

Acute Coronary Syndrome: Discharge Guidelines

(Heart Attack, Myocardial Infarction, Unstable Angina)

The following provides helpful information to assist you as you recover from:

- A **heart attack** or **myocardial infarction**, a type of heart damage.
- **Unstable angina**, a type of chest pain that can be a warning for a heart attack.

Both of these conditions are also known as acute coronary syndrome (ACS).

A heart attack or unstable angina occurs when a blood vessel in the heart becomes partly or completely blocked. The blockage is caused by a clot that forms in an already narrowed heart vessel. The amount of damage to the heart varies from person to person.

You have already started on some treatments to improve blood flow in the heart and to lessen its work. Your recovery depends on the degree of injury to your heart and your own rate of healing.

Before you leave the hospital:

- Take time to watch some of the patient education cardiovascular videos. Your nurse can show you how to view them.
- Make sure you know when to follow up with your physician(s).

When you go home, follow these guidelines to aid your recovery and help prevent further heart injury.

*If you have
any questions
or concerns,
please ask your
physician or
nurse.*

Activity

Unless you are told otherwise:

- Avoid **lifting**, pulling or pushing any heavy objects (more than **10 pounds**) for the first 3 days after discharge.
- Avoid **straining** or any activity in which you hold your breath and exert yourself or “bear down,” such as when having a bowel movement or lifting yourself up. Ask your physician about a laxative or stool softener if you become constipated.
- Do not **drive** for the first 3 days after discharge.
- **Stair climbing** is fine, but do it at a slow, steady pace.

- You may take a warm tub **bath or shower**, but avoid using very hot water.
- If you feel well and are rested, **sexual activity** may be resumed. If you have any concerns, talk with your physician.
- Talk with your physician before returning to **work**. This varies with each patient and depends on your work and its demands.

Note: Be sure to follow any added guidelines provided by your physician or nurse. **If you had a cardiac catheterization during this hospital stay, review the Northwestern Memorial Hospital handout, *Cardiac Catheterization Lab Discharge Instructions*.**

Diet: Heart-healthy eating

The Therapeutic Lifestyle Changes (TLC) diet is a heart-healthy diet. This is one that is low in fat and cholesterol. Key points include:

- Eat less fat. Read food labels and limit your fat intake to less than 1/3 of your total daily calories.
- Choose foods low in saturated or animal fat. Keep fats to less than 7% of your total calorie intake.
- Limit the use of high-cholesterol foods like eggs, meat and dairy products (less than 200 mg cholesterol per day).
- Eat more fiber such as oats, beans and fruit.
- Eat more complex carbohydrates (starches) such as whole grains, beans and root vegetables.
- Eat less white flour and fewer processed foods.

For more information about the TLC diet, refer to the Northwestern Memorial Hospital handout, *Heart-Healthy Nutrition*.

Heart-protecting medicines

Your physician will prescribe all or most of these medicines for you. They are important for your recovery, and may help to prevent future injury and extend your life.

- **Aspirin:** Aspirin lessens the chance of heart attack and stroke. It helps prevent platelets from forming clots in the blood, allowing blood to flow more easily. This is important if you had an angioplasty or coronary stent procedure. *Be sure to take the correct type of aspirin prescribed: “non-enteric coated/soluble” aspirin or “enteric coated” aspirin.*
- **Antiplatelet drugs:** This medicine, such as **clopidogrel (Plavix®)**, also prevents platelets from forming into clots. It may be prescribed with aspirin or in place of it.
- **Beta blocker:** This medicine blocks certain nerve impulses to slow the heart rate and help the heart pump more easily. It may also be given to treat high blood pressure, heart failure or an abnormal heart rhythm.

- **Angiotensin-converting enzyme (ACE) inhibitor:** This medicine blocks a substance that causes blood vessels to narrow, making the heart work harder. The ACE inhibitor relaxes blood vessels so that the heart pumps more effectively. In some cases, an angiotensin receptor blocker (ARB) is given to provide this effect.
- **Statin:** A statin slows the progression of heart disease by lowering cholesterol levels in the bloodstream, especially the total cholesterol and the LDL or “bad” cholesterol.

It is important to take your medicines each day as directed. Do not skip doses or stop taking any medicine without talking with your physician or nurse.

Emotions

At first, you may feel sad, depressed and/or angry. These feelings are normal and usually go away as time passes. During this time, it might be helpful to talk to someone about your feelings. If these feelings persist or get worse, call your physician.

A healthy lifestyle

It is important that you keep a heart-healthy lifestyle. This can improve your long-term health and decrease your risk for another cardiac event.

Do not smoke

Not smoking is the most important thing you can do to protect your health.

Manage your blood cholesterol

- Follow a low fat, low cholesterol diet, and take your lipid-lowering medicine as ordered.
- Know your own cholesterol blood levels and the goals your physician has set for you. Most patients with ACS should try to achieve these cholesterol levels:
 - LDL (“bad”) cholesterol—less than 70
 - HDL (“good”) cholesterol—above 40 for men; above 50 for women

Keep your blood pressure within normal limits

- An ideal blood pressure (BP) is 120/80 or less. High blood pressure or hypertension is a BP consistently above 140/90 (or above 130/80 for persons with diabetes or kidney disease).
- Keep your BP under control:
 - Control your salt (sodium) intake (unless your physicians say otherwise).
 - Exercise on a regular basis (as approved by your physician).
 - Maintain a healthy weight. Lose weight as directed.
 - If you drink alcohol, do so in moderation. This usually means no more than 2 drinks per day for men and 1 drink per day for women.
 - Take your BP medicine as prescribed.
 - Follow up with your physician to have your BP checked regularly as ordered.

Exercise regularly

- Regular exercise makes your heart and body stronger. With your physician's approval, increase up to at least 30 minutes of activity every day.
- Begin with a limited walking program, starting the day after discharge.
 - Begin slowly. Gradually increase distance and the length of time.
 - Follow the guidelines outlined by your physician.
- Talk with your physician about enrolling in a medically supervised cardiac rehabilitation program. Contact the Northwestern Medicine Cardiac Rehabilitation program at 312.926.7883 for more information. An exercise stress test is needed before starting most programs.

Maintain a healthy weight

- Body mass index (BMI) measures body fat based on height and weight. A normal BMI ranges from 18.5 to 24.9.

Height: _____ feet _____ inches Weight: _____ pounds Your BMI: _____

- If you need to lose weight, chose a program that offers a slow, steady weight loss of no more than 1 to 1 1/2 pounds per week.
- Be sure to include regular exercise as part of your weight loss program.

Manage your diabetes

- If you have diabetes, check your blood sugar (blood glucose) and take your medicine as ordered.
- Strive to modify the risk factors you can control, such as weight, BP and cholesterol.
- For more information about diet counseling, call the Center for Integrative Medicine at 312.926.3627.

Manage stress

- Try to avoid stressful situations. Know your limits.
- Consider relaxation exercises, such as yoga and meditation.

Follow-up care

Be sure to keep all follow-up care appointments. Here are some questions to discuss at the first physician's office visit:

- Which medicines should I continue taking?
- What added tests will I need?
- Should I enroll in a cardiac rehabilitation program?

When to call for help

- If you have chest, shoulder, arm, neck or jaw pain, or the pain that you know as your “heart pain”:
 1. Stop what you are doing and rest.
 2. If your physician has prescribed nitroglycerin (under the tongue), take it.
 3. If the pain does not improve or is worse 5 minutes later, call 911 or the emergency number in your area. Seek medical attention right away.
 4. If your pain is better or gone after 5 minutes, you should still call your physician.
- **Call your physician or 911 if you have any of the following:**
 - Shortness of breath
 - Feeling faint or dizzy
 - Very slow, very fast or irregular heartbeat
 - Excessive fatigue
 - Nausea, vomiting
 - A cold sweat
- Both you and your family should know when to call for help.

Further information and resources

More information about heart disease and heart-healthy living can be found at:

- American Heart Association (AHA) at americanheart.org or 800.AHA.USA1 (800.242.8721), or contact your nearest AHA office.
- Northwestern Medicine Bluhm Cardiovascular Institute at heart.nm.org.