigator) of this wa’a (canoe) and in control of your own destiny.

The doctors, nurses, dietitians, pharmacists, educators and your ‘ohana are your support to help you reach your destination, the same way that wind and currents help the wa’a to sail.

What is Heart Failure?
Heart failure is when your heart is weak or stiff and is not able to pump blood to your body as well as it should. Because the heart is no longer a strong pump, some parts of your body do not get enough blood and oxygen. Also, blood backs up in the heart causing fluid to stay in the lungs, stomach, legs and feet.
Fluid buildup in the body causes:

- shortness of breath
- swelling of feet and legs
- chronic lack of energy
- swollen or tender abdomen with less of an appetite
- cough with frothy sputum
- difficulty sleeping at night due to breathing problems
- confusion and/or impaired memory
- increased urination at night

Heart failure is usually caused by a health problem that damages or overworks the heart muscle.

Some common ways in getting heart failure are:

- Heart attack
- High blood pressure
- Heart valve disease
- Heart muscle disease
- Too much alcohol
- Drug use, such as crystal meth (“Ice”) or cocaine

Other ways that make the heart work harder and can cause heart failure are: Diabetes, rapid or irregular heart beats, anemia, lung disease, kidney disease, thyroid problems, pregnancy and extreme stress.

Managing Your Heart Failure Symptoms
Pay attention to how you feel every day in order to manage your symptoms of heart failure.

Every Day:
- Weigh yourself in the morning after using the bathroom and before eating.
- Always use the same digital scale to weigh.
- Write down your weight on a log and compare it to yesterday’s weight.
- Take your medicines as ordered.
- Check for swelling in your stomach, legs and feet.
- Eat heart healthy foods that are low in sodium (salt).
- Remain active and take rest periods.
- Lose weight if you are overweight.
- Quit smoking, drinking alcohol, or abusing substances.
It is important to talk about what you would like to do and how to do it with others, such as your doctors, nurses, pharmacists, dietitians, educators in coming up with a good plan to take better care of your health. Also, just like you, the more your ‘ohana knows about heart failure, the better you can control it. Plus, they will know exactly what you need and how best to help you.

HEART FAILURE ZONES

What HEART FAILURE ZONE are you today? GREEN, YELLOW or RED?

<table>
<thead>
<tr>
<th>GREEN ZONE</th>
<th>Your symptoms are under control. You have:</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALL CLEAR</td>
<td>• No shortness of breath.</td>
</tr>
<tr>
<td></td>
<td>• No weight gain more than 2 pounds.</td>
</tr>
<tr>
<td></td>
<td>• No swelling of your stomach, legs or feet</td>
</tr>
<tr>
<td></td>
<td>• No chest pain</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>YELLOW ZONE</th>
<th>Call your doctor if you:</th>
</tr>
</thead>
<tbody>
<tr>
<td>CAUTION</td>
<td>• Gain more than 2 pounds in a day or 3 pounds or more in 1 week</td>
</tr>
<tr>
<td></td>
<td>• Feel more short of breath than usual</td>
</tr>
<tr>
<td></td>
<td>• Have more swelling (pehu) in the stomach, legs or feet</td>
</tr>
<tr>
<td></td>
<td>• Feel more tired (luhi) or have no energy</td>
</tr>
<tr>
<td></td>
<td>• Have a hacking cough (hano) and bringing up foamy or bubbling pink mucous</td>
</tr>
<tr>
<td></td>
<td>• Feel dizzy (poniuniu) or feel like you may pass out</td>
</tr>
<tr>
<td></td>
<td>• Have an uneasy feeling that something is not right</td>
</tr>
<tr>
<td></td>
<td>• Feel that it is harder to breathe when you lie down or need to sleep with more pillows or can only sleep sitting up</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>RED ZONE</th>
<th>Call 911 if you have any of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>EMERGENCY</td>
<td>• Chest pain for more than 15 minutes that does not go away</td>
</tr>
<tr>
<td></td>
<td>• Struggling to breathe or have shortness of breath that does not go away while sitting still</td>
</tr>
<tr>
<td></td>
<td>• Confusion (huikau) or can’t think clearly</td>
</tr>
</tbody>
</table>

It is important to talk about what you would like to do and how to do it with others, such as your doctors, nurses, pharmacists, dietitians, educators in coming up with a good plan to take better care of your health. Also, just like you, the more your ‘ohana knows about heart failure, the better you can control it. Plus, they will know exactly what you need and how best to help you.

Hili hewa ka mana’o ke ‘ole ke kūkākūkā.
“Discussion brings ideas together into a plan”.

It is important to talk about what you would like to do and how to do it with others, such as your doctors, nurses, pharmacists, dietitians, educators in coming up with a good plan to take better care of your health. Also, just like you, the more your ‘ohana knows about heart failure, the better you can control it. Plus, they will know exactly what you need and how best to help you.
This ‘ōlelo nō’eau speaks to the medicines you are taking for your heart failure.

Medicines are important for your heart failure because they can help you:

- Live longer
- Breathe more easily
- Have more energy
- Increase your activity level
- Have less swelling
- Stay out of the hospital

It is important to take all of your medicines the way the doctor says even if you are feeling better. These medicines will improve your health in the long run.

If you are taking all of your medicines and don’t feel good, be sure to tell your doctor. You may be feeling worse because of the heart failure, another illness or you may be having side effects from your medicines.

Regardless of what the reason might be, do NOT stop taking your medicines and do NOT make any changes without talking to your doctor first!
Here are some common heart failure medicines you may be taking, their side effects and what you should do about them.

<table>
<thead>
<tr>
<th>Medicine</th>
<th>Common Names</th>
<th>ACE Inhibitors (Angiotensin Converting Enzyme Inhibitors)</th>
<th>ARBs (Angiotensin Receptor Blockers)</th>
<th>Beta Blockers</th>
<th>Diuretics</th>
<th>Digital Preparations</th>
<th>Vasodilators</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>This is used to make it easier for your heart to beat.  It lowers your blood pressure and also protects the kidneys.</td>
<td>Coreg (carvedilol, immediate release) Coreg CR (carvedilol, extended release) Losartan (metoprolol, immediate release)</td>
<td>Aldactone (spironolactone)</td>
<td>Aperistine (hydralazine)</td>
<td>Aperistine (hydralazine)</td>
<td>Aperistine (hydralazine)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Torsemide (furosemide)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Tenormin (atenolol)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Avaspro (irbesartan)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Cozaar (losartan)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Diovan (valsartan)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Micardis (telmisartan)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Drisanes (ramipril)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Kaptin (lisinopril)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Prinivil (lisinopril)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Tenormin (atenolol)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Acebutolol (metoprolol)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Lopressor (metoprolol)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Toprol XL (metoprolol)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Tenormin (atenolol)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Coreg (carvedilol, immediate release) Coreg CR (carvedilol, extended release)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Aldactone (spironolactone)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Bumex (bumetanide)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Lasix (furosemide)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Torsemide (furosemide)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Tenormin (atenolol)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Avaspro (irbesartan)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Cozaar (losartan)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Diovan (valsartan)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Micardis (telmisartan)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Drisanes (ramipril)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Kaptin (lisinopril)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Prinivil (lisinopril)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Tenormin (atenolol)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Common Side Effects:

- Swelling of the face, eyes, lips, tongue
- Difficulty in swallowing
- Chest tightness
- Trouble breathing
- Dizziness
- Fatigue
- Headache
- Stuffy or runny nose
- Swelling of the face, eyes, lips, tongue
- Difficulty in swallowing
- Chest tightness
- Trouble breathing

Medicine Common Names

- Accupril (quinapril)
- Altace (ramipril)
- Capoten (captopril)
- Prinivil (lisinopril)
- Avaspro (irbesartan)
- Cozaar (losartan)
- Diovan (valsartan)
- Micardis (telmisartan)
- Drisanes (ramipril)
- Bumex (bumetanide)
- Lasix (furosemide)
- Torsemide (furosemide)
- Tenormin (atenolol)

Less Serious Side Effects

- Dry, unproductive cough
- Dizziness
- Nausea
- Fatigue
- Headache
- Stuffy or runny nose
- Swelling of the face, eyes, lips, tongue
- Difficulty in swallowing
- Chest tightness
- Trouble breathing

Serious Side Effects

- Swelling of the face, eyes, lips, tongue
- Difficulty in swallowing
- Chest tightness
- Trouble breathing
- Dizziness
- Fatigue
- Headache
- Stuffy or runny nose
- Swelling of the face, eyes, lips, tongue
- Difficulty in swallowing
- Chest tightness
- Trouble breathing
A healthy diet is important for everyone, but above all, especially if you have heart failure.

A healthy diet for your heart should be low in sodium or salt, low in fat, low in cholesterol and high in fiber.

Sodium is a mineral that is important for fluid balance in our bodies. Eating a low sodium or salt diet helps to control your heart failure and stay out of the hospital.

Eating too much sodium makes your kidneys hold onto fluid and cause swelling in the lungs, stomach, legs and feet. This will cause you to feel bloated, puffy, short of breath, and sick. You may need to come to the hospital to feel better.

Medication Calendar

A medication calendar can help you remember what medicines you are taking for your heart failure and when to take them.

It is a good idea to take this calendar to all your doctor’s office visits so your doctor can help you come up with a good plan to take better care of your health.
Reading food labels will give you an idea on how much sodium there is in that food item.

Food labels can be confusing, but keep in mind the following:

- **Sodium free**: less than 5 mg of sodium per serving
- **Low sodium**: 140 mg or less of sodium per serving
- **Reduced sodium**: at least 25% less sodium compared to the original food
- **Unsalted/No Added Salt**: no salt (sodium and chloride) is added, but it may contain a different type of sodium like monosodium glutamate or MSG

Regular table salt is a combination of sodium and chloride. This is the salt we use when we cook and put in our salt shaker. Hawaiian salt is the same as regular salt and sea salt. Most foods contain sodium naturally without adding any sodium or salt.

Our bodies only need a small amount of sodium a day for your body to work. One teaspoon of salt contains 2,300 mg of sodium. You are allowed to have 1500 mg of sodium a day when you have heart failure.

On the average, local people eat about 4,000 to 6,000 mg of sodium a day. While salt does make food taste ‘ono (delicious), the trouble is that we use too much of it. Over time after eating less sodium, your taste will change and low sodium foods will taste better to you.

A sample plan in sticking to 1500 mg of sodium a day may look like this:
- Breakfast - 400 mg
- Lunch - 500 mg
- Dinner - 500 mg
- Snacks - 50 mg twice a day

Ways to limit your sodium intake:
- Eat fresh foods and less processed foods
- Do not add salt or salty sauces like shoyu to your food
- Use herbs and salt-free spices
- Read the food labels

About 77% of the sodium we eat is not from the salt shaker but from processed foods. These are foods that are canned, packaged, frozen or dried, such as luncheon meat like SPAM, saimin with soup base, frozen chili and beef jerky.
When starting, do not rush...take it slow and gradual. Eventually you should be exercising for 20-30 minutes a day on most days of the week. This amount of time can be spread out throughout the day.

Walking is a good choice for many people because it is easy to start and can be easily adjusted. The main thing is that you start being active.

An example of a gradual physical activity program:
- 5 minutes, 4 times a day
- 10 minutes, 3 times a day
- 15 minutes, 2 times a day
- 20-30 minutes, 1 time a day

Signs and Symptoms of Overexertion
When exercising, pay attention to signs and symptoms of overexertion:
- Feeling more fatigued than usual
- Breathing harder than usual
- Feeling dizzy

STOP and REST!
If the symptoms go away after rest, resume your activity at a slower pace and call your doctor.

If you have any of the following signs and symptoms with activity:
- Chest pain or tightness
- Pain in your jaws or arms
- Trouble with breathing
- Feel like fainting
- Extreme exhaustion
- Severe sweating
- Nausea or vomiting

STOP and REST!
If the symptoms do not go away after rest, call your doctor right away or call 911 for help.
Sexual Activity

Sex is good and okay to do even with heart failure. Sexual activity is not dangerous to your heart. It may not be as easy as before, but can still be part of your life.

If you want to enjoy sex, talk openly...mai hilahila...with your partner. Also, try other ways of being physically close and show your aloha with each other.

Whatever physical activity you do, **always listen to your body**. The Rate of Perceived Exertion (RPE) Scale provided will give you a guideline as to how hard you are working. You should never exercise over number 5 “hard.”

---

### Rating of Perceived Exertion (RPE) Scale

The RPE scale is used to measure how hard you are exercising from 0-10. When you exercise, you want to be in the green and yellow zones.

<table>
<thead>
<tr>
<th>Rate of Perceived Exertion (RPE)</th>
<th>Level of Difficulty</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Nothing at all</td>
</tr>
<tr>
<td>0.5</td>
<td>Just noticeable</td>
</tr>
<tr>
<td>1</td>
<td>Very light</td>
</tr>
<tr>
<td>2</td>
<td>Light</td>
</tr>
<tr>
<td>3</td>
<td>Moderate</td>
</tr>
<tr>
<td>4</td>
<td>Somewhat hard</td>
</tr>
<tr>
<td>5</td>
<td>Hard</td>
</tr>
<tr>
<td>6</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Very hard</td>
</tr>
<tr>
<td>8</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Very, very hard</td>
</tr>
</tbody>
</table>

---

‘Oluʻolu ka nāʻau; ikaika ke kino.
“When one is happy and content, the body is made stronger.”
Emotions
Having heart failure can affect your sense of well-being. It is common to feel upset or worried after finding out you have heart failure. It is also common to feel sad or depressed (kaumaha) or anxious (pū'īwa). These kinds of negative emotions can affect your ability to manage your heart failure. Learning how to deal with these emotions is part of taking control of heart failure.

Depression
Here are some symptoms of depression you need to look for:
• Kaumaha or sadness and feeling down
• Hūhū or irritable and angry often
• No interest in things you used to enjoy doing
• Sleeping too much and too long
• Not caring about the future and having thoughts of dying

Anxiety
Here are some symptoms of anxiety you need to look for:
• Hopohopo or worry too much
• Maka'u or afraid
• Feeling very tense, wound up, edgy or shaky
• Cannot keep still too long

Stress
Stress also can make controlling heart failure harder. Stress is like an emotion. When things in life become too much to handle, we may feel overwhelmed, not in control, or huikau (the mind scattered all over the place).

Common Ways to Manage Your Feelings and Stress
• Make it a priority to take more control over your heart failure
• Follow your treatment plan
• Talk about your feelings with someone
• Remember the important things in life and ask your ohana and friends for support
• Be physically active
• Take time out, take deep breaths and enjoy the nani (beauty) of our island home

Action Plan for a Healthy Heart
I promise to:
- Weigh myself everyday and watch for symptoms
- Call my doctor if I gain too much weight and when problems gets worse
- Take all my medicines
- Eat a heart healthy diet with less sodium (salt)
- Monitor the amount of fluid I drink
- Lose weight if I am overweight
- Quit smoking, stop drinking alcohol or stop using drugs
- Stay active most days and rest when tired
- Reduce stress and enjoy life!

Ma ka hana, ka 'ike.
"It is by doing that one acquires the knowledge".