

***Cardiovascular  
Health Diary***

*The information provided in this book is intended to give a general overview of cardiovascular disease and the risk factors that may lead to coronary heart disease and heart attack. This book is not meant to substitute the advice that your healthcare professional or doctor will give you, but should be used to help you receive the maximum benefit from your treatment. Your healthcare team and doctor will be vital in the journey to improve the health of your heart and you should discuss any concerns or questions you have with them.*

*This book has been produced by Aspen Pharmacare Australia Pty Ltd and contains some information sourced from the National Heart Foundation of Australia and Diabetes Australia.*

*For more information please visit [www.heartfoundation.org.au](http://www.heartfoundation.org.au) and [www.diabetesaustralia.com.au](http://www.diabetesaustralia.com.au).*

**Aspen Pharmacare Australia Pty Ltd**

34–36 Chandos Street, St Leonards NSW 2065

Tel. +61 2 8436 8300

[aspen@aspenpharmacare.com.au](mailto:aspen@aspenpharmacare.com.au)

[www.aspenpharma.com.au](http://www.aspenpharma.com.au)

*Prepared: October 2013*



Despite our great advances in health in recent years, heart disease and vascular problems remain significant causes of ill-health and death in Australia. To deal with these and other chronic disease problems we need not only attention to our lifestyle and the rich (and sometimes toxic) environment in which we live, but advances in medical and drug treatments.

Those of us working to improve the health of Australians are grateful that ethical pharmaceutical manufacturers like Aspen assist us through funding educational projects such as this booklet aimed at increasing public awareness and knowledge about disease management. In sharing the load we are able to continue the vital progression towards reducing chronic diseases, which now make up around 70% of all illnesses in Australia.

**Dr Garry Egger** AM MPH PhD MAPS

*Professor, Southern Cross University School of Health and Human Sciences  
secretary, Australian Lifestyle Medicine Association*

# Introduction

---

Cardiovascular disease (CVD) affects nearly one in five Australians<sup>1</sup>. CVD includes all diseases and conditions of the heart (cardio) and blood vessels (vascular). The most common diseases and conditions in CVD are coronary heart disease, high blood pressure, heart attack, heart failure, stroke and chronic kidney disease.

You may have been given this book because you are at risk of developing, or have been diagnosed with a heart condition.

Now is the time to get back on track – and improve not only the health of your heart, but your overall general health. You can do this by identifying your risk factors and then looking at what **you** can do to reduce your risk. There are a number of risk factors that can increase your likelihood of developing cardiovascular disease (CVD).

## What are your risk factors for heart disease?

### **Risk factors that you cannot change:**

- Age – as you get older your risk of developing CVD increases
- Family history of CVD
- Gender – males vs. female

### **Risk factors that you can change:**

- Smoking
- High cholesterol
- High blood pressure
- Diabetes
- Physical inactivity
- Overweight/obesity
- Stress, depression and social isolation
- Inadequate sleep

It's important to discuss your 'risk' with your doctor so that both treatment and preventative strategies can be put in place where necessary. Take this book with you every time you see your doctor plus ask your pharmacist to complete the medication section when you fill your prescription. If a generic drug gets substituted for your prescribed drug at the pharmacy, make sure this change is noted.

### **CHEST PAIN ACTION PLAN** – What to do if you think you may be having a heart attack

If at any time you experience chest pain or think that you might be having a heart attack, call 000 for an ambulance, immediately. Half of those people who have a heart attack have early warning symptoms – these are important signs that allow for timely intervention and to administer preventative care. By recognising the symptoms and getting to hospital early, you have a much better chance of survival.

1. Australian Institute of Health and Welfare 2011. Cardiovascular disease: Australian facts 2011. Cardiovascular disease series. Cat. no. CVD 53. Canberra: AIHW.

# Potential signs of a heart attack

## Will you recognise your heart attack?



Do you feel any

pain

pressure

heaviness

tightness

In one or more of your

chest

neck

jaw

arm/s

back

shoulder/s

You may also feel

nauseous

a cold sweat

dizzy

short of breath

Yes

**1 STOP** and rest now

**2 TALK** Tell someone how you feel

### If you take angina medicine

- Take a dose of your medicine.
- Wait 5 minutes. Still have symptoms? Take another dose of your medicine.
- Wait 5 minutes. Symptoms won't go away?

Are your symptoms severe or getting worse?

or

Have your symptoms lasted 10 minutes?

Yes

**3 CALL 000\*** Triple Zero

- Ask for an ambulance.
- Don't hang up.
- Wait for the operator's instructions.

\*If calling Triple Zero (000) does not work on your mobile phone, try 112.

© 2011 National Heart Foundation of Australia ABN 98 008 419 761. CON-076.v3

# Signs of Stroke - FAST



Signs of stroke FAST. **Recognise the signs of stroke call 000. A stroke is always a medical emergency.**

**Using the FAST test involves asking three simple questions:**

Face	Check their face. Has their mouth drooped?
Arm	Can they lift both arms?
Speech	Is their speech slurred? Do they understand you?
Time	Is critical. If you see any of these signs call 000 straight away.

Facial weakness, arm weakness and difficulty with speech are the most common signs of stroke, but they are not the only signs. Other signs of stroke may include one, or a combination of:

- Weakness or numbness or paralysis of the face, arm or leg on either or both sides of the body
- Difficulty speaking or understanding
- Dizziness, loss of balance or an unexplained fall
- Loss of vision, sudden blurring or decreased vision in one or both eyes
- Headache, usually severe and abrupt onset or unexplained change in the pattern of headaches
- Difficulty swallowing

The signs of stroke may occur alone or in combination and they can last a few seconds or up to 24 hours and then disappear.

# Types of Stroke

---

## How the two types of stroke happen

A stroke can happen in two main ways. Either there is a blood clot or plaque that blocks a blood vessel in the brain or a blood vessel in the brain breaks or ruptures.

### Blocked artery (causes an ischaemic stroke)

Strokes caused by a blood clot is called an ischaemic stroke. In everyday life, blood clotting is beneficial. When you are bleeding from a wound, blood clots work to slow and eventually stop the bleeding. In the case of stroke, however, blood clots are dangerous because they can block arteries and cut off blood flow.

About 4 out of every 5 strokes are ischaemic. There are two ways an ischaemic stroke can occur.

### Bleed in the brain (causes an haemorrhagic stroke)

Strokes caused by a break in the wall of a blood vessel in the brain are called haemorrhagic strokes. This causes blood to leak into the brain, again stopping the delivery of oxygen and nutrients. Haemorrhagic stroke can be caused by a number of disorders which affect the blood vessels, including long-standing high blood pressure and cerebral aneurysms.

An aneurysm is a weak or thin spot on a blood vessel wall. The weak spots that cause aneurysms are usually present at birth. Aneurysms develop over a number of years and usually don't cause detectable problems until they break.

About 1 in every 5 strokes is haemorrhagic. There are two types of haemorrhagic stroke.

### Mini stroke

A Transient Ischaemic Attack (TIA) is sometimes termed a minor stroke or "mini stroke." When the signs of stroke are present but go away within 24 hours, the term TIA is used. The causes and symptoms of a transient ischaemic attack (TIA) are similar to those of a stroke.

TIA episodes usually last only a few minutes but may last for several hours. They generally disappear quickly and unfortunately, are often ignored. Just like a stroke, a TIA will require emergency treatment. About 1 in 5 people who have a TIA will have a major stroke within the next three months and a large part of the risk occurs in the first few days. TIA should never be ignored.

TIA's should be regarded as a warning sign that the person is at risk of a stroke and should be investigated promptly.

It is important that if stroke symptoms occur the person sees a doctor promptly, even if the signs go away and you feel completely better. The doctor will try to find the underlying cause of the TIA and then organise treatment to lower your risk of another Transient Ischemic Attack or stroke.

## Smoking

---

Stopping smoking is one of the most important things you can do to prevent cardiovascular disease. If you have already had a heart attack, stopping smoking will greatly reduce your chances of having another.

Research shows that inhaled tobacco smoke and passively inhaled tobacco smoke substantially increase the risk of developing cardiovascular disease and also reduces the amount of oxygen in your blood. Cigarettes also contain many harmful chemicals which can damage the walls of your arteries, leading to the artery clogging process, called atherosclerosis. This is a major contributor to smoking-related deaths.

Giving up smoking may be the hardest thing you've had to do – no one said it would be easy – but there are many options available to help you quit

Talk to your doctor or call the Quitline on 13 QUIT for more advice.



# Cholesterol

---

Cholesterol – everyone's always talking about it, but what is it exactly and what does it do?

Cholesterol is an essential fat (lipid) obtained from the diet and produced by the liver. It is needed to build cell walls and various hormones. While it's hard to avoid cholesterol because many foods that we eat contain it, high cholesterol is a problem that can increase the risk of heart attack and stroke.

The body produces 2 types of cholesterol –one that is good for your health, one that isn't. LDL cholesterol (low-density lipoprotein) is the 'bad' cholesterol. It's found in foods that are high in saturated fats like take away foods, fatty cuts of meat, convenience foods, eggs, milk, cheese and ice cream.

A high level of LDL cholesterol in the blood can create a build up of fatty deposits in your arteries, causing them to narrow; this can increase the risk of heart attack or stroke.

HDL cholesterol (high-density lipoprotein) is the 'good' cholesterol – it actually helps remove LDL cholesterol from the blood and takes it back to the liver for processing and removal.

Other factors that can lead to high cholesterol levels are being overweight and family history. Sometimes even if you exercise regularly and follow a healthy diet, your body just produces too much cholesterol so your doctor may need to prescribe medication to help lower your cholesterol.

***If your cholesterol level is high, there are plenty of things you can do to help lower it:***

- Follow a healthy low-fat diet that contains more fruit, vegetables, whole grains (breads and cereals), legumes and fish
- Regular exercise and physical activity
- Medication

So what level should your HDL and LDL cholesterol be? Cholesterol levels are measured by having a blood sample analysed. Your doctor will advise what your levels should be and how often you should have your cholesterol levels tested.

# High Blood Pressure<sup>1</sup>

---

## What is blood pressure?

Blood pressure is the pressure of the blood in the arteries as the heart pumps the blood around the body. Blood pressure changes regularly throughout the day; it is lower when you sleep and rises when you wake or during an increased level of activity, eg, during exercise.

High blood pressure (hypertension), is when your blood pressure in the arteries is too high. This can cause a strain on the heart as it has to pump against an increased force. High blood pressure can also cause damage to the lining of the arteries increasing the risk of plaque build up (atherosclerosis). If left untreated, high blood pressure can lead to heart disease, heart failure, kidney problems or stroke. It is often called the “silent killer” because there are usually no symptoms while the damage is happening.



## How is blood pressure measured?

It is important to have your blood pressure checked at regular intervals, to know your “numbers” and what they mean. Your blood pressure measurement reading has two numbers. An example of a high blood pressure recording would be 149/100, which is read as 149 over 100. The first number is the systolic pressure – this is the measurement of the pressure in the arteries when the heart is pumping the blood out during contraction. The second number, the diastolic pressure, is the measurement of the pressure in the arteries when the heart is relaxing and filling with blood before the next beat (contraction).

Blood pressure is measured in millimetres of mercury (mmHg). Normal blood pressure falls within a range rather than being a particular pair of numbers and can vary according to the body’s needs and activities.

***There are plenty of things you can do to help manage your high blood pressure and reduce your chances of having another heart attack or developing coronary heart disease:***

- Have your blood pressure checked regularly
- Don’t smoke
- Aim for a healthy body weight
- Eat a healthy diet, reduce your salt intake
- Get active
- Moderate your alcohol intake

1. National Heart Foundation of Australia 2008. Your blood pressure information sheet. Available at: [www.heartfoundation.org.au/your-heart/cardiovascular-conditions/Pages/blood-pressure.aspx](http://www.heartfoundation.org.au/your-heart/cardiovascular-conditions/Pages/blood-pressure.aspx)

# Weight<sup>1</sup>

---

Being overweight not only increases your risk of developing heart disease through interaction with various risk factors such as Type 2 diabetes, high cholesterol, high blood pressure etc but it also impacts on your overall health. It can also increase your risk of arthritis, liver disease and some cancers. Maintaining a healthy weight through healthy eating and regular physical activity can assist with the prevention and treatment of CVD.



## How do we assess our weight?

Body Mass Index (BMI) measures overall body fat in relation to your height and weight – however it does not distinguish between muscle and fat. It has been suggested that abdominal fat (the fat that accumulates around your middle) may have a stronger link to your risk of developing Type 2 diabetes and CVD than BMI. It has also been suggested that this excess fat around your middle may be more dangerous to your health because it is close to the organs responsible for producing and removing substances that can cause damage to your CV system – for example blood fats/cholesterol and sugar. For this reason it is recommended that we not only look at your BMI but also measure your **waist circumference** which is a useful measure of central obesity (ie, abdominal fat).

Body Mass Index (BMI) is calculated by dividing your body weight (kg) by your height (in metres squared). It is recommended that your BMI falls within the range: 18.5 – 24.9.

## Weight *(continued)*

### International Classification of adult weight according to BMI<sup>2</sup>

Classification	BMI (kg/m <sup>2</sup> )	Risk of co-morbidities
Underweight	< 18.5	Low (but increased risk of other clinical problems)
Normal range	18.5 – 24.9	Average
Overweight	≥ 25 – 29.9	Increased
Obese I	30 – 34.9	Moderate
Obese II	35 – 39.9	Severe
Obese III	≥ 40	Very severe

Sourced from World Health Organization, 2006

**Waist circumference** is usually measured at the navel. The National Heart Foundation recommendation for men is less than or equal to 94cm. For women it is less than or equal to 80cm.<sup>1</sup>

	Men	Women
Health at risk	Greater than or equal to 94cm	Greater than or equal to 80cm
Health at high risk	Greater then or equal to 102cm	Greater than or equal to 88cm

1. National Heart Foundation of Australia 2008. Waist Measurement. Available at: [www.heartfoundation.org.au/healthy-eating/Pages/waist-measurement.aspx](http://www.heartfoundation.org.au/healthy-eating/Pages/waist-measurement.aspx)

2. World Health Organization (WHO) 2006. BMI Classification. Available at <http://www.who.int/en/>

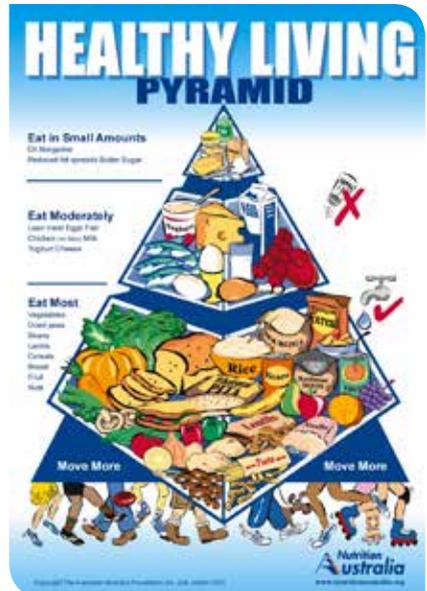
# Nutrition<sup>1</sup>

We know nutrition is a really important part of our journey towards better heart health. Eating well will have an impact on several of the conditions that are risk factors for cardiovascular disease - high cholesterol, high blood pressure, being overweight and diabetes.

***Changing a lifetime of eating habits can be daunting, but there are some simple tips that will get you headed in the right direction:***

- Take control of portion sizes and eat slower, give your body time to register fullness
- Eat more vegetables and fruit – high in dietary fibre, low in calories, good sources of vitamins and minerals
- Eat breads and cereals that are wholegrain instead of refined grain products
- Reduce use of saturated and trans fats – butter, margarine, oils and use monounsaturated fats instead – olive oil, canola oil or polyunsaturated fats – found in nuts and seeds
- Choose lean cuts of meat and trim off any excess fat prior to cooking
- Remove the skin from chicken
- Choose low or reduced-fat dairy foods
- Avoid too many biscuits, cakes and snacks like potato crisps and savouries
- Choose low-salt foods and try not to add any salt when cooking

For more information on healthy eating please call the National Heart Foundation on 1300 362 787



1. National Heart Foundation of Australia 2008. Management: High Blood Pressure. Available at: [www.heartfoundation.org.au/your-heart/cardiovascular-conditions/Pages/blood-pressure.aspx](http://www.heartfoundation.org.au/your-heart/cardiovascular-conditions/Pages/blood-pressure.aspx)

# Alcohol<sup>1</sup>

If you have cardiovascular disease, high blood pressure or are overweight, you may need to drink less than the recommended maximum amount of 2 standard alcoholic drinks per day. (Females who are on blood pressure medication should only have 1 standard alcoholic drink per day).

It is also recommended to have at least one or two alcohol-free days per week.

Alcohol is high in calories. Drinking too much alcohol increases your blood pressure, and can have an adverse effect on your general health, so moderation is key when aiming for a healthy lifestyle balance.

So what is a 'standard' alcoholic drink? This is any drink that contains 10 grams of alcohol whether it is beer or wine or spirits, and regardless of what type of container the drink is in – a bottle, can, cask or a glass. The label of any alcoholic drink should state the number of standard drinks contained within.

## Number of Standard Drinks - Beer

		Number of standard drinks
Full strength		
	285 mLs (middy/pot/half pint/handle), 4.8% alcohol	<b>1.1</b>
	375 mLs (stubby or can), 4.8% alcohol	<b>1.4</b>
	425 mLs (schooner/pint), 4.8% alcohol	<b>1.6</b>

## **Alcohol** *(continued)*

---

### **Number of Standard Drinks – Wine and Champagne**

		Number of standard drinks
	150 mL Red wine, average restaurant serve, 13.5% alc.vol	<b>1.6</b>
	150 mL White wine, average restaurant serve, 11.5% alc. vol	<b>1.4</b>
	150 mL Champagne, average restaurant serve, 12% alc. vol	<b>1.4</b>

# Alcohol *(continued)*

## Number of Standard Drinks - Spirits

		Number of standard drinks
	30 mls High strength, spirit nip, 40% alc. vol	<b>1</b>
	330 mls Ready-to-drink, full strength, 5% alc. vol	<b>1.2</b>
	375 mls Pre-mixed spirits, full strength, 5% alc.vol	<b>1.5</b>

*Adapted from Department of Health and Ageing, 2013*

### Alcohol and Drug Information Services:

Australian Capital Territory	02 6207 9977
New South Wales Sydney	02 9361 8000
New South Wales country	1800 422 599
Northern Territory Darwin	08 8922 8399
Northern Territory country	1800 131 350
Central Australia	08 8951 7580
Queensland	1800 177 833
South Australia	1300 131 340
Tasmania	1800 811 994
Victoria	1800 888 236
Western Australia Perth	08 9442 5000
Western Australia country	1800 198 024

### Kids Helpline:

Ages 5 to 25 years  
1800 551 800  
24 hours a day, 7 days a week



# Diabetes<sup>1</sup>

---

Diabetes is one of Australia's fastest growing chronic diseases – it is a condition where the glucose levels in the blood are too high (hyperglycaemia).

When we eat carbohydrates (bread, pasta, rice, fruit cereals, etc) these foods are broken down into glucose in the bloodstream. Our bodies work by taking the glucose and converting it into energy so it can be utilised by the cells of our body. You need the hormone insulin for this conversion process. Insulin is produced by the pancreas and works like a bridge allowing glucose to move from the blood into our muscles and fat.

In people with diabetes, insulin is no longer produced or not produced in sufficient amounts by the body resulting in high blood glucose levels.

People with diabetes are four times more likely to develop cardiovascular disease. People with diabetes are also more likely to develop impaired kidney function, peripheral nerve damage, erectile dysfunction, eyesight problems and pregnancy complications.

Type 2 diabetes is the most common form of diabetes in Australia, and if you are overweight you are twice as likely to develop type 2 diabetes. However, maintaining a healthy weight, eating a healthy, low-fat diet and being physically active can reduce your risk of developing type 2 diabetes by up to 60%.

## **Diabetes Australia:**

[admin@diabetesaustralia.com.au](mailto:admin@diabetesaustralia.com.au)

[www.diabetesaustralia.com.au](http://www.diabetesaustralia.com.au)

Infoline: 1300 136 588

# Physical Activity<sup>1</sup>

---

A combination of a low-fat diet and regular physical activity will help you to control your weight, and improve your heart and overall health. It is good for the mind and the body! Physical activity can be as simple as walking; it's all about getting moving on a regular basis. Whether you are riding your pushbike, gardening, getting off the bus one stop earlier, having a swim at lunch or taking the stairs rather than the lift – it all adds up.

Changes in our lifestyle have impacted on the amount of physical activity that we do each day. We may be more inclined to read the news via the internet, rather than walking to the local shop to purchase the paper. We are working longer hours than ever, so it's important to reconnect with activity.



Some recent guidelines have recommended that adults should aim for at least 10,000 steps a day, or better still, around 50,000- 70,000 steps a week, meaning you can make up for inactive days sometimes by having more active days. These steps don't have to be all at once but can be accumulated over the course of the day and week – at work, at leisure and getting to and from places. By wearing a pedometer you will be able to find out how many steps you currently do. If exercise has previously been a silent friend, it may take a little time to work up to 10,000 steps a day – so try and find an activity you enjoy – this will help you stay motivated to continue.<sup>1</sup>

Remember that every activity you do is helping you get stronger and fitter.

1. Queensland Health. 10,000 steps. Available at: <http://www.10000steps.org.au/>

# Depression<sup>1</sup>

---

It's quite normal to feel sad now and then. It's also normal to feel sad if you've had a heart attack or recent diagnosis of a heart condition. However, if these feelings are ongoing you may be suffering from depression. Depression can affect your work and your home life – so talk to your doctor if you've been feeling sad or overwhelmed, or if you've lost interest in activities that usually give you pleasure.



## **Common symptoms of depression are:**

- An unshakeable sadness, anxiety or emptiness.
- Overwhelming hopelessness accompanied by pessimistic feelings.
- Extreme guilt, feelings of helplessness and no sense of self worth
- Loss of energy or motivation, a slowing down of metabolism and activity levels. Being plagued by constant fatigue
- A sense of helplessness along with an increasing inability to focus plus indecisiveness
- Loss of sound sleep and development of extreme insomnia
- Inexplicable weight loss or weight gain. Triggered by loss of appetite or eating binges.
- Brooding and suicidal inclinations
- Irritability, short temper and restlessness
- Physical afflictions like headaches, digestive disorders and chronic pain for no particular reason.

## ***Psychological Well Being***

---

Your emotional health is also very important. Stress is not good for the body or the soul – whether this is anxiety or panic or whether you are feeling under pressure at work or at home from the demands of others.

Try and work out what triggers your stress – it’s much easier to deal with when you know what it is. Take 10 minutes out and go for a walk to clear your head and steady your breathing. Read your book, have a bath, take a yoga class. Taking time to unwind from the stresses of your busy day is necessary.

Make sure you keep a healthy balance between work and life – spending time with friends and family plays an important part in our overall health and well-being.

## ***Kidney Health***<sup>1</sup>

---

Maintaining kidney health is important.

Kidneys help to regulate and maintain the body’s fluid balance. They remove salt, waste products and fluids from the blood and they produce the hormones that cause the blood vessels to expand and contract. The kidneys will filter approximately 200 litres of blood daily. This filtering process removes around 2 litres of “waste” per day and ensures that just the right amount of water stays in the body. Water balance and blood pressure are closely related. The kidneys normally prevent some substances, such as protein, from being removed from the blood. If the kidneys are damaged, protein from the blood can leak into your urine. You normally have less than 150mg of protein in your urine. Having more than this amount is called proteinuria and may be an early sign of chronic kidney disease, particularly in people with diabetes or high blood pressure.

If your kidneys are not functioning properly, your blood pressure, heart and blood vessels can all be affected. High blood pressure can damage the blood vessels, making them thick and narrow. Uncontrolled high blood pressure can also damage your kidneys leading to other health issues. Keeping your blood pressure under control helps your kidneys function at their best.

Chronic kidney disease is often called a “silent disease” as there are often no obvious early warning signs or symptoms. Your doctor can monitor your kidney function by various blood and urine tests.

1. UpToDate Inc 2013. Patient information: Chronic kidney disease (Beyond the Basics).  
Available at: [www.uptodate.com/contents/chronic-kidney-disease-beyond-the-basics](http://www.uptodate.com/contents/chronic-kidney-disease-beyond-the-basics)



## ***Erectile Dysfunction<sup>1</sup>***

---

Erectile dysfunction (ED) is extremely common, so if you are experiencing ED, try not to let it become a stressful issue. Your doctor should be your first port of call to discuss why this might be happening. ED can be an early indicator of health problems like diabetes and high blood pressure, so it makes sense to get it checked out.

1. Sexual Health Australia. Treatment for Erectile Dysfunction.  
Available at: [www.sexualhealthaustralia.com.au/page/treatment\\_options.html](http://www.sexualhealthaustralia.com.au/page/treatment_options.html)

## ***Regular Checkups***

---

Regular checkups with your doctor are paramount to the successful management and treatment of your symptoms.

The doctor needs to be able to monitor your progress and check that the medicines prescribed are in fact working. You need to be able to talk about your condition, about the changes you are making in your lifestyle, as well as any issues you might be facing along the way.

Your doctor will advise how often you need to schedule an appointment.

## Medicines

---

It is not uncommon to be prescribed a combination of medicines when you have cardiovascular disease. You may be on medication for your high blood pressure, high cholesterol and diabetes plus other medicine if you have had a previous heart attack.

Your medicines have been prescribed to help in the treatment and management of your symptoms and to reduce the risk of having a heart attack or stroke. It's important that you know what medications you are taking and what they are for. You need to be clear on what to take and when you need to take it – before food, after food, in the morning, at night etc. It is also useful to keep a list of your medications and dosage required in your wallet or purse.



You may find you get some side effects from one – or more – of the medicines you have been prescribed. Make sure you read the Consumer Medication Information available from your pharmacist – it provides detailed information on the medicines and will list potential side effects that may be experienced. See your doctor if the side effects continue, or if any of the medicines are making you feel unwell.

It is also important to remember, never stop taking your medication or change the amount of the dose unless told by your doctor.

For additional support or advice, talk to your local healthcare professional or call one of the information lines below.

### **Medicines Line**

1300 888 763

### **National Heart Foundation**

1300 362 787

### **National Prescribing Service**

[www.nps.org.au](http://www.nps.org.au)

1300 633 424









## ***Important contact numbers:***

---

### **Ambulance:**

Dial 000 – don't hang up, wait for instructions.

My GP's name: .....

Phone number: .....

Address: .....

.....

My cardiologist's name: .....

Phone number: .....

My pharmacist's name: .....

Phone number: .....

Address: .....

.....

### ***Here are some other important contact numbers you might need:***

#### **National Heart Foundation**

1300 362 787 (cost of a local call)

[www.heartfoundation.org.au](http://www.heartfoundation.org.au)

#### **Diabetes Australia**

1300 136 588

[www.diabetesaustralia.com.au](http://www.diabetesaustralia.com.au)

#### **National Stroke Foundation**

1800 787 653

[www.strokefoundation.com.au](http://www.strokefoundation.com.au)

#### **National Prescribing Service**

1300 633 424

[www.nps.org.au](http://www.nps.org.au)

#### **Kidney Health Australia**

1800 454 3639

[www.kidney.org.au](http://www.kidney.org.au)

#### **Get Healthy Coaching**

[www.gethealthynsw.com.au](http://www.gethealthynsw.com.au)

## ***If found please return to***

---

---

---

---

---

## ***Instructions to doctor:***

---

Whilst this patient health diary is primarily focused upon cardiovascular health, other health parameters can be included that may need to be measured regularly. Space is included for recording of another parameter or if more than one, the parameters included that are not appropriate for your patient can be deleted and updated to the additional health parameter.

Please fill in the parameters for your patient as applicable, and record the actual patient's levels below these targets.

Please note the name and dose of the medication being prescribed in the appropriate columns. Please also note frequency and timing of medication.

Additional space has been included to allow for recording of a number of medications including those for conditions other than CVD.

Please note the date of any changes in medication, including titration, in the column titled: "Date to review or stop". Further copies of this patient health diary are available from your Aspen representative.

## ***Instruction to pharmacist:***

---

While this patient health diary is focused primarily on cardiovascular health, other health parameters may still be included by the patient's doctor. Supporting the patient in their medication compliance can also help improve their treatment outcomes.

Any change in medication, including titration and substitution, should be recorded. Note the date of this change in the "Date to review or stop" column, and fill in a new line with the details of the titrated or new drug. Please initial in the "Dr/Pharmacist signature" for each and every cessation, titration or substitution of medication, and strike a line through the discontinued medicine.

A patient resource provided by:  
Aspen Pharmacare Australia Pty Ltd  
34–36 Chandos Street, St Leonards NSW 2065  
Tel. +61 2 8436 8300  
aspen@aspenpharmacare.com.au  
www.aspenpharma.com.au  
ABN 51 096 236 985 ASP 291

