

Going home after your heart surgery

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Introduction

Although you will be given advice about your recovery during your stay in hospital, it may be difficult for you to remember everything. We hope this booklet will help. Please take time to read it before you leave and feel free to ask the nurses or physiotherapist any questions you may have.

We know that for many patients going home after their heart operation can be a great relief, but it can also be quite daunting. Remember you are not alone.

The **cardiac rehabilitation nurses** at Guy's and St Thomas' can support you and your family. You can contact them on **020 7188 0946**. They work Monday to Friday, between 9am and 5pm. If they are unable to answer your call or you ring outside these hours, please leave your name and number on the answering machine and you will be contacted as soon as possible.

You can also contact the **cardiac rehabilitation physiotherapist** if you have questions about physical activity and exercise. Call **020 7188 3026** and ask for **bleep 1437**.

If you have an urgent medical problem, contact your GP or NHS Direct (0845 4647) immediately, or go to your local accident and emergency (A&E) department.

Before you leave the ward...

1. Your nurse will check your wound. Usually patients go home without dressings over the wound and often stitches are dissolvable. If for any reason you have stitches that need removing, your nurse will advise you.
2. The internal wires around your breastbone will not be removed. It is important that all other wires and needles are removed before you go home. Please tell your nurse if this has not been done.
3. You will usually be supplied with at least 14 days of medicines when you leave hospital. Some medicines are taken for shorter periods or on a 'when required' basis. In this situation you may receive less than a 14-day supply. Some medicines are supplied as a 'calendar pack' containing 28 days of treatment.
4. You will be given a letter about the medicines you are taking – please give this to your GP. You should continue to take these medicines until your outpatient appointment unless you have been advised otherwise.
5. If you take warfarin tablets you will receive information and arrangements for follow-up blood tests locally, which you will need to have regularly.

Your journey home

- Please arrange your own transport home and make sure you will be accompanied on your journey home. Hospital transport is only available in certain circumstances – your nurse can give you more information about this.
- Do not carry heavy bags home as you need to avoid strain on your wound site for six weeks after your operation. Anything heavier than a half a kettle of water is too heavy.
- Ask your nurse for some painkillers before you leave the ward so your journey is more comfortable. If you take water tablets, speak to your nurse about the best time to take them. This may help to prevent you needing to find a bathroom during your journey.
- Wear loose, comfortable clothing and shoes.
- Wear a seatbelt if travelling by car. You can make this more comfortable by using a small pillow or towel between your chest and seatbelt.
- A long journey can be more comfortable if you stop for frequent breaks.
- If travelling by train, confirm a suitable time with the nurse before you book tickets. If you need assistance at the station, you should contact the train operator, ideally 24 hours in advance.

Home sweet home...

Emotional reactions

When you first return home you may feel physically and emotionally tired. During the first few weeks, you may also experience changes in your mood.

Although it can be a huge relief for both you and your family to be home again, it can take time to re-establish normal routines and balance in your life. It is very common to have good days where you feel really positive and feel that you are making progress, but also bad days where you feel down, emotional or tearful.

Other common, short-term problems include a loss of concentration or short-term memory. All these reactions are normal and it can be very helpful to discuss how you are feeling with your partner or another family member.

Wound care and healing

It is important that you look at your wound every day.

- You will be referred to a community nurse if you have a dressing on your wound at home.
- If you do not have a dressing on your wound, please keep it clean by having a wash or shower daily. You can wash your hair as well but make sure all of the shampoo is washed away from the wound area.
- Please avoid using perfumed soaps, creams or powder on your wound as these can cause irritation.
- The use of deodorant, aftershave or perfume is fine as long as you avoid putting them on your wound area.

Your scars may feel itchy or numb – this is a normal part of healing. It is important to remember to wash your hands regularly to prevent infections. Try to avoid scratching your wound as this can also introduce infection. You may also have a small notch of skin at the top of your chest wound, this will settle gradually as the wound heals.

Contact your GP if your wound becomes red, swollen, painful or starts to weep.

Shortness of breath

It is quite normal to feel slightly puffed on exertion for some time after your surgery. This should start to get better as you become more active.

If you notice you are short of breath at rest, or are becoming more short of breath on exertion, it is important you contact the cardiac rehabilitation nurses or speak to your GP.

You may find you cough up phlegm (sputum) when in hospital – this should get better by the time you get home. If you notice you are coughing up more phlegm or it is discoloured, speak to your GP.

Swollen ankles

You may find that your ankles swell after surgery. You can relieve this by keeping active and resting your legs up on a stool when you are sitting. The swelling should go away soon after you get home. If it does not, call our advice line (contact details on page 27).

If you have had a vein removed from your leg, the leg will be prone to swelling for the first couple of months, but will gradually settle. Avoid crossing your legs when sitting or lying as this can restrict the blood flow to them, and increase swelling.

<p>Resting your legs on a stool or low table and moving your ankles regularly will help to relieve swelling.</p>
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Hallucinations and dreams

It is very common following heart surgery to think that you can see things that are not really there. Some people also have very strange dreams. This is may be caused by effects of the operation, anaesthetic and medications. This should return to normal but if it does not, speak to the cardiac rehabilitation nurse or your GP.

Eyesight

Your eyesight may be affected by your operation. Some people complain of blurring or double vision. This should return to normal within about three months. You should ensure your GP is aware of these symptoms. If you wear glasses, wait about three months before going to the optician.

Your heartbeat

Sometimes your heart may feel as if it is racing or missing a beat. This is quite common following heart surgery. It is a reaction to your heart being handled by the surgeon.

Some people may be treated with medication but often the heartbeat will return to normal spontaneously. If however you feel unwell when experiencing this, or if it is prolonged or happens frequently, you will need to speak to your GP.

Sleeping patterns

It may take some time to get back into your normal sleeping pattern.

- ♥ You can sleep in whichever position you find comfortable.
- ♥ You may find you want an afternoon nap when you get home. This is ok, but try not to stay in bed for too long, as you may then have difficulty sleeping at night.
- ♥ If you have ongoing sleeping problems, talk to your GP or call our advice line (contact details on page 27).

Constipation

This is a very common problem after your operation. It is the result of the painkillers and a change in diet and routine.

Going home and returning to normal eating habits will often help bowel patterns to return to normal. Drinking plenty of fluids and including fruit, vegetables and fibre (for example cereals, brown bread, brown rice) in your diet should help. If constipation remains a problem, speak to your pharmacist about medication that can help. You should not stop taking your painkillers.

Healthy eating

Loss of appetite, sense of smell and sense of taste can occur during the recovery period, but should return to normal. In the first few weeks after your operation it is important to eat a balanced diet. You should not try to diet or lose weight during your initial recovery period as you will need to regain your strength.

- ♥ Try to include some portions of fruit, vegetables and fibre. Aim for five portions of fruit and vegetables a day.
- ♥ Initially you may not feel like eating large meals, so you will need to eat small snacks throughout the day.
- ♥ If you have been advised to make changes to your diet, do this gradually.
- ♥ If you are already on a special diet for another medical condition, you should continue to follow this.
- ♥ It is recommended that you drink alcohol in moderation. The recommended amounts are 21 units a week for men and 14 units a week for women. One unit equals a half-pint or a small glass of wine or a pub measure of spirit. **You should not drink alcohol when taking certain medicines – please read the information sheet given with your medicines.**
- ♥ Healthy eating will be covered in your cardiac rehabilitation course and further information can be obtained from your cardiac rehabilitation nurse, dietitian, GP or practice nurse.

Aches and pains

Chest pain: You should no longer need to use your GTN spray. If you do experience chest pains that you feel do not come from your wound, speak to your GP or go to your local accident and emergency (A&E) department.

Wound pain: It is normal to have some discomfort around your wound area at first. This will gradually lessen over the next few months. You may also experience pain and stiffness around your chest, back and shoulders, as the muscles and ligaments that are stretched during surgery heal.

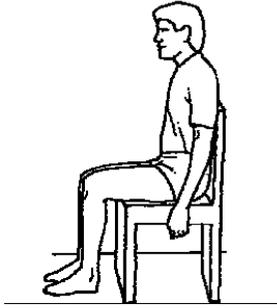
Most people need to take regular pain relief for at least the first three to four weeks. Some people need to take occasional pain relief up to eight weeks or longer after their operation. Gradually cut down the amount you are taking as you feel ready.

If you find pain is a problem:

- Have some pain relief by your bed with a glass of water ready to take 20 minutes before you get up in the morning.
- Taking some pain relief before you go to bed may help you get a good night sleep.

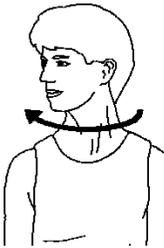
The following stretches can be used for the first few weeks after your surgery to help relieve stiffness.

- ⇒ Do three repetitions of each stretch two times a day.
- ⇒ Make sure you maintain a good posture.
- ⇒ You can use them as a warm up/cool down before/after your walk.
- ⇒ Stop these stretches when you no longer feel stiff or pain in the mornings.



Good posture is important – when sitting try not to slouch.

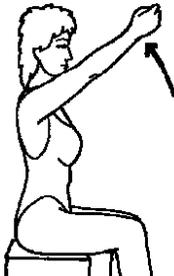
Sit tall with your shoulders comfortably back.



Ensure you take your neck through full range every day. Do these exercises five times to each side.



Circle your shoulders 10 times in each direction.



Make sure you can take your arm forward reaching to the ceiling. Repeat 10 times with each arm.

Activity, exercise and rest

Why exercise?

Taking regular exercise is extremely important to optimise the benefits achieved by your surgery.

- ♥ It will help you regain your cardiovascular fitness and return to your everyday activities.
- ♥ It helps to control blood pressure, weight and cholesterol. This lowers your risk of coronary heart disease in the future.
- ♥ It gives you a feeling of well-being and increases confidence and quality of life.
- ♥ Exercise helps to prevent osteoporosis and constipation, and improves balance, co-ordination, flexibility and circulation.

What type of exercise?

Walking is an ideal form of exercise. If the heart problems you had before your operation limited your ability to exercise, you will have naturally lost some of your fitness. Gradually build up the distance you can walk. Begin by walking the distance you were walking in hospital in the first week you are home. Increase the time you are walking by five minutes every two to three days.

Goal: To be able to comfortably walk briskly for 30 minutes, five days a week, six weeks after leaving hospital.

Guidelines for walking

Do:

- ⇒ Begin with the distance you were walking in hospital.
- ⇒ Gradually increase the distance every two to three days.
- ⇒ Remember to use the stretches as a warm-up and cool-down.
- ⇒ Be aware that it will be more difficult if it is very cold, hot or windy.

Start each walk slowly.

Build up to a brisk pace.

Finish by slowing back to a steady pace.

Don't:

- ⇒ Exercise for an hour after eating to avoid indigestion.
- ⇒ Over exercise, so you are exhausted at the end.
- ⇒ Continue if you experience angina pain, nausea, dizziness, marked breathlessness, or become cold and clammy (get medical help if this happens).

Finding it difficult to get motivated?

The hardest part is usually stepping through your front door! Once you do that, you will probably want to continue. Record your progress in the exercise diary at the back of this booklet, so you can see how much you have improved.

How should I feel during exercise?

It is important to pace yourself and listen to your body when exercising. To get the benefits of exercise you should feel:

- a little warm
- a slight increase in your heart rate, and
- slightly short of breath during exercise.

However, you should still be able to talk easily.

Look at the scale on the next page and use it to rate how you feel every time you exercise. You should aim to be around 11. You should **never** reach level 17 – it is not necessary to work this hard to improve your cardiovascular fitness.

It is normal to have good and bad days during your recovery and this will be reflected in your exercise ability. It is important to listen to how you are feeling and take each day at a time. Monitor your progress by using the exercise diary at the back of this booklet or your calendar. Keep a record of when you exercise – for example, write down the type of exercise, how long you did it for and how you felt on the scale.

Speak with your physiotherapist if you have other medical conditions which affect your ability to walk or exercise. S/he may be able to help you plan exercise programme which is suitable for you.

The 'How does exercise feel?' scale

- 6 No exertion at all
- 7 Extremely light/just noticeable
- 8
- 9 Very light/very easy
- 10
- 11 Light/easy
- 12 Just starting to feel puffed
- 13 Somewhat hard, feeling a bit puffed but able to talk
- 14
- 15 Hard/difficulty talking/out of breath
- 16
- 17 Very hard/unable to talk/very tired
- 18
- 19 Extremely hard/exhausted
- 20 Maximal exertion/collapse

Get active!

An active lifestyle will help you to obtain the benefits of exercise and improve your fitness. Try to incorporate exercise into your daily activities, for example:

- ♥ walk upstairs instead of taking the lift
- ♥ get off the bus/tube a stop earlier and walk and/or if you drive, park further from your destination.

One way to monitor how active you are is by using a pedometer. It attaches to your waistband and shows how many steps you have taken throughout the day. A pedometer can be ordered by emailing info@be-activeltd.co.uk or by calling 01202 888508.

Rest

It is also very important that you get enough rest each day, especially following exercise. Don't be tempted to do too much too soon. Pace yourself by spreading essential tasks evenly throughout the day and asking yourself if it needs to be done at all. It is quite likely that you will have lots of well wishers when you first arrive home. Try and limit the number of visitors in the first few days as you can become tired very quickly.

Returning to everyday activities

Lifting, domestic and gardening activities

Your breastbone (sternum) is divided during the operation and takes about three months to heal. During this time it is important that you do not put too much strain through your chest or shoulders.

You must avoid heavy lifting, pushing and pulling for at least six weeks, you can then gradually increase amounts lifted. This means you should not be carrying heavy bags or saucepans, lifting young children, vacuuming, digging or mowing the lawn.

As a guide you can lift half a kettle of water, or equivalent, with one arm, so you can make a drink, boil an egg and so on. If you feel able, you can do light housework, such as washing up and dusting. You can start light gardening activities, such as weeding and pruning as soon as this comfortable.

When possible use both hands to lift an object (to split the load) and carry the item close to your body. If you usually walk a dog on a lead, you will need to ask someone to accompany you to do this for the first six weeks.

Sexual activity

Many cardiac patients suffer with sexual problems and may have done so for some time before their cardiac surgery. As many as three out of five men will suffer erection problems – this can be caused by a combination of furring up of the arteries that supply the penis, and also sometimes by emotional pressure or worry. It is not uncommon for women to also suffer sexual problems.

There is a perception that sexual activity is very strenuous for the heart. We know that sex is no more stressful than 15 minutes of brisk walking, light housework or gardening – as soon as you can do these things without symptoms, you can feel confident to resume sexual activity.

It is very normal after surgery to feel anxious about general tiredness and your wound, so it is important when engaging in sexual activity to find a comfortable position that protects your wound. If you are experiencing sexual problems or if your sex life does not return to normal and you and your partner feel worried by this, do contact your cardiac rehabilitation nurse or your GP, who will be happy to discuss this with you. Alternatively, you can contact in confidence either the:

Sexual Dysfunction Association

t: 0870 7743571

Cardiac Specialist Nurse for Sexual Dysfunction

t: 020 7188 0727

Driving

There is a legal requirement not to drive for four weeks after surgery, but it is advisable not to drive for six weeks. This is to allow time for your reactions, eyesight and concentration to return to normal, and for your breastbone to heal.

It is important that you let your insurance company know of your heart surgery, although this should not mean a change in policy.

Not informing them may invalidate your insurance.

If you have problems with your company, there is a list of insurance companies available from the British Heart Foundation advice line that is sympathetic to those with heart problems. You only need to inform the DVLA if you hold a HGV or PSV licence, or if you have any ongoing heart problems.

DVLA
t: 0870 600 0301

Work

Do not return to work before your follow-up appointment with your surgeon. The nature of your work will be taken into account. As a guide you should wait:

- ⇒ 8 weeks for light work
- ⇒ 12 weeks for heavy physical work

It is advisable to have a gradual return to work where possible, with lighter duties or reduced hours.

Travel abroad

We advise you not to take a long-haul flight for six to eight weeks after your surgery. This is because there is a higher risk of developing a DVT (deep vein thrombosis, also known as a blood clot) after surgery.

If you decide to take a holiday in the first few months following your surgery, remember to continue to pace yourself and to choose a holiday destination where there are good medical provisions should you need them.

Always make sure your travel insurance company is aware of any health matters. The British Heart Foundation has a list of sympathetic insurance companies (see page 23 for contact details).

Other types of exercise/sport

For the first six weeks of your recovery, you should only continue with more gentle forms of exercise, such as walking, walking up stairs or using a stationary exercise bike. Long-term, you should be able to return to most sports and activities you previously enjoyed. You are advised to speak to your doctor, or wait until your review at the cardiac rehabilitation assessment clinic, before returning to or starting any other activities.

Cardiac rehabilitation

Cardiac rehabilitation programmes help you and your partner to recover and get back to normal following your heart problem. They also help you to adapt to life with heart disease in the long-term. Most programmes include:

- ♥ Information and discussion sessions about how to keep your heart healthy and prevent further problems.
- ♥ Stress management and relaxation – helping you to cope with life’s day-to-day stresses and adapting to life with heart disease.
- ♥ Exercise – helping you to regain physical fitness and confidence in being active.
- ♥ Support from health professionals and other patients.

What are the benefits?

We know that people who attend cardiac rehabilitation programmes have an improved quality of life and better long-term outlook. It can also help with return to work and everyday activities. Speak with your doctor or nurse if you are unsure about attending a programme.

You will benefit most from cardiac rehabilitation if you are able to attend all the components, but most programmes will adapt to suit your needs.

Most programmes will encourage you to take your partner, family member or friend to help lessen their fears as well, and give them the opportunity to ask any questions.

Where is it held?

Cardiac rehabilitation programmes are run by most large hospitals throughout the UK, either at the hospital or a centre close by. The nurses at Guy's and St Thomas' can tell you where to find a programme close to you.

How can I find out more?

The cardiac rehabilitation nurse will send your details to your local hospital who will then contact you about their programme.

Final words

As you move on in your recovery you will probably be discharged from the care of the hospital team. Your GP and practice nurse will be responsible for your long-term care. If you have coronary heart disease you should make sure that they check your blood pressure and cholesterol levels at least once a year. Your medicines should also be checked regularly. They will also help you if you need longer-term support in making lifestyle changes or if you have ongoing problems.

Exercise Diary	Week 1	Week 2	Week 3
Monday	For example, walked 5 minutes. 11 on exercise scale. Felt OK.		
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

Exercise Diary	Week 4	Week 5	Week 6
Monday	For example, walked 20 minutes (12 on exercise scale).		
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

Support and advice

The cardiac rehabilitation team and the cardiology nurse case managers are available for further support Monday to Friday, 9am to 5pm.

Please call the **cardiac rehabilitation team's advice line** on **020 7188 0946**.

If you would like more information on any other issues relating to heart disease, please contact the **British Heart Foundation Information Line** on **08450 70 80 70** or visit **www.bhf.org.uk**

Contact us

Pharmacy medicines helpline

For information about any medicines that you have been prescribed at Guy's and St Thomas' hospitals, you can speak to the staff caring for you or call our helpline.

t: 020 7188 8748 9am to 5pm, Monday to Friday

Patient Advice and Liaison Service (PALS)

To make comments or raise concerns about the Trust's services, please contact PALS. Ask a member of staff to direct you to the PALS office or:

t: 020 7188 8801 at St Thomas' **t:** 020 7188 8803 at Guy's **e:** pals@gstt.nhs.uk

Knowledge & Information Centre (KIC)

For more information about health conditions, support groups and local services, or to search the internet and send emails, please visit the KIC on the Ground Floor, North Wing, St Thomas' Hospital.

t: 020 7188 3416

Language support services

If you need an interpreter or information about your care in a different language or format, please get in touch using the following contact details.

t: 020 7188 8815 **fax:** 020 7188 5953

NHS Choices

Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.

w: www.nhs.uk

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