



INSTITUT UNIVERSITAIRE
DE CARDIOLOGIE
ET DE PNEUMOLOGIE
DE QUÉBEC



Cardiac Surgery and Recovery

PATIENT GUIDE

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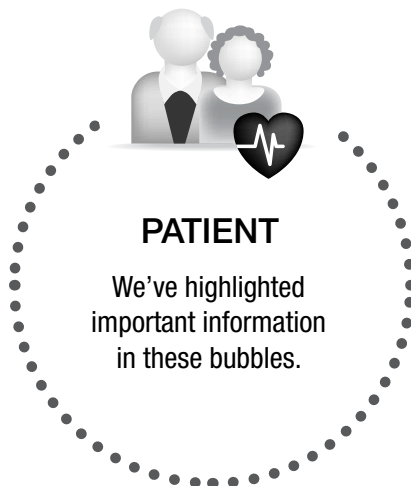
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The news that you need heart surgery can raise many questions and sometimes cause a whirlwind of emotions. The purpose of this guide is to help you and your loved ones by giving you the information you need to prepare for your surgery and facilitate your recovery. You don't need to read all of it — simply check the relevant sections as any questions arise.



This guide has four parts:

1. Recommendations and preparations before your admission
2. Your stay at the hospital
3. Return home and recovery
4. Information about your surgery

During your stay, you'll meet a number of health professionals, interns and research professionals. Affiliated with Université Laval, the *Institut universitaire de cardiologie et de pneumologie de Québec (IUCPQ)* aims to promote teaching, research and innovation in order to drive knowledge forward. You may be approached to participate in a research project, but you are free to accept or refuse. Your cooperation is valuable since it helps us improve quality of care.



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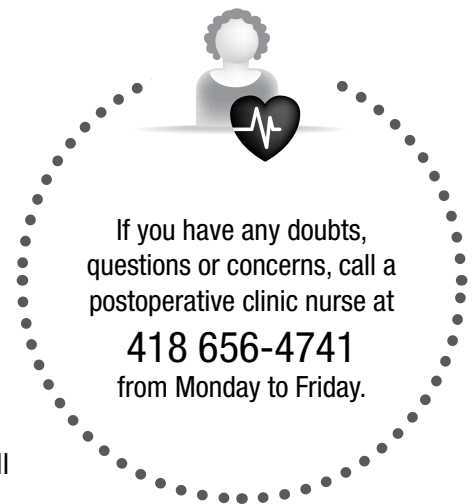
Return home and recovery

MEDICAL FOLLOWUP

You must make an appointment with your family physician and cardiologist. Mention that you recently had heart surgery.

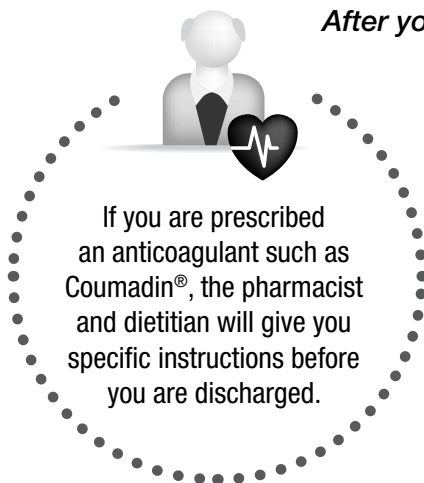
- See your family physician 1 to 2 weeks after leaving the hospital.
- See your cardiologist 4 to 6 weeks after your surgery.

You must see your surgeon three months after having aortic surgery. The surgeon will perform a computed tomography (CT) scan of the chest or an echocardiogram. You will receive a call to plan your appointments at the aortic diseases clinic. If you have any questions, call a nurse at 418 656-8711, extension 5612.



MEDICATION

While you are in the care unit, the pharmacist, surgeon and specialized nurse practitioner will jointly reassess your medications. It is highly likely that your usual medication(s) will be changed. You will be given a new prescription before you are discharged.



After you leave the hospital:

- Give your pharmacist your prescription.
- Bring your former medications so the pharmacist can identify which ones you should continue or stop taking.
- If you have additional questions about your medications, ask your pharmacist.
- You must take your medications as prescribed until your next appointment with your family physician or cardiologist, who will re-evaluate you and make changes to your medications if necessary.

WOUND CARE

- If you have sutures, staples or bandages when you are discharged, a CLSC nurse will provide wound care at your home.
- You can take a shower once all bandages have been permanently removed.
- Use a mild, unscented soap to clean your wound and rinse it with clean water. Upon exiting the shower, dry the wound well by patting it lightly with a clean towel.
- It is normal for your wound to be sensitive and itchy. This is part of the healing process.
- Do not expose your wound to the sun for 6 months.
- Avoid baths, pools and spas as long as your wound has not fully healed and still has a scab.



Contact your physician or a postoperative clinic nurse if you have any of the following signs of wound infection:

- Increased redness
- Swelling
- Unpleasant odour
- Increased pain
- Fever
- Yellowish or greenish discharge

PROTECTING YOUR STERNUM

If your surgery required a sternotomy, your sternum had to be cut and rejoined using metal wire. It will take an average of 6 to 8 weeks to heal, the same amount of time as a broken bone.

During this time, you have to take certain precautions:

- Do not lift, pull or push any objects 10 lb (5 kg) or over.
- When lifting an object, keep it close to your body. You should not feel pain from your wound when moving. Avoid twisting and sharp movements.
- Before coughing, press your pillow firmly over your wound. If your pillow is not available, cross your arms tightly.
- Continue to use the techniques for getting up and lying down. Refer to Techniques for getting up and lying down on page 23.
- Within 8 weeks and with your physician's consent, you can progressively resume any activities requiring the use of your arms (golf, bowling, tennis, cycling, skiing, etc.).
- Avoid any activities where you could fall (using a ladder or stepladder, etc.).



If it feels like your sternum is moving when you make certain movements or cough, contact a postoperative clinic nurse.

PREVENTING INFECTIVE ENDOCARDITIS

Endocarditis is an infection that is generally caused by bacteria. It most often affects the heart's valves and sometimes affects the heart's inner wall. It normally occurs in people with heart valve disease. This is why certain precautions must be taken to prevent this complication.

Keep your mouth healthy

The germs in your mouth are not normally harmful, but a dental procedure or poor oral hygiene can introduce these germs into your bloodstream.

- Brush your teeth after each meal and before going to bed.
- Floss every day.
- See your dentist at least once a year, even if you have a dental prosthesis.
- Notify your dentist if you have bleeding gums.
- Remove your dental prosthesis for at least 5 hours a day.

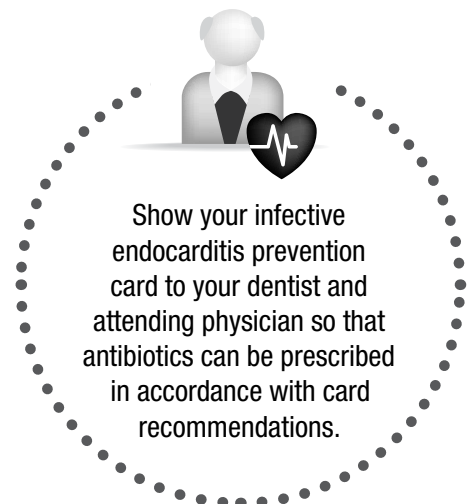
Watch for signs of infection and call your physician if you have:

- A fever higher than 38.5°C (101.3°F) for more than 2 days or any chills.
- A cold with a persistent fever or greenish secretions.
- Signs of a urinary tract infection: trouble urinating, burning sensation or foul-smelling urine.
- Greenish discharge from your wound.

You will need to take antibiotics

To prevent infective endocarditis, you will be prescribed antibiotics before certain respiratory tract exams or before a dental treatment (including a cleaning) if you have any of the following:

- Partially repaired or unrepaired congenital heart defect
- Heart transplant and heart valve damage
- Replaced or repaired heart valve
- Aortic endoprosthesis
- A previous episode of endocarditis within 6 months following a complete repair of a congenital heart defect or an aortic replacement



Show your infective endocarditis prevention card to your dentist and attending physician so that antibiotics can be prescribed in accordance with card recommendations.

SOLUTIONS TO THE MOST COMMON PROBLEMS

You may experience certain problems once home. This section provides solutions to the most common problems following cardiac surgery and describes the symptoms for which you must see a health professional.

Pain

It is normal to have muscle pain for a few weeks to a few months. Your pain must be effectively managed so that you can gradually resume your normal activities and recover faster.

- If necessary, take a pain medication as prescribed. Take it before bed, even if the pain is tolerable, to ensure you get a good night's sleep.
- Use your pillow to reduce pain when you cough and when you do your breathing exercises.

Palpitations

Palpitations frequently occur after cardiac surgery because of the trauma your heart has just experienced. The palpitations can persist for up to one month. Avoid mint and stimulants such as coffee, tea, chocolate, cola and tobacco.

Fever

Fever is common in the first few days after surgery. However, after the first week, fever may be a sign of infection. If you had a valve replacement, you must watch carefully for signs of fever. Refer to Preventing infective endocarditis on page 29.

- Consult a physician if you have any other signs of infection, such as a red and painful incision, coughing, coloured sputum, pain when urinating, etc.
- If your temperature is over 38.5°C (101.3°F), take acetaminophen every 4 to 6 hours.



You should not have any angina after a bypass procedure. If you have chest pain that seems abnormal or that resembles the chest pain you had prior to your surgery, consult a physician.



If your palpitations last longer than 30 minutes and are accompanied by breathlessness and discomfort, **go to the emergency room.**



If your temperature is over 38.5°C (101.3°F) for more than 48 hours or if you develop a fever after your first week at home, consult a physician.

Breathlessness or fatigue

It is normal to experience fatigue and some shortness of breath after your surgery. A number of factors can cause these symptoms.

- Physical deconditioning
 - The fact that you have been less active for a period of time may cause you to feel tired and more short of breath faster than before.
- Pleural effusion
 - This is an accumulation of fluid around the lung. If you develop this condition, a diuretic may be prescribed. In more severe cases, a puncture may be necessary to drain the effusion.
- Pericardial effusion
 - This is an accumulation of fluid around the heart. An anti-inflammatory may be prescribed to treat it.
- Anemia (low hemoglobin)
 - Surgery-related blood loss can decrease the number of oxygen-carrying red blood cells, causing fatigue and shortness of breath.
 - Your red blood cell count should return to normal within 2 to 3 weeks. If necessary, you will be prescribed iron supplements before you leave the hospital.

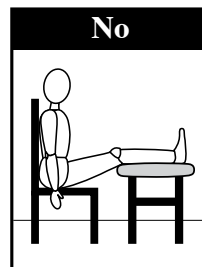
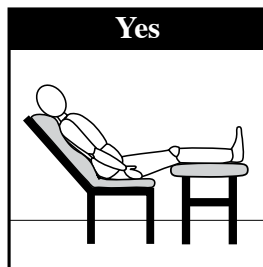
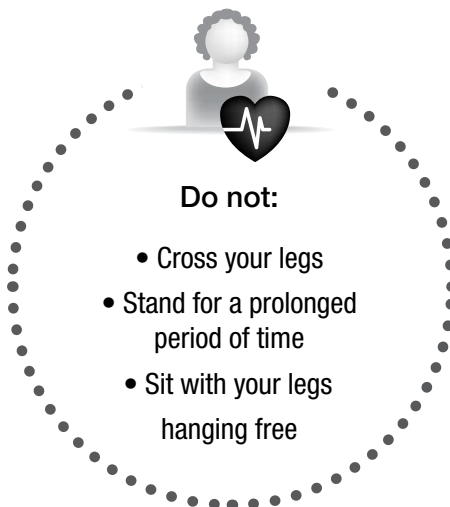


>> If you experience shortness of breath while resting or are unable to have a conversation or tolerate lying down, go to the emergency room.

Swelling in the operated leg

If you had a bypass and a vein was removed from your leg, you may develop swelling in that leg that can last for a few days or even a few weeks. Walking will improve circulation and reduce swelling in your leg.

In a sitting position, raise your legs while reclining your back.



Throat pain

Intubation during surgery can irritate your throat. Your voice may be hoarse and you may have trouble swallowing. These symptoms should disappear within 2 to 3 weeks following the surgery.

Ice chips and cough drops may soothe your throat. Opt for sugar-free cough drops. If you continue to have trouble swallowing or are choking, consult your physician.

Constipation

Constipation is common following surgery. Lack of exercise, changes in eating habits, anesthesia and certain medications can all cause constipation.

Try the tips below to prevent constipation.

- Gradually increase your fibre intake by eating more whole grain breads and cereals, bran muffins, legumes, fruits and vegetables, and nuts and seeds.
- Prunes and prune juice are effective at preventing constipation.
- Make sure you stay well hydrated.
- Increase your activity level according to your tolerance.
- Some opiates (such as Dilaudid®) can cause constipation. When your pain has diminished, you can replace opiates with 1 or 2 pills of acetaminophen (Tylenol®).
- You may be recommended some over-the-counter products. Ask your pharmacist about them first.



Consult your physician if you are constipated for longer than 5 days.

Problems sleeping

Anesthesia, medication and stress can combine to cause insomnia and concentration problems.

- Any insomnia should disappear once you have resumed your normal activities and have a more stable schedule.
- Sip some herbal tea (camomile, linden flower) 2 to 3 times per day to help you relax and sleep better.
- Avoid caffeine and alcohol.



Consult your physician if your sleep or concentration problems persist.

Emotional reactions

Surgery is a stressful experience for both body and mind. It is normal to experience mood swings and irritability after surgery. Often, people only realize the true scope of the experience after they return home.

- Be sure to alternate periods of activity and rest according to your capabilities.
- Do not fixate on what you did before but rather on the progress you are making every day.
- Surround yourself with positive and meaningful people with whom you can discuss your worries.
- Avoid stress and hassles that can siphon your energy.



Family and loved ones

While the patient recovers, simply be there to listen and provide support. It's the best help you can give!



Important: **Consult a physician** if you are experiencing persistent depression.

RESUMING ACTIVITIES

Daily activities



Family and loved ones

Help out with errands, household chores and meal preparation. The patient will appreciate it, and it will help him or her get back to normal faster.

You will gradually regain your autonomy after returning home. You will be able to take of yourself, attend to your personal hygiene, move about the house and climb the stairs.

You will be able to do short activities and help with light chores. Listen to your body and rest regularly since your body will still need it.

Don't take it too easy — strength-building exercises and walking will help your body regain its flexibility and energy. **Go at your own pace.** In time, you will regain your confidence and be able to gradually increase the distances you walk.

Physical activity




It is important to increase your activity level progressively. The perceived exertion scale is a tool you can use to evaluate the overall intensity of an exercise using numbers or words.

Start with short, light-intensity (2 out of 10 on the exertion scale) walks of 10 to 20 minutes, 2 to 4 times a week.

Gradually increase the duration and frequency of your walks to 45 minutes, 5 to 7 times a week.

Your perceived exertion should be fairly light to somewhat hard (3 to 4 out of 10).

Do the exercises recommended by your physio-therapist after your walk. You will be warmed up and more likely to do them more often.

PERCEIVED EXERTION	
	0 Nothing at all
	0.5 Extremely weak
	1 Very weak
	2 Weak
	3 Moderate
	4 Somewhat strong
	5 Strong
	6 Stronger
	7 Very strong
	8
	9 Very very strong
	10 Maximum

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Revised - January 2010



Be sure you can have a conversation while exercising. If you have trouble talking normally or start wheezing, the activity is too intense. **SLOW DOWN!**

After 6 weeks at home

If your recovery is going normally and your physician confirms as much, you can gradually resume doing the activities you enjoy at your own pace. Start with light - to moderate - intensity activities.



Below are some tips on how to make the most of your exercise sessions.

- Always do activities that you enjoy, and do them in a relaxed manner.
- Start by warming up for 5 to 10 minutes.
- Join or involve other people: walk with your spouse, a friend or a walking club.
- Do not exercise in extreme temperatures (extreme cold, high humidity, heat waves, etc.).
- After a meal, wait 30 to 60 minutes before exercising.

Be patient: it can take a few weeks before you see any improvements, so go at your own pace. Your fitness will improve gradually, and you'll feel better with time.

Intensity	Daily life	Activities
Light	Light household chores (washing the dishes, cooking, making the bed).	Light-intensity walking on a flat surface, cycling with no resistance, bowling, playing pool, fishing.
Moderate	Moderate household chores (washing the floor, washing the windows, gardening). Sexual intercourse.	Moderate-intensity walking on a flat surface, going up and down the stairs, light-intensity cross-country skiing, downhill skiing, water aerobics, golfing (without a cart).
Vigorous	Shovelling snow, chopping wood, mowing the lawn (manual mower).	Jogging, mountain hiking, cross-country skiing, swimming

Sexuality

After heart surgery, it is normal to worry about resuming sexual activity. However, there are no restrictions. You should wait until both you and your partner feel comfortable. For six weeks, do not put weight on your arms to avoid straining your sternum.

Sexual intercourse requires about the same effort as quickly climbing the stairs.

Return to work

The length of your recovery will vary depending on your surgical procedure and the nature of your job. In general, you can return to work after 2 to 3 months. If your experience complications, however, that extend your recovery time, your cardiologist or family physician may reevaluate your situation.

Insurance form

- Complete the section concerning you.
- Prepare an envelope with sufficient postage.
- Contact the secretary at 418 656-4717 to find out all fees.
- Return the completed form and envelope by giving it to the cardiac surgery care team directly or mailing it to:

Institut universitaire de cardiologie et de pneumologie de Québec
Secrétariat de chirurgie cardiaque
2725, chemin Ste-Foy, L-3583
Québec, Québec G1V 4G5

Driving

Anesthesia, fatigue and medications can all affect your reflexes. It is recommended to wait 6 weeks before driving. You may need to wait longer if you are taking narcotics (powerful painkillers). Discuss the situation with your physician.



IMPORTANT

By law, you must wear a seatbelt at all times. Doing so will not injure your incision. As a passenger, you can sit in the front of the vehicle when you leave the hospital.

HEART DISEASE RISK FACTORS

Surgery does not cure your heart disease. Instead, it repairs the damage to your heart caused by heart disease. The table below presents the heart disease risk factors. Some factors are non-modifiable, such as age, sex and heredity. However, other factors are modifiable, which means you can change them. This simplified questionnaire can give you insight into your risk factors.

Whatever risk factors you may have, consult your physician for strategies to reduce your risk of another cardiac event.

Non-modifiable risk factors		Check only if
You are:	a man over 45 years of age	<input type="checkbox"/>
	a woman over 55 years of age	<input type="checkbox"/>
A family member experienced cardiovascular problems before age 60 (infarction, stent, bypass, stroke, etc.).		<input type="checkbox"/>
Modifiable risk factors		Check only if
Your blood pressure:	is greater than 135 over 85 when you take your blood pressure yourself	<input type="checkbox"/>
	is greater than 130 over 80 if you are diabetic	<input type="checkbox"/>
You take medication to control your blood pressure		<input type="checkbox"/>
You take medication to control your cholesterol		<input type="checkbox"/>
Your body mass index:	is greater than 30 [weight (kg)/height (m ²)]	<input type="checkbox"/>
Your waist circumference:	men: is greater than 94 cm (37")	<input type="checkbox"/>
	women: is greater than 80 cm (30")	<input type="checkbox"/>
You are physically active: less than 150 minutes per week		<input type="checkbox"/>
You are:	smoker	<input type="checkbox"/>
	diabetic	<input type="checkbox"/>
	stressed	<input type="checkbox"/>

The section below describes how you can change certain life habits that are harmful to your health. There are many resources available to help you change your risk factors. For more information, refer to page 46.

Hypertension (high blood pressure)

Blood pressure is the pressure necessary to circulate blood throughout your body. The only way to know your blood pressure is to measure it. Anything over 140 over 90 (self-measurement: 135/85; diabetic: 130/80) is considered hypertension. One in 5 people have high blood pressure, which is a subtle disease that can cause numerous complications involving the heart, brain or kidneys. Thankfully, high blood pressure is a modifiable risk factor.

Strategies:

- Maintain a healthy weight. If you are overweight, reduce your weight by 5% to 10%.
- Reduce your salt intake (refer to Diet on page 42).
- Exercise regularly.
- Take your medications regularly, as prescribed.
- Drink alcohol in moderation and limit yourself to:
 - Women: 1 to 2 drinks/day to a maximum of 9 drinks/week
 - Men: 2 drinks/day to a maximum of 14 drinks/week
 - Do not drink every day.

Dyslipidemia (cholesterol imbalance)

Cholesterol is a fat that your body produces naturally. Triglycerides are another type of fat that your body needs to function. While you need both cholesterol and triglycerides to stay healthy, they can be harmful to your health in excess quantities. Target values will vary according to your risk level.

Strategies:

- Lower your intake of trans fat and saturated fat (refer to Diet on page 42).
- Opt for monounsaturated and polyunsaturated fats.
- Eat fish high in omega 3s (salmon, trout, sardines).
- Reduce your consumption of sugar and alcohol.
- Boost your intake of soluble fibre (oats, barley, legumes, psyllium, fruits and vegetables).
- Exercise regularly.
- Take your medications regularly, as prescribed.

Overweight/obesity

Excess weight — especially around the waist — increases your cardiovascular disease risk. Reducing your weight by 5% to 10% can often help enhance diabetes control, improve your lipid profile and lower your blood pressure.

Strategies:

- Set realistic objectives and avoid miracle cures.
- Eat slowly and reduce serving size.
- Make better nutritional choices by lowering your intake of salt, sugar and bad fats and increasing your fibre intake.
- Reduce your alcohol consumption.
- Exercise regularly.
- Follow the recommendations of a dietitian or kinesiologist.

Physical inactivity

Physical inactivity means a lack of or irregular physical activity. Physically inactive people have the same risk of heart disease as someone who smokes a pack of cigarettes a day. Physical activity is an essential part of improving your overall health. The recommendation is 150 minutes a week in order to enjoy protective cardiovascular benefits, control your risk factors and improve your quality of life. The periods of physical activity in a day are cumulative.

Strategies:

- Aim for 150 minutes of moderate-intensity exercise per week (see the table on page 35).
- Walk as often as possible.
- Use a pedometer to count your steps. Aim for a minimum of 5,000 steps per day and progressively increase to around 10,000 steps per day, depending on your tolerance.
- Take the stairs instead of the elevator.
- Follow the recommendations of a kinesiologist.



Diabetes

Diabetes is a chronic disorder that causes high blood glucose levels. It considerably increases cardiovascular risk. You can better control your diabetes by significantly changing your lifestyle.

Strategies:

- Check your blood sugar (a normal level is 4 to 7 mmol/L fasting).
- If you are overweight, reduce your weight by 5% to 10%.
- Limit your consumption of sugar, fat and alcohol.
- Boost your intake of soluble fibre (oats, barley, legumes, psyllium, fruits and vegetables).
- Exercise regularly.
- Take your medications regularly, as prescribed.

Stress

Stress is a reaction to positive or negative forces. It is influenced by your ability to deal with those forces. Stress is negative when you lose or lack control, which throws your life out of balance. Repetitive or sustained stress can harm your health.

Strategies:

- Be more aware of the signs and causes of stress.
- Express your emotions by discussing your needs and fears with someone you trust.
- Set and follow priorities.
- Enjoy a variety of leisure activities (exercise, relaxation techniques, laughing, listening to music, etc.).
- Attend a stress management workshop.
- Ensure you sleep well.
- Prepare to deal with events (get informed, develop strategies, use visualization and positive thinking, etc.).
- Live in the present.

Smoking

Quitting smoking is the best thing you can do for your health.
No drug will ever work as well!

Smoking:

- Decreases or even cancels out the effect of many medications.
- Reduces the longevity of bypasses by half.
- Increases the risk of wound infection after surgery.
- Increases healing and recovery time.

If you stop smoking:

- After 8 hours, your body transports oxygen better. The risk of complications during and after operations diminishes.
- After 48 hours, your risk of heart attack starts to drop.
- After 72 hours, your lungs work better and you can breathe easier.
- After 2 to 12 weeks, your blood flow improves, it becomes easier to walk and your lung function increases by around 30%.
- In less than a year, your risk of smoking-related heart attack drops by half.

It can often take several tries before you manage to lead a smoke-free life. The only danger is giving up.

Whether or not you're ready to quit smoking, during your stay we will provide you with smoking cessation support and services.

We offer:

- Short, personalized interventions in tune with your concerns.
- An evaluation of your withdrawal symptoms.
- Pharmacological help as needed.
- Telephone followup after you return home.
- Referral to community resources for help with quitting.



DIET

Making healthy life choices is part of your cardiac rehabilitation. A crucial aspect of this process is your diet. You must make the necessary changes to help prevent future heart disease and ensure your surgery is a success.

A dietitian may meet with you while you are hospitalized to analyze your diet, make suggestions and steer you towards the best resources for changing your eating habits. Feel free to notify the care staff if this option interests you.

Healthy plate

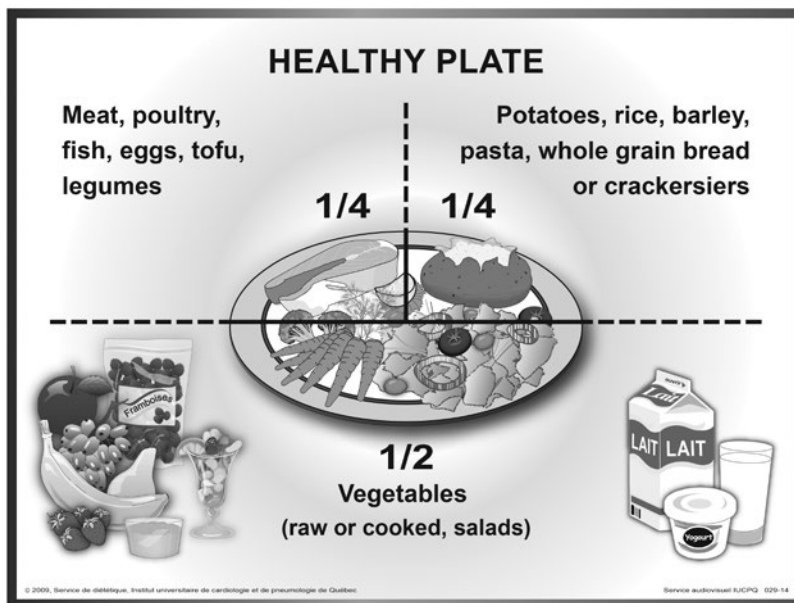
Before worrying about your fat, sugar and salt intake, you need to make sure that your diet is balanced, meaning it provides all the nutrients that your body needs to function. These nutrients include protein, carbohydrates, fat, vitamins and minerals. The healthy plate tool provides practical guidance on food choice and serving size. You can follow the general information below, but feel free to consult a dietitian for more personalized advice.

HERE'S HOW TO MAKE A HEALTHY PLATE:

Half of your plate should be vegetables in the form of cooked or raw vegetables, salads or vegetable soup. They provide fibre and antioxidants that are important for your heart's health.

One quarter of your plate should be protein, which is found in meats, poultry, fish, eggs, tofu, nuts, seeds and legumes. Consuming sufficient protein helps you feel full longer and keeps you from snacking in between meals.

The other quarter of your plate should be starch (bread, potatoes, pasta, rice, barley, crackers). Foods in this food group mainly provide dietary fibre, which contributes to the health of your digestive system and helps you feel full. Opt for whole grain foods.



If you are still hungry, complete your healthy plate with milk or alternatives (milk, yogurt, soy drink, etc.) or a fruit. Milk and alternatives help you meet your calcium requirements to keep your bones healthy. Fruits help you increase your intake of fibre and antioxidants.

Fats and heart health

Certain types of fats—specifically trans fat and saturated fat — are harmful to your heart by helping to raise bad (LDL) cholesterol. It is best to limit their consumption.

Foods to avoid: high sources of *trans* and saturated fat

Fried foods	Butter	Cold cuts
35% cream	Croissants	Chips
Regular cheese	Vegetable fat	Meat fat
Hydrogenated margarine	Pastries	Poultry skin
Lard	Shortening	

These foods are high in trans and saturated fat and can be replaced by the following foods, which provide good fats for heart health.

Foods to choose: sources of good fats

Spread	Soft non-hydrogenated margarine made with canola or olive oil
Sauté	Olive or canola oil
Dressings/vinaigrettes	Olive or canola oil
Baking (cookies, crumbles, pie dough, muffins, cakes)	Soft non-hydrogenated margarine made with canola or olive oil Canola oil

Sodium












It is strongly recommended to limit your consumption of salt and salty foods in order to:

- Control your blood pressure.
- Help your kidneys, heart and lungs work better.

Using salt-free seasonings is a good way to reduce your salt intake. A number of companies offer tasty, salt-free seasoning blends such as *McCormick*[®], *Mrs. Dash*[®], *Garno*[®] and *Club House*[®].

The vast majority of our salt intake, however, comes from processed foods and restaurant meals. Cooking your own meals and opting for fresh products that have undergone little to no processing are good ways to lower your salt intake.

The table below lists a number of common foods and their sodium content.

Food	Serving size	1 packet of salt = 300 mg of sodium
Table salt	1 teaspoon (5 ml)	
Reduced sodium soy sauce	1 tablespoon (15 ml)	
Canned/jarred sauce	1/2 cup (125 ml)	
Powdered soup base	1 teaspoon (5 ml)	
Liquid soup base	2 teaspoons (10 ml)	
Regular canned soup	1 cup (250 ml)	
25% sodium-reduced canned soup	1 cup (250 ml)	
Dry soup mix	1 cup (250 ml)	
Tomato or vegetable juice	1 cup (250 ml)	
25% sodium-reduced pasta side dish mix	1 cup (250 ml)	
Seasoned rice mix	1/2 cup (125 ml)	

Read food labels to make the right choices:

- Salt-free or sodium-free = 5 mg or less of sodium
- Low sodium or reduced sodium = 140 mg or less of sodium
- Low salt

Watch out for “light” products and those with 25% less sodium. They can still contain too much salt.

What to eat after heart surgery?

You may have less of an appetite for the first few days following your surgery. However, you need to consume sufficient protein to:

- Ensure your wound heals well (cell growth and repair).
- Build and maintain muscle mass.
- Preserve immune system function (prevent infection).

You must consume a source of protein at each meal. Protein is mainly found in the following foods:

Fish	Nuts/seeds, nut/seed butters
Poultry	Cheese
Lean meats	Milk or chowder-style soups
Legumes or tofu	Yogurt
Eggs	Milk-based desserts: pudding, tapioca, blancmange

Your incisions will heal faster if you eat 3 meals a day containing protein.

If your appetite is low, you can consult a dietitian during or after your stay in the hospital. You may be recommended enriched foods or supplements, depending on your condition.

RESOURCES

Pavillon de prévention des maladies cardiaques (PPMC)

The PPMC is a specialized cardiac rehabilitation service offered by the Institute. The team of nurse clinicians, kinesiologists and dietitians have all the necessary expertise to help you take charge of your health and restore your wellbeing.

To help you set and achieve your objectives, the following integrated services are offered:

- Health assessment
- Risk factors screening
- Physical exercise program
- Nutritional assessment and followup

Public conferences

Because of your medical condition, you must modify a number of life habits and make changes in your personal life. PPMC public conferences are given by health professionals and are intended to inform you and your family about:

- Cardiovascular disease and risk factors
- Medications
- Physical activity
- Stress and anxiety
- Nutrition

Conferences are given twice a year and are free. They also provide an opportunity to meet people who are going through the same things as you. For information, call 418 656-4594.

Healthy eating

- How to eat healthy
- Introduction to vegetarianism
- Understanding food labels and choosing wisely

Weight management

- Benefits of weight loss
- AMIGO program (multidisciplinary obesity management)

Stress management

- **Institut universitaire de cardiologie et de pneumologie de Québec (IUCPQ)**

IUCPQ diabetes clinic

- **Other resources are available at the CSSS nearest you.**

“Traité santé” program

Smoking cessation (free information and support services)

- J'ARRÊTE
 - Smoking cessation helpline: 1 866-JARRETE (527-7383)
 - Website: www.jarrete.qc.ca

- Quit Smoking Centres: To reach the centre nearest you, contact your local CSSS.

- Your pharmacist and family physician can also help with your efforts to quit smoking.

Ask your CLSC.