



Reducing your Risk of
Heart Attack
and **Stroke**



a helping
hand to
making a
difference

Based on *The New Zealand Cardiovascular
Guidelines Handbook (2009)*



Introduction



This booklet has been written to help you and your doctor or nurse assess your risk of developing cardiovascular disease (heart, stroke and blood vessel disease).

By knowing your personal risk of developing cardiovascular disease, you can make important changes to improve your health and reduce your risk.

Included in this booklet is information on various cardiovascular disease risk factors and ways to reduce them. With the right information and action you can make the choice to live a long and healthy life.

Remember, life is for living and enjoying!

We recommend that you work through this booklet with your doctor, nurse or health professional. They can provide you with individualised information and advice.

If you require any further details on the information included in this booklet, please contact the Heart Foundation on 09 571 9191 or visit www.heartfoundation.org.nz

This booklet is based on *The New Zealand Cardiovascular Guidelines Handbook (2009)*. Copies available from the New Zealand Guidelines Group: www.nzgg.org.nz

This booklet was produced by The New Zealand Guidelines Group and The National Heart Foundation of New Zealand.

Contents

1 Section One – Background

Cardiovascular disease

2 Section Two – Risk Assessment

Risk tables

Personal record

Goals

3 Section Three – Tackling your Risk Factors

Eating and nutrition

Physical activity

Weight management

Smoking

Blood pressure

Cholesterol

Managing diabetes

Medication

4 Section Four – Planning Ahead

Resources

1 Background

Cardiovascular disease

Most heart attacks and strokes are preventable, yet every day more people in New Zealand die from cardiovascular disease than from any other cause.

Heart attacks, angina, strokes, transient ischaemic attacks (TIAs) and peripheral vascular disease are all forms of cardiovascular disease.

By knowing your personal risk of developing cardiovascular disease, you can make important changes that will improve your health and reduce your risk.

Your risk of having a heart attack or stroke can range from mild to very high, based on your risk factors. People with diabetes are at an increased risk of cardiovascular disease, even before assessment of all other risk factors.

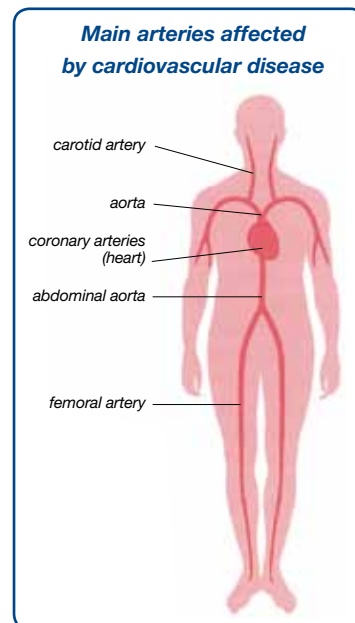
Your doctor, nurse or health professional can assess your risk factors and estimate your risk of suffering a heart attack or stroke in the next five years.

This booklet will take you through four easy steps:

- 1. Risk assessment** – Assess your risk of having a heart attack or stroke
- 2. Make a plan** – Plan your goals and changes in your life that will improve your health
- 3. Options** – Ways to tackle your risk factors, including lifestyle changes and drug therapy
- 4. Check-ups** – Plot your progress over time.

Many heart attacks and strokes are preventable.

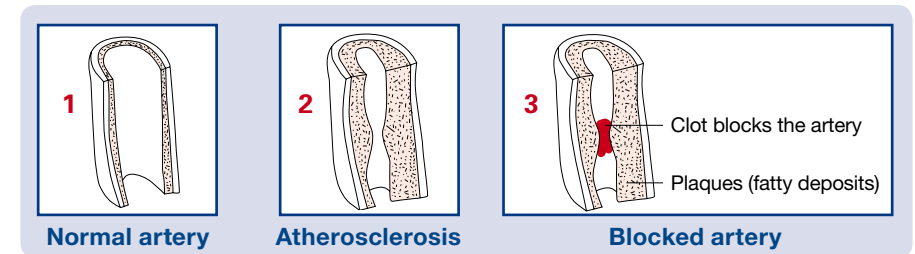
With the right information and action, you can make the choice to live a long and healthy life.



1 Background

What causes cardiovascular disease?

Over time, fatty deposits can build up in the walls of your arteries causing narrowing. This is called atherosclerosis. A blood clot may then form on top of this, causing the artery to become blocked. If this occurs in the arteries that supply your heart muscle, it will cause a heart attack. If it is a blockage in the arteries to the brain, it will cause a stroke.



Who is at risk of cardiovascular disease?

There are some clues, called risk factors, which indicate if you are likely to develop cardiovascular disease.

The good news is there are many risk factors you can change to improve your health and reduce your risk of having a heart attack or stroke.

Risk factors that you can change include:

- Eating pattern
- Physical inactivity
- Being overweight
- Smoking
- High blood pressure
- High blood cholesterol
- High blood glucose (sugar)

Risk factors that cannot be changed include:

- Age
- Ethnicity
- Gender
- Having a family history of heart attack or stroke

The more risk factors you have, the more likely you are to have a heart attack or stroke.

You can estimate your risk by doing a 'Cardiovascular Risk Assessment' with your doctor, nurse or health professional.

2 Risk Assessment

The purpose of a risk assessment is to see whether you are likely to develop angina or have a heart attack or stroke in the next five years.

Your doctor, nurse or health professional will assess what level of risk you have, which will be shown as a percentage. For example, if your risk is high, e.g. 20%, and there were 100 people like you (without treatment), then approximately 20 of these people would have a heart attack or stroke in the next five years.

Based on your risk level, your doctor, nurse or health professional can discuss lifestyle advice and treatment options with you to reduce your risk. They will also advise you on how often you will need a risk assessment, which can vary from one to ten yearly, depending on your level of risk.

When to have a risk assessment

You should have a risk assessment from:

- 45 if you are a man
- 55 if you are a woman

Some people need a risk assessment ten years earlier

Have a look at the list below. If you answer 'yes' to any of these, then you should have a full risk assessment ten years earlier, i.e. men from 35 and women from 45.



Do you have, or are you, any of the following...?

- Maori, Pacific person, from the Indian sub-continent or Fiji
- A smoker
- High cholesterol
- High blood pressure
- Overweight
- A family history of cardiovascular disease or diabetes
- Diabetes (or at risk of diabetes)
- Had diabetes in pregnancy
- Renal impairment
- Polycystic ovary syndrome.

2 Risk Assessment

With your doctor or health professional, write in your details below. Then using the risk charts on the next pages, you can calculate your risk level.

	Levels	Date
Age		
Gender		
Do you have diabetes?		
Do you smoke tobacco?		
Cholesterol (TC:HDL Ratio)		
Blood pressure (systolic/diastolic)		
Have you had a heart attack, angina or a stroke?		
Risk category		

Individual risk

Based on this information a picture of your risk for cardiovascular disease can now be built. Your risk is calculated on an individual basis, using the charts overleaf, to see if your blood pressure, cholesterol level and blood glucose (sugar) are too high for you as an individual.

It is recommended that generally the **lower your levels the better**.

2 Risk Assessment

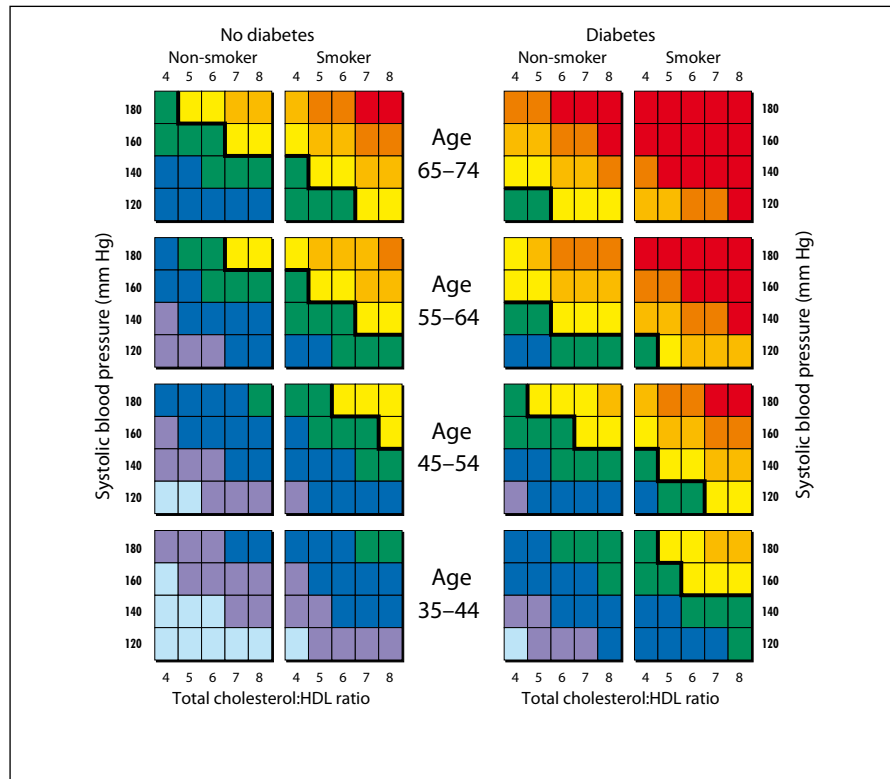
→ Risk charts

These risk charts can be used to calculate your risk of cardiovascular disease over a five year period.

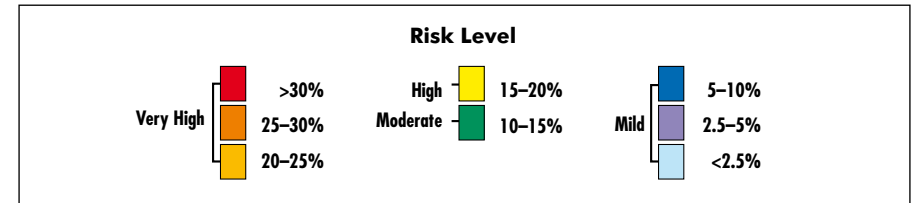
- Identify the chart relating to your gender, diabetic status, smoking history and age
- Identify the coloured square nearest to your blood pressure and cholesterol ratio
- If you are from any of the following groups, move up one risk level i.e. one coloured square – Māori, Pacific people or Indian descent

The colour of the box will tell you what level of risk you have.

Risk Charts for Women

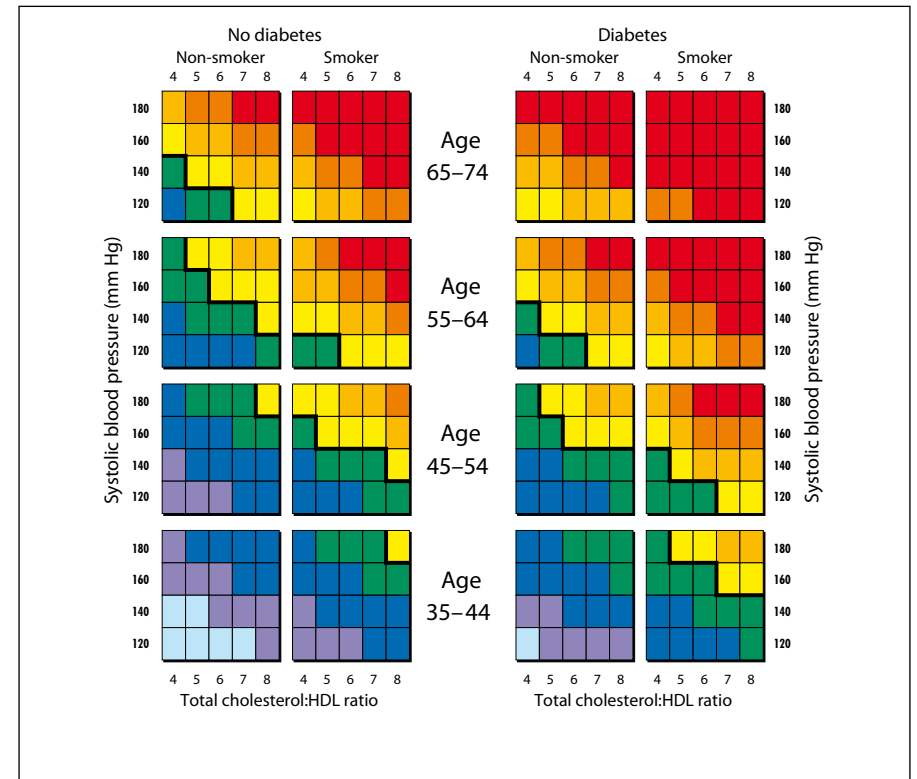


2 Risk Assessment



Your doctor, nurse or health professional will take into account your body weight, waist circumference, family history and other factors and adjust your risk level accordingly.

Risk Charts for Men



3 Tackling your Risk Factors

This section looks at risk factors that you can change.

The type of approach and lifestyle changes that you need to implement to prevent a heart attack or stroke will be based on your individual level of risk. The higher your risk, the more important it will be to take control of your risk factors.

If your risk of having a heart attack or stroke in the next five years is mild to moderate, then your doctor, nurse or health professional will discuss lifestyle options with you. These may include what food is best for you, physical activity levels and stopping smoking.

If your level of risk is more than moderate, then your doctor, nurse or health professional will discuss lifestyle changes and may also discuss drug treatment options with you.

Let's look at the following risk factors:

- Eating and nutrition
- Physical activity levels
- Weight
- Smoking
- Blood pressure
- Cholesterol
- Diabetes



3 Tackling your Risk Factors

→ Eating and nutrition

What you eat really does matter. By choosing the right balance of foods to eat, you can reduce your chances of having a heart attack or stroke. The correct balance of foods will also complement any medicines that may have been prescribed to you by your doctor.

There are many ways to enjoy a heart healthy eating pattern using foods and recipe ideas from a variety of traditional and cultural eating styles.

The Heart Foundation's nine-steps to eating for a healthy heart:

1. Enjoy three meals a day, selecting from dishes that encourage you to eat plant foods and fish and with little or no dairy fat, meat fat or deep fried foods
2. Choose fruits and/or vegetables at every meal and for most snacks
3. Select whole grains, wholegrain breads, or high-fibre breakfast cereals in place of white bread and low-fibre varieties for most meals and snacks
4. Include fish, or dried peas, beans and soy products, or a small serving of lean meat or skinned poultry, into one or two meals each day
5. Choose low fat milk, low fat milk products, soy or legume products every day
6. Use small amounts of oil, margarine, nuts or seeds
7. Drink plenty of fluids each day, particularly water, and limit sugar-sweetened drinks and alcohol
8. Use only small amounts of total fats and oils, sugar and salt when cooking and preparing meals, snacks or drinks. Choose ready-prepared foods low in these ingredients
9. Mostly avoid or rarely include butter, deep-fried and fatty foods, and only occasionally choose sweet bakery products.

The following tables help to describe the quantity of food needed to support a heart healthy eating pattern. By choosing foods mostly from the 'heart healthy food' groups and limiting 'other foods' you can lower your individual risk of cardiovascular disease.

3 Tackling your Risk Factors

Heart healthy foods

Heart healthy food groups	Daily servings	How much is a serving?
Fruits and coloured vegetables	Aim to eat at least 8 servings daily	1 piece of fruit, ½ cup canned fruit in natural fruit juice, 1 cup raw leafy or salad vegetables, ½ cup cooked vegetables, 1 tomato or 1 carrot
Grains and starchy vegetables <i>Choose a variety of grain products (at least half of these should be whole grain products)</i>	Aim to eat at least 6 or more grains and starchy vegetables	1 medium slice bread, ½ cup pasta or porridge, ⅔ cup wholewheat cereal, 1 small potato, ½ cup kumara, 3 wholegrain crispbreads
Fish* and seafood, dried peas and beans, lean meat and skinned poultry	Eat between 1-3 depending on kilojoule requirements	150 grams 'lite' tuna, 2 small or 1 large fillet of cooked fish, ½ cup lean mince or casserole, 1 cup cooked dried beans
Milk and milk products <i>Use soy substitutes if preferred</i>	Eat 2-3 depending on kilojoule requirements	1 cup trim or very low-fat milk, ⅓ cup cottage cheese, 1 small pottle low-fat yoghurt, 2 tbsp grated parmesan
Oils, spreads, nuts, seeds and avocado <i>Choose products made from sunflower, soy bean, olive, canola, linseed, safflower, or nuts and seeds other than coconut</i>	Eat 3 or more depending on kilojoule requirements	1 tsp soft table margarine or oil, 2 tsp light margarine, 1 dessert spoon nuts, 1 tbsp avocado
Non-alcoholic drinks	Between 6-8 non-alcoholic drinks	1 glass water, 1 cup tea, coffee or 'diet' soft drink

* If you do not eat oily fish, include fish oil capsules, linseeds, walnuts, wheatgerm, canola or linseed oil for heart-healthy omega-3 fats.

Ask your doctor, nurse or health professional for "A Guide to Heart Healthy Eating".

3 Tackling your Risk Factors

Other foods

Other foods	Daily limits	How much is a serving?
Alcoholic drinks	Up to 2 drinks for women and 3 drinks for men	1 can/stubbie of beer, 100 ml wine or 2 nips of spirit, use 'diet' drinks as mixers
Savoury snack foods	These can sometimes replace 'grain' servings or 'high sugar foods'	3 reduced-fat crackers, 15 rice crackers, 30 grams rice snacks or low saturated fat crisps*
High sugar foods	Up to 1 for low kilojoule needs and 4 for high kilojoule needs#	1 tbsp jam or honey, 3 small low fat biscuits, ½ small muffin, ½ cup light frozen dessert or frozen yoghurt
High saturated fat	Up to 2 for low kilojoule needs and 6 for high kilojoule needs <u>per week</u>	3-4 small chocolate or cream biscuits, ½ cup cream, cheese or coconut milk sauce, 100 grams ice-cream, 1 medium fries or instant noodles, 50 grams chocolate or crisps

* Low saturated crisps generally have less than 4 grams of saturated fat per 100 grams.

Low kilojoule needs are for people with Type 2 diabetes who are overweight, others who need to lose weight and people who are physically inactive.

If you do eat eggs, limit to 3 eggs per week.



3 Tackling your Risk Factors

→ Physical activity

Just 30 minutes or more of **moderate** physical activity on most days of the week will improve your health.

Physical activity has many benefits to your health, including:

- Improving your cholesterol level
- Lowering your blood pressure
- Helping with weight loss and maintaining a healthy weight
- Controlling your blood glucose (sugar) level
- Helping you sleep better and feel less stressed
- And it's fun!

What is moderate physical activity?

It is exercise that makes your heart pump a bit harder. Taking the **talk test** is a simple way to see if you are exercising at the right level.

- When you're exercising, your breathing should be quicker, but you should be able to carry out a conversation. This is where you want to be.
- If you're able to sing then you're not working hard enough, so step it up!
- If you can't carry on a conversation, then you're over doing it, so slow it down.

How can I increase my physical activity?

Aerobic activity is the best type of activity to help improve your heart health. This activity uses the large muscles in your arms and legs – for example walking, jogging or cycling. You can start with small amounts of activity, (10–15) minutes, two or three times per day. Gradually increase this to 30 minutes of continuous activity.

A good way to start regular activity is to include some extra physical activity into your normal day-to-day routine:

- Get off the bus one stop earlier than usual
- Use the stairs instead of the lift
- Park a block away from work and walk.



3 Tackling your Risk Factors

→ Physical activity

This table gives some examples of various levels of physical activity:

Light physical activity	Moderate physical activity	Vigorous physical activity
Leisurely walk on the flat	Brisk walking	Walking very briskly/brisk walk uphill
Indoor bowls	Lawn bowls	Jogging/running
Playing pool	Gentle water aerobics	Playing soccer
Horse riding at walking pace	Low impact aerobics	Playing netball
Slow stationary cycling	Line dancing	Moderate cycling
Fishing	Playing cricket/golf	Playing touch rugby/rugby
Ironing	Vacuuming	Swimming
Watering the garden plants	Mowing lawn & gardening	Climbing stairs

Your doctor can help you decide on some suitable activities. Ask your doctor for a Green Prescription or phone 0800 ACTIVE (0800 228 483) to chat to someone about your physical activity plan. Remember, any physical activity is better than none. If you are already active, then perhaps now is a good time to increase your physical activity levels:

- Join a sports club
- Try a new activity
- Exercise more often.

NB: If you have a history of cardiovascular disease you should consult your doctor before undertaking vigorous physical activity.

3 Tackling your Risk Factors

→ Weight management

Why is it important?

Being overweight increases your risk of having a heart attack or stroke, and your risk of developing diabetes. If you are obese, you are much more likely to develop diabetes and more likely to have a heart attack or stroke.

Losing and maintaining a healthy weight has many benefits.

If you are overweight, even small amounts of weight loss can have significant health benefits including:

- Lowering your blood pressure
- Improving your cholesterol level
- Improving your blood glucose (sugar) control
- Lowering your risk of having a heart attack or stroke.

How do I lose weight and maintain a healthy weight long-term?

Avoid crash or fad diets. Set a realistic goal – aim to reduce your weight by ½kg – 2kgs per month. It may not sound much, but slow changes make it easier to keep the weight off.

Gradually change your eating habits to a heart healthy eating pattern:

- Eat more coloured vegetables and fruit in place of other foods
- Eat less foods rich in fats, especially butter, meat and dairy fats, deep fried foods, pastries and sweet bakery items
- Eat less foods and drinks rich in added sugars – soft drinks, sweets, desserts and bakery items
- If you occasionally eat high-fat or high-sugar foods, choose small portions
- Choose breads, cereals and grains and have enough whole grains to feel full
- Eat plenty of dried peas (e.g. chickpeas), beans (e.g. red kidney beans) and fish.

Increase your physical activity. Try for at least 30 minutes of moderate activity every day of the week. Remember, any physical activity is better than none, so get started now!

If you are having trouble losing weight or you are gaining weight over time, talk to your doctor, nurse or health professional about seeing a dietitian.

3 Tackling your Risk Factors

→ Weight management

Am I a healthy weight?

Find your height on the bottom of the chart. Go straight up from that point until you reach the line that intersects with your weight - that point is your Body Mass Index (BMI). Use that point to identify your body weight status using the table below.

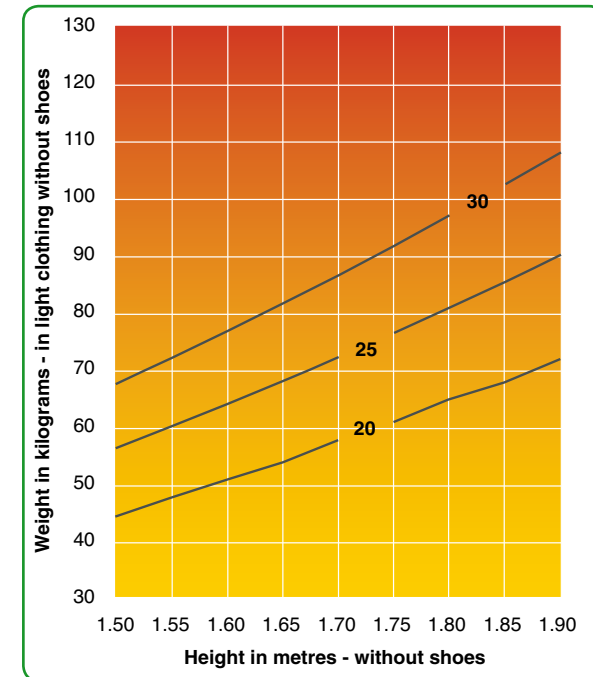


Table of Body Mass Index (BMI)

Underweight	Healthy	Overweight	Obese
Less than 20	20 to 25	25 to 30	Greater than 30

Waist circumference should ideally be less than 90cm for women and less than 100cm for men.

3 Tackling your Risk Factors

→ Smoking

Stopping smoking is the most important thing you can do for your health.

Smoking quadruples your risk of cardiovascular disease. Smokers die on average 14 years earlier than non-smokers.

It is never too late to stop:

- Within two days of quitting your ability to smell and taste improves
- Within three months of quitting your circulation improves and you can breathe more easily
- Within five years of quitting your risk of having a heart attack is reduced to the level of someone who has never smoked
- Financially you will be better off.

How can I stop?

Some ways to quit smoking include:

- Getting help from friends and family
- Buddying up with someone else who is quitting
- Contacting Quitline on 0800 778 778 for free and confidential support and subsidised Nicotine Replacement Therapy (NRT)
- Contacting your doctor or practice nurse for support and subsidised NRT
- Contacting other smoking cessation health professionals in your community and asking for subsidised NRT (contact these providers through ASH or local Public Health offices)
- Nicotine Replacement Therapy (NRT). It is safe and doubles your chances of quitting. It comes as:
 - Patches (subsidised)
 - Gum (subsidised)
 - Lozenge (subsidised)
 - Inhaler
 - Microtab
- Zyban – available by prescription only
- Champix – available by prescription only.



It's important to set a date to quit. Choose a time when you are not under a lot of pressure, but still busy. Most people find that throwing out all tobacco products helps avoid temptation.

There are many different ways to quit, so even if you have tried before, don't lose heart. Your doctor, nurse or health professional can help find strategies that will work for you.

3 Tackling your Risk Factors

→ Blood pressure

What is it?

Blood pressure shows how hard your heart has to work to pump blood around your body. It is represented by two numbers e.g. 120/80. The first number (120) represents the systolic blood pressure – the peak pressure in your blood vessels when the heart beats. The second number (80) is the diastolic blood pressure - the pressure in your blood vessels when the heart rests between beats.

Both numbers are important.

How do I know if I have high blood pressure?

There are usually no warning signs to alert you that your blood pressure is too high; you may still feel perfectly well. One in five adults has high blood pressure (hypertension) and most don't know it, which is why high blood pressure is often called the 'silent killer'. The only way to find out if your blood pressure is too high is for it to be measured by your doctor, nurse or health professional. An ideal blood pressure is less than 130/80.

How can I lower my blood pressure?

Lifestyle is very important in helping to control high blood pressure.

Ways you can lower your blood pressure include:

- Follow a heart healthy eating pattern* – have 8 servings of coloured vegetables and fruit and 2–4 servings of low fat milk products a day
- Lower your salt (sodium) intake – choose low sodium foods and add less salt when cooking
- Lose weight if you are overweight or obese
- Do regular moderate physical activity
- If you smoke, seek help to stop
- Restrict your alcohol intake.

*Ask your doctor, nurse or health professional for "A Guide to Heart Healthy Eating".

If your blood pressure level is too high, your doctor may recommend you also take medication. There are many different types of medication that lower blood pressure, your doctor will discuss with you the medication that best suits you. **Many people who take blood pressure lowering medication will need it for life.**

Check ups: If you are taking blood pressure medication, it is important to have your blood pressure monitored every three months until it is controlled and then every six months.

3 Tackling your Risk Factors

→ Cholesterol

What is it?

Cholesterol is a fatty material carried in the blood. There are two main types of cholesterol in your blood; LDL (the bad cholesterol) and HDL (the good cholesterol). If you have too much LDL cholesterol it can slowly build up in your artery walls, narrowing them and increasing your risk of heart attack and stroke. The good HDL removes cholesterol from the artery walls reducing your risk.

How do I know if my cholesterol is too high?

A simple blood test will determine your cholesterol (lipid) profile.

An ideal profile is:

Total cholesterol	Less than 4 mmol/L
LDL cholesterol (bad)	Less than 2.0 mmol/L
HDL cholesterol (good)	Greater than 1 mmol/L
TC/HDL ratio	Less than 4.0
Triglycerides	Less than 1.7 mmol/L

How can I lower my blood cholesterol level?

Ways to reduce your cholesterol levels include:

- Follow a heart healthy eating pattern – ask for a copy of “A Guide to Heart Healthy Eating”
- Lose weight if you are overweight
- Do regular moderate physical activity
- Avoid excessive drinking of alcohol.

You can further reduce your cholesterol by:

- Having more servings of dried peas and beans, soy products, oat cereals, whole grains and high fibre cereals
- Eating nuts and seeds regularly
- Including sterol-fortified margarine spreads
- Checking saturated fat content on food labels
- AVOIDING butter, deep-fried and fatty foods and only occasionally choose sweet bakery products
- NOT eating white meat fat, chicken skin, processed meats or processed chicken.

If your cholesterol level is too high, your doctor may recommend taking medication.

Many people who take cholesterol-lowering medication will need it for life.

Check ups: If you are taking cholesterol-lowering medication, you should have your cholesterol measured every three months until it is controlled, and then every six months.

3 Tackling your Risk Factors

→ Managing diabetes

What is it?

Normally insulin transports blood sugar into your cells, where it is used as energy. Diabetes results when your body can't use or make enough insulin, so the level of glucose (sugar) in your blood becomes higher than usual. People with diabetes are two to four times more likely to have a heart attack or stroke, than people without diabetes. This is because diabetes accelerates atherosclerosis and increases the risk of blood clots forming.

How do I know if I have diabetes?

A simple blood test will show if your blood glucose is too high. If your blood glucose is elevated, your doctor will organise further testing to determine an accurate diabetic status.

How can I keep my blood sugar within an acceptable range?

- Follow a heart healthy eating pattern – reduce foods with added sugars and white flour bakery items. Choose breads and cereals with high fibre content
- Lose weight if you are overweight
- Check your blood sugars regularly as advised by your doctor, nurse or health care professional
- Do regular moderate physical activity
- Take your medications as prescribed by your doctor.



If you have diabetes, it is very important to have your blood pressure and cholesterol levels checked regularly and aim to keep them well controlled.

If your cardiovascular risk is very high, your doctor will discuss drug treatment options, as well as lifestyle advice with you. **Most people who have diabetes will need to take medication for life.**

Check ups: Each year, take time to review your health with your doctor or nurse. GPs offer free annual diabetes “get checked” visits.

3 Tackling your Risk Factors

→ Medication

Your doctor may recommend taking medication to help lower your risk of cardiovascular disease. If you are at high risk, your doctor may prescribe a number of medications, including those which lower your blood pressure, improve your cholesterol level or prevent your blood from clotting e.g. aspirin (see below).

Remember, it is important to continue following a healthy lifestyle even if your doctor prescribes medication for you.

Do not stop any medications unless advised by your doctor.

Should I take aspirin?

If your cardiovascular risk is high then your doctor may recommend taking low-dose aspirin.

Aspirin can help prevent blood clots forming in your arteries by thinning your blood.

Aspirin is not advised for some people, so please discuss this with your doctor first.

Names of medicines	What is it for?	Dose	Time

4 Planning Ahead

Where to from here?

Now that you know your risk level you can make a plan of action.

What lifestyle factors can you change?

- Follow a heart healthy eating pattern
- Increase physical activity
- Achieve and maintain a healthy weight
- Stop smoking
- Take medication, if prescribed.

With your doctor, nurse or health professional, make some achievable goals:

- Write your goals down
- Set a time frame for achieving your goals
- Identify any barriers that could stop you achieving your goals and find ways to overcome them
- Create social support by asking family and friends for help
- Use your personal record to monitor your progress
- Think of ways to reward yourself when you achieve your goals.

Useful contacts

Smoking

For information on quitting smoking, phone:

Quitline on 0800 778 778 or visit www.quit.co.nz

Alcohol

For more information, visit the Alcohol Advisory Council of New Zealand (ALAC) at www.alcohol.org.nz or call Alcohol & Drug Helpline on 0800 787 797.

Exercise

For details on Green Prescription visit: www.moh.govt.nz/greenprescription or visit: www.diabetes.org/weightloss-and-exercise.jsp

Nutrition

For more information on heart healthy eating visit: www.heartfoundation.org.nz
Ask your doctor, nurse or health professional for "A Guide to Heart Healthy Eating".

Support

Cardiac support groups exist throughout New Zealand. To contact a cardiac club in your area visit: www.heartfoundation.org.nz or phone (09) 571 9191, ext 791.

4 Planning Ahead

Resources

Information in this booklet is also available online at the Heart Foundation website: www.heartfoundation.org.nz

Further resources are available from:

The National Heart Foundation of New Zealand

PO Box 17-160, Greenlane, Auckland 1546
Tel: 09 571 9191, www.heartfoundation.org.nz

Diabetes New Zealand Inc.

Freepost DNZ, PO Box 54, Oamaru
Tel: 0800 DIABETES (0800 34 2238), www.diabetes.org.nz

Stroke Foundation of New Zealand Inc.

PO Box 12482, Wellington
Tel: 04 472 8099 0800 STROKE (0800 787653), www.stroke.org.nz

New Zealand Guidelines Group Inc.

PO Box 10-665, Wellington
Tel: 04 471 4180, www.nzgg.org.nz

Pacific Heartbeat

PO Box 17-160, Greenlane, Auckland 1546
Tel: 09 571 9191, www.pacificheart.org.nz

Te Hotu Manawa Māori

2.2, D72 Building, Dominion Road, Mt Eden, Auckland
Tel: 09 638 5800, www.tehotumanawa.org.nz

Heart Foundation recipe books

"The Best of Food for the Heart"

"Deliciously Healthy"

"Pacific Recipes for the Heart"

"Quick Food for the Heart"

"Real Food"

"The New Classic Cookbook"

These are all available for purchase from the Heart Foundation, call 09 571 9191 or visit the 'shopping' section at: www.heartfoundation.org.nz

Heart Attack Warning Signs

- Heavy pressure, tightness, crushing pain or unusual discomfort on the centre of the chest lasting more than 10-1 minutes. It may stop or get less intense and then return
- Pain spreading to the shoulders, neck, jaw and/or arms
- These may be accompanied by sweating, a sick feeling in the stomach, dizziness and shortness of breath
- **When it's a heart attack, minutes do matter.**





Action Plan

- Dial 111, ask for the ambulance service and tell them you are having a possible heart attack
- If available, chew one aspirin unless you have been previously advised not to take aspirin
- Rest quietly and wait for the ambulance.

Stroke Warning Signs are many and varied. For example:

- Slurred speech or difficulty with words
- Weakness of facial muscles or limbs, usually on one side
- Loss of sensation.

Is it a stroke?
Dial 111 if someone can't:

			
F Face – SMILE (is one side droopy?)	A Arms – RAISE BOTH ARMS (is one side weak?)	S Speech – SPEAK A SIMPLE SENTENCE (slurred? unable to?)	T Time – Lost time could be a lost brain. Get to hospital FAST.

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The Heart Foundation is New Zealand's heart health charity and relies on the generous support of the public for its life saving work.

To help us to continue this work and the production of resources like this please make a donation by phoning 0800 830 100 or visit:

www.heartfoundation.org.nz

For more information about heart health resources and/or supporting the Heart Foundation, please contact:

The Heart Foundation

PO Box 17-160, Greenlane, Auckland 1546, New Zealand

Tel: **0064 9 571 9191**

Fax: **0064 9 571 9190**

Email: **info@nhf.org.nz**

www.heartfoundation.org.nz

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