

Care and Treatment of the Resident with Congestive Heart Failure (CHF)

Includes assessing and assisting the confused resident with CHF

E0204

Demographics

No other body system breaks down, wears out, or otherwise malfunctions as often as the cardiovascular system.

More than 2,600 Americans die each day of cardiovascular disease (CVD). That is an average of 1 death every 33 seconds.

Congestive heart failure (CHF) is the single most frequent cause of hospitalization among people aged 65 years or older.

75% of persons with heart failure are over 60 years of age.

CHF is America's most expensive health care problem accounting for more than \$38 billion in annual costs.

CHF is prevalent in nearly 5 million Americans, mostly older adults, and the numbers continue to rise.

The risk of heart failure is highest in people over 65 years of age and half of those who develop heart failure die within 5 years of being diagnosed.

Older adults with CHF have at least one other existing cardiac disease and other noncardiac health problems.

Each year over \$33 billion in medical costs and \$9 billion in lost productivity due to heart disease, cancer, stroke and diabetes are attributed to diet.

Congestive heart failure - what is it?

Congestive heart failure is now more often identified as 'heart failure,' 'cardiac failure,' or 'pump failure.'

Heart failure is a serious condition, and there is usually no cure. But, in most cases it can be managed through medications and life style changes.

Heart failure does not mean the heart has stopped working, or that the heart is in imminent danger of stopping. It does mean that the heart is no longer strong enough to pump as well as it should. And it is this *failure* to pump effectively and efficiently that causes CHF (congestive heart failure).

When the heart is no longer able to pump the right amount of oxygen rich blood to the body, blood backs up (or gets *congested*) in certain organs (such as the lungs, kidneys, liver etc.), and eventually in the veins and tissues of other parts of the body. It is this congestion that causes the symptoms of CHF.

Congestion of systemic venous circulation may result in peripheral edema or hepatomegaly.

Congestion of pulmonary circulation may cause pulmonary edema, an acute life-threatening emergency.

CHF usually develops slowly. It may go for years without symptoms (and diagnoses) and the symptoms tend to get worse with time. This slow onset and progression is caused by the heart's own efforts to deal with its gradual weakening. The heart tries to make up for its weakening by enlarging and by forcing itself to pump faster to move more blood through the body.

Pump failure usually occurs in a damaged left ventricle (left heart failure) but may happen in the right ventricle (right heart failure), either as primary failure or secondary to left heart failure. Sometimes, left and right heart failure develop simultaneously.

CHF may be acute (as a direct result of myocardial infarction or heart attack), but it is