

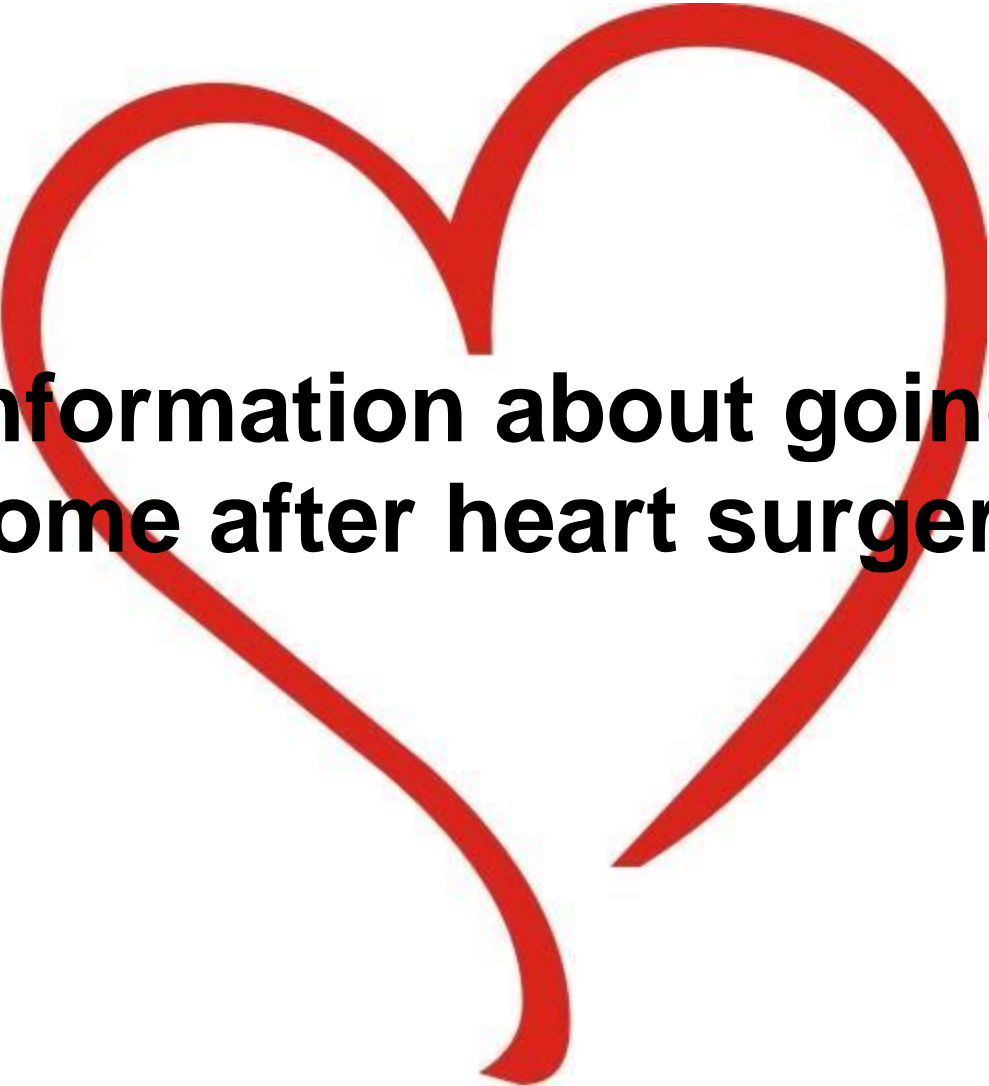
Engelska

Hemgångsinformation

Till dig som genomgått en hjärtoperation



VÄSTRA
GÖTALANDSREGIONEN
SAHLGRENKA UNIVERSITETSSJUKHUSET



Information about going home after heart surgery

Thoraxkirurgiska kliniken
Sahlgrenska Universitetssjukhuset, Göteborg

Patient coordinator Isabel

One of our nurses with long experience of caring for thorax surgery patients acts as patient coordinator, where the aim is to serve as a support for, primarily, residents in the Gothenburg area.

You might meet her at an information meeting prior to scheduled surgery and she is here whilst you are in hospital and as a contact when you are discharged home.

The patient coordinator works together with other care personnel and plans your time in hospital, future discharge and any measures and support that you, specifically, might need when coming home.

You can reach the patient coordinator on tel: **031-343 98 33**

You have recently undergone heart surgery and thus are beginning a new phase in your life. Through this brochure, we hope to be able to provide you with advice and tips before going home.

Tiredness

It's normal to feel periods of tiredness or infirmity during the first few weeks. Coming home is stressful and you probably won't have the strength to handle too many visitors. It's important not to subject yourself to too much stress.

If you bear this in mind, perhaps you won't be downhearted if recovery takes a longer time than you had thought.

In order to recover more quickly and for the feeling of tiredness to recede, your physical activity should increase day by day. Regular exercise will lead to improvements and can provide great satisfaction.

Feelings and intimacy

People react in different ways emotionally following heart surgery. It's perfectly natural and human to have ups and downs. It's common to be easily irritated, feel down in the dumps and depressed, be tearful, experience concentration difficulties, have nightmares, and slight memory losses. These are normal reactions which will pass with time.

Stress is the body's reaction to largely all types of strains, challenges and demands. With stress, the heart rate and blood pressure increase, leading to increased pressure on the heart.

Listen to your body, have realistic expectations and don't make excessive demands on yourself. Give yourself time to do the things you like doing.

You yourself will feel when you are able to resume sexual intimacy. During the initial period after the operation, pain from the operated area may be a practical obstacle, but apart from that there are no physical restrictions. Certain heart medicine may give rise to impotence – talk to your doctor for advice and help.

The surgical wound

It takes 6 to 8 weeks for the breastbone (sternum) to heal. The breastbone is drawn together using steel thread, which will be in place forever.

It takes 2 to 3 weeks for the skin on the chest to heal. Stitches don't need to be removed since the wound has been sewn using special thread which the body itself dissolves (this takes approximately two months). There is sometimes swelling at the top of the breastbone. This will gradually disappear by itself. There can be soreness over the breastbone for a long time after surgery.

A vein from the leg is often used in the case of bypass surgery. The blood in the leg will find other ways back to the heart. The operated leg may be swollen, in which case it is advisable to keep the leg in a raised position when sitting down.

Sometimes the doctor will have sealed the skin using clasps on the leg; in these cases, the clasps must be removed 12 to 14 days after surgery. At the same time, stitches from the drainage tubes are removed.

The breast bone

It takes 6 to 8 weeks for the breastbone to heal. During the healing period, the breastbone will become gradually stronger and increasingly able to withstand pressure. You can carry and lift things to your pain threshold; lighter grocery bags and simple household chores are fine, but divide the weight evenly between the arms. You should also avoid heavy lifting, swinging movements such as snow removal, woodcutting, golf swings and tennis, as well as heavier pulling and pushing movements, such as when rearranging furniture.

Listen to the body's pain signal – it indicates when you're taking on too much.

In the case of certain conditions such as diabetes, osteoporosis, and long-term cortisone treatment, it takes an additional couple of weeks before the breastbone is healed.

Signs of infection

Your temperature may be somewhat higher than normal during the first two weeks after surgery. If you have high fever together with pain, swelling, redness, or if the cut begins to run, you should contact your patient coordinator.

Pulse

After surgery, it's normal for the pulse to be a bit higher and heartbeats can feel heavier, but this will pass.

The heart may sometimes beat irregularly and there may be an unsettled feeling in the chest. This usually occurs when resting. Extra beats are not dangerous, but if the heart continues to beat irregularly and you feel worried, you should contact a doctor.

Coldness

It's common to feel cold after heart surgery. Blood values are often lower, and certain medicines can also result in feeling slightly cold and frozen. You might experience alternate periods of feeling cold and hot, but this usually rights itself after a couple of weeks.

Pain

It's common to feel some pain and discomfort from the chest. You might also feel tingling/pricking/numbness in the chest. This is due to the fact that the nerves have been cut and are now growing out again. If the internal thoracic artery has been used, the area beneath the left or right chest muscle may feel sore or numb. The problem will pass.

It's also common to experience muscle pain from the neck, shoulders and back. The pain or discomfort can last from a few weeks up to months after surgery. Tablets containing paracetamol

(such as Panodil och Alvedon) are effective against such pain.

They are available over the counter at the pharmacy.

If the tablets don't help relieve your pain, you should contact a doctor and perhaps get a prescription for other painkillers.

You have also been given a movement programme by the physiotherapists which will increase the blood circulation and can help alleviate muscular skeletal discomfort.

When you begin reducing the intake of painkillers, you should first stop with the daytime dosage and continue with the night-time dosage for a while.

When you feel that things are going well, first of all stop taking the morphine-like medication, and after that the tablets containing paracetamol (such as Panodil och Alvedon).

Sleep

You might also experience that you're not sleeping as well as before the operation. Many people have difficulty sleeping throughout the night during the first week at home. This is nothing dangerous and you'll soon be sleeping as well as you did previously.

Shower, bath, sauna and sunbathing

A daily shower with liquid soap and water will keep the wound clean and stimulate healing. Due to the risk of infection, you should wait with bathing until the wound is healed – about four weeks.

You can have a sauna after about two months. The surgical wound will be neatest if it's protected from sunlight during the first year or until the scar has faded. Paper tape can be bought at the pharmacy which provides protection and results in a neat surgical wound.

What can I do, and when?

After the operation, increase your activities gradually. Everyone has different conditions for how quickly they can undertake day-to-day activities. The type of surgery and how you felt beforehand play a part. It's important that things should feel right.

The recovery phase takes two months, and sometimes longer. You recover more quickly in your usual home environment.

Condition must be built up gradually. It's important to have realistic expectations and to learn to recognise what you have strength to do, and what you don't. It isn't dangerous to become tired and breathless when doing things.

Physical activity – physical exercise

We recommend that when you come home you get started on day-to-day activities, such as preparing food, light cleaning, making the bed, and buying a few groceries. Household work is good physical activity.

During the initial period after surgery, it's normal to become tired and out of breath also were making a slight effort. Take walks often and enjoy them. During the winter, it's advisable to use shoe grips. Begin with short distances and gradually increase. When you feel stronger, you can begin walking in more hilly areas. In addition to physical activity, regular physical exercise is recommended. Apart from walking, good types of training include: climbing stairs, using an exercise bike and Nordic walking. It's also recommended that you participate in lectures and light exercise arranged by *Hjärtskola* (the Heart School).

As your rehabilitation continues, it's important to increase exercise intensity. Regular exercise can appreciably improve your physical performance capability. There is strong evidence that, with regular physical exercise, you can reduce the risk of recurring cardiovascular disease and have a positive effect on risk factors and enjoy an improved quality of life.

The physiotherapists at your hospital can help you with an exercise programme which is individualised in terms of intensity and amount. You can always find a type of exercise that suits you, whatever your physical exercise level.

The physiotherapists issue referrals to *Hjärtskola* and training at Mölndal, Östra or Sahlgrenska Hospital.

Driving

Since your concentration and reactions might be impaired, you should avoid driving a car for 6 to 8 weeks. When you begin travelling as a passenger, remember that there are no exceptions from the requirement to use a seatbelt. If the belt feels uncomfortable, place a small cushion between the seatbelt and the chest. For the same reason, you should abstain from riding a bicycle in traffic; however, it's positive to use an exercise bike.

Food

High blood fat levels are a risk factor for the occurrence of cardiovascular disease. There are different types of fats:

- **Saturated fat** is found mainly in dairy products such as butter, cheese, milk, cream, hard margarines, meat and processed meats.
- **Polyunsaturated and monounsaturated fats** are found, for example, in vegetable oils such as olive oil and rapeseed oil, and also in liquid margarine and fatty fish.

It's important to reduce the total fat content your food, particularly saturated fat, but not polyunsaturated fat.

Increase your intake of fibre-rich foods such as vegetables and fruit. Preferably choose food which carries the green "keyhole symbol".

If you're uncertain about what you should eat, contact the dietician at your health clinic.

Alcohol in small quantities is not injurious to the heart.

Smoking

Smoking is one of the risk factors for cardiovascular diseases. The negative effects of nicotine are:

- Severe contraction of blood vessels, which leads to increased blood pressure and reduced flow of blood in the coronary circulation.
- The pulse increases, which leads to increased pressure on the heart.
- The oxygen level in the blood diminishes and you become more tired.
- Arteriosclerosis in blood vessels is accelerated.
- The blood's tendency to form clots increases.
- Smoking increases the bad cholesterol.

You alone can take the decision to stop smoking or using moist snuff (snus).

It's always worthwhile to stop smoking, and it's never too late. If you've taken the decision, you've made the best decision of your life, which will improve your health. Sahlgrenska's goal is that you should abstain from smoking for at least eight weeks after your operation, since evidence shows that smoking impedes the healing of the wound and increases the risk of wound infection.

If you want help to stop smoking, speak with the care personnel or contact your health clinic.

The Sahlgrenska University Hospital is a health-promoting hospital with an entirely smoke-free environment.

Pay particular attention to the following!

- ♥ Unexplainable fever lasting more than 2-3 days
- ♥ Unexplainable nausea or vomiting
- ♥ Swelling, pain, redness and/or discharge from the wound
- ♥ Accelerating abnormal weight increase with simultaneous swelling in the legs
- ♥ Breathlessness which does not pass when resting
- ♥ Irregular heartbeat
- ♥ Vascular spasm-like pain

Hospital discharge

You are always welcome to contact us if you have any questions or problems.

Preferably call our patient coordinator on telephone

031-343 98 33.

During evenings, night-time and on weekends/public holidays, you can contact wards 12 or 25 on telephone **031-342 10 12 or 031-342 10 25.**

If problems arise with, e.g. the surgical wound a week after discharge, contact the Vascular-Thoracic Surgery Clinic. Tel: **031-342 94 66.**

Thereafter, you should contact:

- Contact point, Sahlgrenska, tel: 031-342 24 00.
- Contact point, Östra, tel: 031-343 50 00
- Mölndal Hospital, tel: 031-343 17 82 (9.30-11.00)
- Angered Community Hospital, tel: 031-332 69 04
- The GUCH Clinic, tel: 031-343 59 95

Gothenburg area residents will be called to see a nurse after approximately 14 days, with a subsequent return visit to a cardiologist approximately 8 to 10 weeks after surgery.

This will take place either at the heart clinic at Östra, Mölndal, Angered community Hospital or at the Sahlgrenska Vascular-Thoracic Surgery Clinic.