

HOW TO FIND INFORMATION ABOUT YOUR HEART ONLINE

There is a lot of information available online to support people with heart conditions or who are wanting information on preventing them or recognising symptoms.

These are some links to reliable sources that you can access online.

If you require any specific information about your heart condition please speak to an appropriate health professional such as your doctor, cardiologist or cardiac nurse at Healthy Living NT.

<https://www.heartfoundation.org.au/your-heart/heart-conditions/what-is-coronary-heart-disease>

Covers a range of heart conditions, procedures and information for after your heart event.

https://www.heartfoundation.org.au/images/uploads/main/Heart_Attack_Action_Plan.pdf

Important information on how to recognise heart attack symptoms and what to do.

<https://hearthealthaustralia.com.au/cardiac-health-0>

General information about different heart conditions.

<https://www.heartresearch.com.au/heart-hub/>

A good resource that talks about how the heart works, heart disease, risk factors, diet and exercise... good "one stop shop".

<https://www.rhdaustralia.org.au/>

Good resource for people with Rheumatic heart disease and heart valve issues.

<https://www.heartsupport.org.au/heart-support-australia-services>

Support groups and related services for people with heart conditions.

<https://www.svhhearthealth.com.au/rehabilitation/overview-rehabilitation>

Provides an excellent range of resources including short videos that covers healthy eating, medications, quitting smoking and other risk factors. Also talks about exercise and resuming activities after a heart event.

healthylivingNT

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Some helpful phone apps available on AppStore and Google Play



My heart my life (NHFA)



MedicineWise:Manage medicine (NPS)



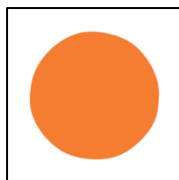
HF Walking (NHFA)



FoodSwitch (The George Ins.)



Smiling Mind



Headspace: Meditation & Sleep (Headspace Inc.)



Angina Management Plan

This information is designed to help you safely and easily manage your angina. Angina is chest pain or tightness that occurs when too little blood and oxygen reaches your heart muscle. You may also experience arm, back and jaw pain, or shortness of breath.

When angina occurs:

- ◆ Stop any physical activity and sit or lie down if possible
- ◆ Have your phone close by & tell someone if possible
- ◆ Follow your angina management plan (guidelines below)

How to use anginine tablets

- ◆ Place ½ to 1 tablet under the tongue and wait 5 minutes. Do not swallow the tablet.
- ◆ If your angina symptoms persist take another tablet.
- ◆ If angina symptoms aren't relieved after taking a maximum of 2 tablets over a total of 10 minutes, **treat it as a heart attack and call an ambulance on 000 so they can provide emergency treatment.**
- ◆ Do not take more than 1 tablet at a time as they can lower blood pressure and may cause dizziness and fainting. Take smaller doses (¼- ½) of anginine tablets if you experience these side effects with a whole tablet.
- ◆ When opening a bottle of anginine write the date on it & discard after 3 months from opening. If the bottle is unopened, discard it according to the expiry on the bottle.
- ◆ Keep the tablets in their original bottle and avoid exposure to light & heat.

How to use your GTN spray

- ◆ Prime the spray bottle is you are using it for the first time, or if it has been longer than 4 months since you last used it (see below)
- ◆ Spray ONE dose under your tongue and wait 5 minutes
- ◆ If your angina symptoms persist spray once more under your tongue
- ◆ **If there is no relief of symptoms after a total of 2 sprays within 10 minutes, treat it as a heart attack & call an ambulance on 000**
- ◆ To prime the bottle, press the nozzle and spray into the air FIVE (5) times until the drug can be seen to spray out.
- ◆ Check the expiry date is current



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Tips for managing your angina

- ◆ Always carry your Anginine/GTN spray with you, never leave it in your car and never let it expire or run out. Keep a spare bottle at home.
- ◆ Angina can also be prevented by using anginine before physical activities when appropriate. Discuss how it can be used with your doctor or cardiac nurse.
- ◆ If your angina episodes occur more often, last longer or don't respond as well as they usually do to the anginine or GTN spray medication, you should discuss this with your Doctor or attend your closest emergency department/clinic.
- ◆ **If at any time your angina is more severe than usual, treat it as a heart attack and call the ambulance on 000.**
- ◆ **Do not drive**
- ◆ **112** is the International standard emergency no. for digital mobile phones, however it will not work where there is no mobile coverage of any network available. **Within Australia 000 is the best option.**
- ◆ If you live in a remote area, know who you are to contact in case of an emergency e.g. clinic out of hours number and keep the numbers with you or near your phone. Also consider alternative safety devices such as Personal Locator Beacons to enable contact with emergency services where mobile coverage is limited or absent.
- ◆ Keep important contact numbers on your phone and/or fridge.

Possible side effects

- ◆ The most common side effects are headache, flushing (redness in the face) and feeling faint or dizzy.
- ◆ You can reduce these side effects by sitting or lying down before using your GTN spray or anginine tablet and rinsing your mouth out with water once your angina pain has gone.

Important Phone Numbers

Ambulance/emergency services: 000

Health direct (Registered nurse): 1800 022 222 (24hr health advice)

GP Name _____ GP Phone _____

Specialist Name _____ Specialist Phone _____

Rural/Remote

Health Care Centre _____

Contact person _____ their phone _____

EXERCISING AT HOME

For People Recovering from a Cardiac Event or Procedure

The benefits of exercise:

Did you know exercise is medicine? Exercise:

- Improves blood pressure, cholesterol and heart health
- Improves blood glucose control
- Helps prevent, fight and aid in the recovery of some cancers
- Reverses the age related decline in muscle mass
- Strengthens bones and slows down osteoporosis
- Protects joints and makes them stronger to cope with arthritis
- Improves fitness, strength, balance, posture and flexibility
- Helps achieve or maintain a healthy weight
- Improves mood and assists with anxiety and depression
- Encourages socialisation

Exercise recommendations:

- ✓ Keep moving during the day, avoid too much sitting down
- ✓ Over time, try to accumulate 150 minutes of planned exercise per week
 - That's about 30 minutes on 5 days of the week
 - Walking, cycling, swimming etc.
 - Moderate intensity
 - Include 2-3 strength exercise sessions per week plus stretching

Safety:

- Always perform a warm up and cool down
- Practice good exercise technique and avoid breath holding
- Listen to your body, stop or don't start if you don't feel right
- Have medications such as puffers or chest pain spray/ tablets on hand
- Start with what ever you can manage and gradually build up over time
- Drink plenty of water, or abide by fluid restrictions if applicable
- Avoid exercising in the heat of the day



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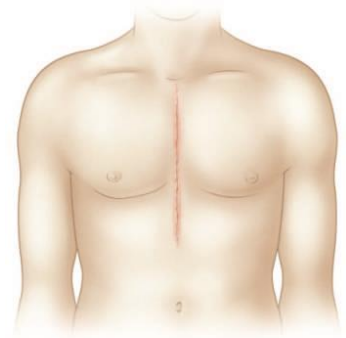
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Specific Considerations

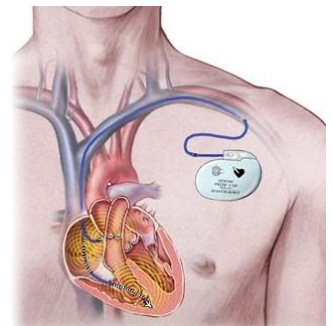
If you have had a sternotomy (bypass, valve repair or replacement):

- Report to your GP and seek individual guidance if you feel sternal instability
- Take extra precautions in the first 6 weeks:
 - Follow movement guidelines given in hospital
 - Move both arms together, rather than one at a time
 - If lifting an object make sure it is light, lifted with both hands and kept close to the body
 - Try to use the legs to stand from a seated position without pushing off with the arms, or apply equal pressure through the arms if needed
 - Cover your chest with a pillow and hug it when you cough
 - Avoid excessively stretching arms behind the body
 - Avoid not moving all together
 - Use the modified home exercise program for before 6 weeks
 - Generally after 6 weeks movement and lifting restrictions aren't as strict but everyone is different. Listen to your body. It takes 3 months for your sternum to fully heal.



If you have had a device implanted (pacemaker, cardiac resynchronisation therapy, implantable cardioverter defibrillator):

- Limit upper limb movement on the same side as the device to a smaller range for 4-6 weeks after implantation to let the wires imbed
- Avoid resistance training of the upper limb on the same side as the device for 6 weeks
- Avoid direct contact at the device implantation site
- Avoid contact sports where a collision may occur
- Avoid very high intensity exercise if you have an implantable cardioverter defibrillator or stick to an intensity where the heart rate is at least 10-15 beats below the threshold for the delivery of a shock



When to not exercise:

- If you are experiencing any symptoms such as chest pain, shortness of breath, dizziness, racing heart etc. Seek medical assistance.
- Uncontrolled conditions such as diabetes or high blood pressure
- If any new cardiac events, conditions or injuries occur. Consult GP for clearance to exercise



The following home exercise program is general and may not be suitable for everyone. Please seek professional, individualised guidance if you have specific injuries or conditions.

Getting Back to Walking After Cardiac Surgery

Below is a **general guide** for getting back to walking after cardiac surgery. Everyone is different so it is best to listen to your body. Start with, and progress with what ever **you** can manage. If you were not walking or physically active before your heart event/ procedure it is best to start with less and progress slower than the guide below. **Remember, listen to your body.**

Safety

- If you have a spray or tablet for chest pain take it with you on your walk and use if necessary as advised by your doctor. Do not continue your walk if you take any as you may experience dizziness
- If you experience any chest discomfort, dizziness, irregular heart beats or excessive shortness of breath slow down and rest or stop and call for help if symptoms continue
- It is a great idea to walk with a friend or family member, or carry a mobile phone
- During the wet season avoid walking outside during the heat of the day when you are likely to sweat more, as it could delay the healing of your wounds if you have any. You could walk around an air-conditioned shopping complex or on a treadmill inside if you have access to one

WEEK 1

- Walk at a **gentle pace** on **flat ground**
- Build up to around 20 minutes per day by the end of the week (**4 x 5 min walks**)

WEEK 2

- Walk at a **comfortable pace** on **flat ground**
- Build up to around 20-30 minutes per day by the end of the week (**4-6 x 5 min or 3 x 10 min walks**)

WEEK 3

- Walk at a **slightly increased pace** (can easily talk) on **flat ground**
- Build up to around 30 minutes per day by the end of the week (**3 x 10 min or 2 x 15 min walks**)

WEEK 4

- Walk at a **moderate pace** (increased breath rate but can still talk)
- **Mostly flat ground** but you could **try some small inclines**
- Aim to build up to 30 minutes per day (**3 x 10 min or 2 x 15 min or 1 x 30 min walks**)

WEEK 5

- As above, progressing as able

WEEK 6 +

- As above



Getting Back to Walking Diary

Below is a **general guide** for getting back to walking after cardiac surgery. Everyone is different so it is best to listen to your body. Start with, and progress with what ever **you** can manage. If you were not walking or physically active before your heart event/ procedure it is best to start with less and progress slower than the guide below. **Remember, listen to your body.**

	Week 1 <ul style="list-style-type: none">Gentle paceFlat groundBuild up to 4 x 5 min walks by the end of the week						Week 2 <ul style="list-style-type: none">Comfortable paceFlat groundBuild up to 4-6 x 5 min or 3 x 10 min walks by the end of the week						Week 3 <ul style="list-style-type: none">Slight increase paceFlat groundBuild up to 3 x 10 min or 2 x 15 min walks by the end of the week						Week 4 <ul style="list-style-type: none">Moderate paceMost flat ground, some small inclinesBuild up to 3 x 10 min or 2 x 15 min or 1 x 30 min walks by the end of the week						Week 5 <ul style="list-style-type: none">Moderate paceFlat ground and small inclines as tolerated2 x 15 min or 1 x 30 min walks						Week 6+ <ul style="list-style-type: none">Moderate paceFlat ground and inclines as tolerated2 x 15 min or 1 x 30 min walks								
e.g.	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	
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1 block = 5 minutes. Every time you walk for 5 minutes fill in or tick off a block

WARM UP

Duration: 5 MINS | Intensity: GRADUALLY BUILD TO BRISK WALK



SIT TO STAND

Sets: 2-3 | Reps: 10-12 | Frequency: 2-3 X PER WEEK



Sit towards the front of the chair, feet and knees hip width apart, arms crossed over chest.



Lean forward and drive up through the heels to stand tall.



From standing, return to sitting. Avoid letting knees drop together.

WALL PUSH UP

Sets: 2-3 | Reps: 10-12 | Frequency: 2-3 X PER WEEK



Position hands on the wall at chest height & slightly wider than shoulder width. Fingers point up.



Bend elbows outwards as you lower your body towards the wall. Press back. Keep torso straight.

HEEL RAISE TOE RAISE

Sets: 2-3 | Reps: 10-12 | Frequency: 2-3 X PER WEEK



Feet hip width apart, stand tall



Rise as high as you can on to your tip toes then lower



Rock back onto your heels and raise the balls of your feet off the ground

1 ARM ROW

Sets: 2-3 | Reps: 10-12 PER SIDE | Frequency: 2-3 X PER WEEK



Split stance. Bend forward from the hips with a straight back. Working arm hangs straight down.



Keeping the body still, draw the elbow up to the sky then back down as if starting a lawn mower.

SIDE LEG RAISE

Sets: 2-3 | Reps: 10-12 PER SIDE | Frequency: 2-3 X PER WEEK



Stand tall, hold onto support.



Raise leg out to the side while keeping the toes, knees and hips facing forward. Keep body upright.

BICEP CURL

Sets: 2-3 | Reps: 10-12 | Frequency: 2-3 X PER WEEK



Stand tall, lock elbows into sides



Curl dumbbells to shoulders and back down to straight arms. Avoid rocking forward or backward.

HAMSTRING CURL

Sets: 2-3 | Reps: 10-12 PER SIDE | Frequency: 2-3 X PER WEEK



Stand tall. Use a chair for support.



Bend knee to lift heel towards bottom then lower. Keep both knees even throughout.

TRICEP KICKBACK

Sets: 2-3 | Reps: 10-12 | Frequency: 2-3 X PER WEEK



Split stance. Bend forward from the hips with a straight back. Working arm makes a 90 degree angle.



Straighten arm to the back of the room then return to 90 deg angle. Upper arm remains still.

COOL DOWN

Duration: 5 MINS | Intensity: SLOW



HAMSTRING STRETCH



Hold: **20-30 SECS**
Duration: **DAILY**

CHEST STRETCH



Hold: **20-30 SECS**
Frequency: **DAILY**

UPPER BACK STRETCH



Hold: **20-30 SECS**
Frequency: **DAILY**

TRUNK STRETCH



Hold: **20-30 SECS**
Frequency: **DAILY**

QUADRICEP STRETCH



Hold: **20-30 SECS**
Frequency: **DAILY**

CALF STRETCH



Hold: **20-30 SECS**
Frequency: **DAILY**

SHOULDER STRETCH



Hold: **20-30 SECS**
Frequency: **DAILY**

TRICEP STRETCH



Hold: **20-30 SECS**
Frequency: **DAILY**

How to Progress Resistance Exercises

GOAL= Complete your resistance (strength) home exercise program x 2-3 non-consecutive days per week

Repetition= the movement completed once e.g. 1 bicep curl

Set= a number of movements completed before a rest e.g. 10 bicep curls

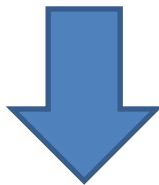
1. Start: 10 repetitions x 2 sets at a weight that makes you need a rest after each set (if you can keep going well beyond it is too light)



2. When it gets too easy increase repetitions first
 - 12 x 2 @ starting weight (24 in total)
 - 15 x 2 @ starting weight (30 in total)



3. When it gets too easy increase the number of sets next
 - 12 x 3 @ starting weight (36 in total)
 - 15 x 3 @ starting weight (45 in total)



4. When it gets too easy increase the weight last
 - 10 x 3 @ a heavier weight
 - 12 x 3 @ a heavier weight
 - 15 x 3 @ a heavier weight



Sit less, move more



The average adult spends **more than half** of their day sitting. Here's how the time can add up:



Adults who sit less throughout the day have a lower risk of early death, particularly from cardiovascular disease. In addition to 30 minutes of physical activity per day, try to limit your sitting time and interrupt prolonged sitting as often as you can.

DON'T GET THE SITS



**DON'T
GET THE
SITS**

REGULAR PHYSICAL ACTIVITY KEEPS YOUR HEART HEALTHY.

HEART WEEK 2018 APRIL 29 - MAY 6



getting back on track after heart attack or surgery

**the ups and downs
of emotional recovery**



cardiacblues



'A heart event is an emotional experience, not just a physical one.'

Having a heart attack or heart surgery can come as a huge shock and can make you realise you're not immortal.



Many people experience changes in mood and emotions after a cardiac event. Some people feel angry and irritable. Some feel sad and tearful. Some feel moody and 'up and down'.

Some people worry about whether they will ever get 'back to normal'.

When you leave hospital you may find yourself on an emotional rollercoaster.

These feelings are all common and normal, especially in the first few weeks or months.



normal emotional reactions to a heart event



SHOCK

You may find it hard to believe that you have a heart problem.



DENIAL

You might find it hard to accept that this has happened to you.



WORRY

You may worry that you will never get back to your old self. You might be fearful about dying.



GUILT

You may feel guilty about being dependent or blame yourself for what has happened.



ANGER

You may become frustrated and irritated about the changes in your life.



SADNESS

You may feel low and miserable, or your mood might be up and down.



RELIEF

You may feel relieved or thankful that your heart disease has been diagnosed and treated.

Common symptoms that accompany these emotions include:

- ◆ Loss of interest in usual activities
- ◆ Withdrawal from others
- ◆ Getting tearful and crying easily
- ◆ Being 'short tempered'
- ◆ Sleep problems
- ◆ Change in appetite
- ◆ Change in sex drive
- ◆ Confusion and forgetfulness
- ◆ Inability to concentrate
- ◆ Bad dreams and nightmares
- ◆ Worry about another heart event
- ◆ Thoughts about death

*A heart event can
bring unwelcome
changes.*



*the good
news is...*

*For most people these worries and problems
go away in the first few months after the
cardiac event.*

*Usually within the first few months after
a heart event you will start to get back to
your usual self and things will begin to
get back to normal.*

When do these feelings and symptoms become a problem?

These common emotional reactions can become a problem for some people. If you find that your mood is not getting better over time, you might be experiencing depression.

Ongoing low mood means that you may be depressed.

**If you get 'stuck' in these feelings or
worries it is important to get help.**

**If you don't get help, these
feelings can last for a long time.**



Features of depression

Depression is different from the normal emotions that most people experience after a cardiac event.

Depression includes:

- **Profound feeling of sadness most of the time.**
- **Lack of interest or enjoyment in most activities, including activities you have previously enjoyed.**

These symptoms are profound and do not pass quickly. Some people may have thoughts of suicide or self harm. If you are depressed, you need to talk to your doctor about getting help.

BASIC FACTS ABOUT DEPRESSION

Depression in the general community:

- Depression affects one in twenty people at any one time
- One in five people will experience depression at some time over their lifetime

Depression amongst people who have had a heart event:

- About one in five people go on to develop depression after a cardiac event



Am I at risk of developing depression?

One in five people go on to develop depression after a heart event.

You are at increased risk of depression if:

- ☐ you have had anxiety or depression in the past
- ☐ you have no-one to talk to
- ☐ you have been stressed at work or home
- ☐ you have lost your job
- ☐ you have financial worries
- ☐ a loved one has died recently
- ☐ you have recently divorced or separated
- ☐ you regularly use cigarettes, drugs or alcohol
- ☐ you have diabetes
- ☐ you have other health problems
- ☐ your mood is not getting better

If you think you are at risk, make an appointment to talk with your doctor about depression.





What can I do to prevent and reduce depression?

- Be physically active even if you don't feel like it
- Spend time with people you like
- Attend a cardiac rehabilitation program
- Do things that you enjoy
- Do things that you are good at
- Make time for relaxation
- Talk with your doctor about how you feel
- Ask for a referral to a psychologist if needed



Where can I get help?

Lifeline is a 24-hour confidential crisis support service **TEL: 13 11 14** www.lifeline.org.au

beyondblue is the national depression initiative. www.beyondblue.org.au

HEARTLINE is the Heart Foundation's information service. **TEL: 1300 36 27 87** www.heartfoundation.org.au

Your local doctor can provide help and support.

Your local Community Health Centre has a range of services and programs that can help.

To find out more go to:

www.heartresearchcentre.org





Smoking



The facts!

Smoking is one of the biggest killers of Aboriginal and Torres Strait Islander peoples. It is the single most important risk factor for heart disease.

Smoking affects the arteries that supply blood to the heart, which can lead to heart disease, a heart attack or stroke.

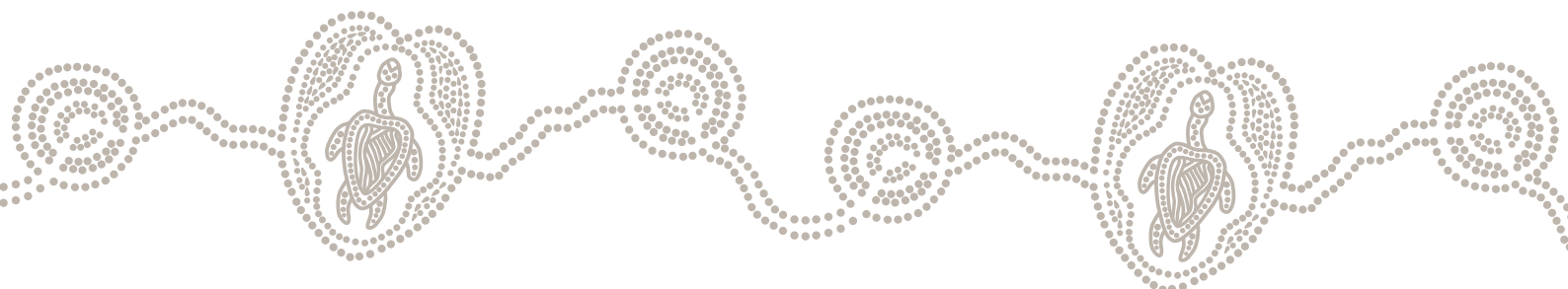
Quitting smoking can be hard at first, but you can do it with planning, practice and help.

Smoking damages your health

Smoking can cause the following:

- heart disease
- stroke
- high blood pressure
- cancer (especially of the lungs, throat, bladder and lips)
- chest infections
- makes you breathless and unfit
- makes your teeth and fingers yellow
- can make mothers have small babies
- difficulty in having an erection.

Smoking can also affect the health of your family. If you are pregnant and smoke, your baby smokes too. Your kids may develop asthma or ear infections if they live in a house with smokers.





What about second-hand smoke?

Breathing other people's smoke (second-hand smoke or passive smoking) is harmful to both smokers and non-smokers. Exposure to second-hand smoke increases the risk of heart disease by about 30%.

Benefits of quitting smoking

Stopping smoking has both major and immediate health benefits for men and women of all ages. You will:

- have better health
- have more energy
- save money
- live longer
- have an improved sense of taste and smell
- create a better environment for your kids.

Tips to stop smoking

- Pick a date to stop
- Don't try to give up before stressful events
- Get your family to support you
- Plan for upcoming events like a party – others may be smoking and it will be hard not to smoke
- Have someone to talk to when you feel like giving up (e.g. Aboriginal Health Worker, nurse, doctor)
- Use nicotine replacement patches, gum or lozenges, or join a group for help
- Call the Quitline on 13 78 48 (cost of a local call)

It is never too late to quit!

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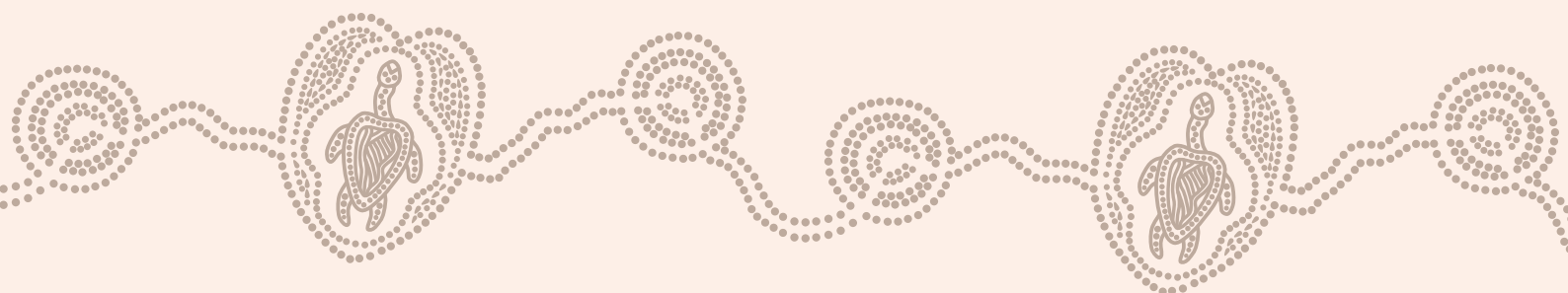
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High blood pressure and salt

If you have high blood pressure, lowering your salt intake may reduce your blood pressure. Reducing high blood pressure is important to reduce your risk of stroke, heart disease and kidney disease.

The salt in your diet does not just come from salt shaker. 80% of the salt in our diets comes from packaged foods. Salt is listed on food labels as sodium.

Tips to reduce your salt intake

Eat mostly fresh foods, especially vegetables

- If you need to add more flavour, use fresh or dried herbs, spices, pepper, garlic, ginger, lemon juice or vinegar rather than salt



Read Nutrition Information Panels

- Check the Nutrition Information Panel for sodium on packaged foods
- Choose foods that are **low salt** or **reduced salt**

Low salt:	120mg/100g or less
Reduced salt:	400mg/100g or less

Nutrition information		
Serving size per package: 9		
Serving size: 83.5g (2 slices)		
	Quantity per serve	Quantity per 100g
Energy	91.8 kJ	1100 kJ
Protein	6.1 g	7.3 g
Fat	2.8 g	3.3 g
Carbohydrate	39.8 g	47.7 g
Dietary fibre	6.6 g	7.9 g
Sodium	230 mg	275 mg

Put the salt shaker away

- Avoid using salt in cooking and at the table. This includes all forms of salt (e.g. salt flakes, rock salt, sea salt, pink salt, garlic and onion salt etc.)

Note: Salt substitutes such as lite salt **are not** recommended as these still contain higher than recommended sodium.

Allow Your tastebuds time to adapt

- It may take up to 4–6 weeks to adapt to a lower sodium intake and appreciate the natural flavours of food

Limit processed foods including













- ✗ Preserved or cured foods (e.g. salami and sausages)
- ✗ Smoked products (e.g. smoked salmon, ham)
- ✗ Salted foods (e.g. olives, cheese)
- ✗ Fast foods (e.g. pizza, hamburgers, pies)
- ✗ Sauce and stocks (e.g. tomato sauce, soy sauce)
- ✗ Savoury breads, rolls, crackers and crisps



Choose no added salt or salt reduced products

e.g. reduced salt baked beans, stock and tomato sauce.

Choices to reduce your sodium

Meals	Higher sodium choice	SWAP	Lower sodium choice	Sodium reduced by:
Breakfast		➡		210mg
Snack		➡		710mg
Lunch		➡		620mg
Snack		➡		64mg
Dinner		➡		810mg
Supper		➡		234mg

Note: Recommended Sodium intake for Australian adults is 2000mg/day.

Additional information for managing high blood pressure

You can also help reduce your blood pressure by adopting a healthy lifestyle. Aim to:

- ✓ Achieve and maintain a healthy body weight and waist circumference
- ✓ Participate in daily physical activity and reduce sitting time
- ✓ Limit alcohol intake to no more than 2 standard drinks per day
- ✓ Take medications as prescribed by your doctor
- ✓ Be a non-smoker
- ✓ Include adequate potassium in your diet by eating:
 - 2 serves of fruit per day
 - 5+ serves of vegetables each day, especially leafy green and coloured varieties





Note: If you have renal (kidney) disease discuss any increase of potassium rich foods in your diet with your doctor and dietitian.

Dietary fats

Healthy 'unsaturated' fats should be included in your diet everyday. This may help improve your overall heart health. Unhealthy 'saturated and trans' fats should be limited.

Choosing healthy fats in the diet

Type of fat	Common foods	Suggested intake
Poly-unsaturated fats (PUFA) May assist in reducing LDL 'Bad' Cholesterol and increasing HDL 'Good' cholesterol.	<ul style="list-style-type: none"> ✓ Oily fish and seafood (e.g. salmon, sardines, tuna, mussels) ✓ Sunflower, canola, soybean and grapeseed oil ✓ Walnut, hazelnut, brazil nut ✓ Soybeans, soymilk ✓ Omega 3 enriched eggs ✓ Chia, flaxseed, sunflower seeds ✓ Tahini (ground sesame seeds) ✓ Oil spreads (e.g Canola, Sunflower) 	<ul style="list-style-type: none"> ▪ 2–3 servings of fish per week, including oily fish (1 serving = 150–200g) In addition, choose at least one per day of the following: <ul style="list-style-type: none"> ▪ 30g walnuts as snack ▪ 2 teaspoons of seeds added to a smoothie or cereal ▪ 1 tablespoon of tahini as a spread or in a dressing ▪ 2 teaspoons of canola spread on wholegrain bread or crackers
Mono-unsaturated fats (MUFA) May assist in reducing LDL 'Bad' cholesterol.	<ul style="list-style-type: none"> ✓ Extra virgin olive oil, peanut oil ✓ Avocado ✓ Almond, peanut and cashew nuts ✓ Oil spreads (e.g. Olive Grove) 	Choose at least one per day of the following: <ul style="list-style-type: none"> ▪ 3 tablespoons (60mls) per day of extra virgin olive oil in cooking or as a dressing ▪ 30g almonds as a snack ▪ Use an olive oil spread or ¼ avocado on wholegrain bread or crackers ▪ 1 tablespoon of 100% natural nut spread on wholegrain bread or crackers (e.g. Peanut Butter)

Meal planning with healthy fats



Breakfast

Rolled oats, chia seeds, almonds, reduced fat yoghurt and fresh fruit.



Lunch

Poached eggs (omega 3 enriched) with avocado on soy and linseed bread.



Dinner

Grilled salmon with vegetables, wild rice and an olive oil, tahini dressing.



Snack









Nut and seed mix.

Reducing unhealthy fats in the diet

Type of fat	Common foods	Suggested intake and substitutes
Saturated fats and trans fats Will increase LDL 'Bad' cholesterol.	<ul style="list-style-type: none"> ✗ Animal fat: butter, ghee, lard, dripping, copha ✗ Fat on meat, skin on poultry ✗ Discretionary foods: deep fried foods, pastry (e.g. pie, quiche, croissant, doughnut, cake, muffin, biscuits, chocolate, crisps, ice cream) ✗ Coconut oil, cream, milk ✗ Palm oil (common in processed foods) ✗ Full fat dairy: cheese, yoghurt, milk (if eaten in larger amounts) ✗ Sour cream and cream 	<ul style="list-style-type: none"> ▪ Not to be consumed daily ▪ Use extra virgin olive oil instead of butter or coconut oil ▪ Use reduced fat yoghurt instead of cream or sour cream ▪ Choose reduced fat milk, yoghurt and cheese (if consumed in large amounts)

Choose lean cuts of meat and skinless poultry

Choose cuts of meat with the least visible fat and remove fat or skin before cooking.

Limit...		Swap for...	
✗ Wings and drumsticks (e.g. chicken, turkey, duck)		✓ Skinless turkey or chicken breast, thigh or tenderloins	
✗ Skin on chicken, turkey or duck		✓ Trimmed meats (e.g. porterhouse, round steak, trimmed rump)	
✗ Untrimmed meats		✓ Trimmed bone meats (e.g. lamb cutlets, French shank)	
✗ Ribs (e.g. pork or lamb)		✓ Deli meats (e.g. lean ham, roast beef, chicken or turkey)	
✗ Highly marbled meat (e.g. scotch fillet)		✓ Fresh or canned fish	
✗ Deli meats: kabana, mortadella, salami, sausage, chicken loaf		✓ Eggs	

Label reading for fats

NUTRITION INFORMATION			
Servings per package - 10 Serving size - 50g (1/2 cup)			
	Avg. Qty. Per 50g Serve	Per Serve with 1/2 cup (125mL) skim milk	Avg. Qty. Per 100g
Energy	710kJ	934kJ	1421kJ
	170Cal	223Cal	340Cal
Protein	6.8g	12.1g	13.6g
Fat, total	4.2g	4.4g	8.5g
- saturated	0.9g	1.0g	1.9g
Carbohydrate	24.9g	22.6g	40.9g

- Look at the per 100g column of a "Nutrition Information Panel"
 - Find "Saturated fat"
 - Aim for less than or equal to 2g per 100g
- Note:** Exception for whole nuts, seeds, recommended oils and oil spreads.

Alcohol recommendations

To reduce the risk of alcohol-related disease, injury or death, the National Guidelines for Alcohol Consumption recommend:

- No more than 2 standard drinks per day for healthy men and women.
- No more than 4 standard drinks on a single occasion.
- Avoiding alcohol when pregnant or breastfeeding.





A standard drink contains 10g of alcohol and is approximately equal to:




- 100ml wine OR 285ml full strength beer OR 30ml spirits.

In Australia, the number of standard drinks in a can, stubbie or bottle is indicated on the label.







How many standard drinks are in a typical serve?

Beer			Cider
			
1.1	1.6	1.4	1.3
285ml (Pot)	425ml (Schooner)	375ml	330ml
Full Strength	Full Strength	Full Strength	Full Strength
4.8% Alc. Vol	4.8% Alc. Vol	4.8% Alc. Vol	5% Alc. Vol

Wine		
		
1.4	1.6	7
150ml*	150ml*	750ml
Sparkling Wine	Red Wine	Average bottle
12% Alc. Vol	13.5% Alc. Vol	12% Alc. Vol

*Average restaurant serve

Spirits			
			
1.2	1.5	1	2-4
330ml	375ml	30ml	60-120ml
Full Strength Ready-to-drink	Full strength Pre-mix spirits	High Strength Spirit Nip	High Strength Spirit Nip
5% Alc. Vol	5% Alc. Vol	40% Alc. Vol	40% Alc. Vol

Know the risks

Too much alcohol can increase the risk of:

- accidents and injury
- high triglyceride levels
- liver and pancreas damage
- dementia and brain damage
- high blood pressure and heart disease
- some cancers.

Alcohol can also:

- Affect concentration, mood and sleep.
- Interact with a range of medications.
- Contribute to weight gain, due to the high energy (kJ) value of all alcoholic drinks.

Depending on your individual health and medication, less than 2 standard drinks per day may be recommended. Discuss this with your health professional.

**REDUCE
YOUR
RISK**



NEW NATIONAL
GUIDELINES FOR
ALCOHOL CONSUMPTION

Tips to help reduce alcohol

- Quench your thirst with chilled water or a diet soft drink instead of alcohol.
- Sip alcohol slowly with a meal or wait until after a meal to consume alcohol.
- Alternate alcoholic beverages with non-alcoholic beverages.
- Choose 'Light' or 'Low-alcohol' beer instead of regular strength beer.
- Be aware that 'low-carb' drinks often have the same alcohol content as regular varieties.
- Choose a pot (285mls) of beer or cider rather than a schooner (425mls) or stein (570mls).
- Order wine by the glass instead of ordering a bottle.
- Be cautious of the volume of larger wine glasses.
- Finish one drink before ordering another and avoid 'topping up' your glass while drinking.
- Choose a wine spritz (wine diluted with soda water).
- Set a limit on the number of drinks you plan to have before you start drinking.
- Offer to be a designated driver.
- Participate in FebFast, Dry July or October campaigns (fast from alcohol and raise money for a charity)



Tomato juice



Wine spritz



Soda water



Diet soft drink



How can alcohol affect diabetes?

Hypoglycaemia (blood glucose level less than 4.0mmol/L)

If you are managing diabetes with insulin or tablets that may cause hypoglycaemia, your risk of hypoglycaemia may be further increased with alcohol.

Hyperglycaemia (blood glucose level above 8.0mmol/L)

Alcoholic drinks that are higher in carbohydrate (e.g. dessert style sweet wines, beer, cider and spirits mixed with regular soft drink or fruit juice) may cause higher blood glucose levels.

Tips for safer alcohol consumption when managing diabetes

These tips are most relevant to people managing diabetes with insulin or tablets that may cause hypoglycaemia.

- Ensure you consume alcohol with a meal or snack containing carbohydrate, not on an empty stomach. Discuss carbohydrate choices with your Dietitian.
- Always carry hypoglycaemia treatment with you (e.g. jelly beans) in case you need to treat low blood glucose levels.
- Wear or carry identification that states you have diabetes. Make sure someone you are with knows that you have diabetes, including how to identify and treat hypoglycaemia.
- Physical activity such as dancing or drinking alcohol after playing sport may further increase your risk of having a hypo. If you are planning on being physically active you may need to consume additional carbohydrate or reduce your insulin dose. Discuss this with your diabetes specialist or diabetes educator.
- Test your blood glucose levels before going to bed.
 - ✓ If your blood glucose level is below 7.0mmol/L, include a lower glycaemic index (GI) carbohydrate snack before bed to help prevent hypoglycaemia occurring overnight (e.g. a slice of grain toast or a piece of fruit or a muesli bar).
 - ✓ If you are on insulin and your blood glucose level is low, consider adjusting long acting insulin. Discuss this with your diabetes specialist or diabetes educator.
 - ✓ If you are on insulin and your blood glucose level is high, consider taking extra insulin. Discuss this with your diabetes specialist or diabetes educator.



More information

www.alcohol.gov.au

www.drinkwise.org.au

Support

If you have difficulty controlling your alcohol intake, speak to your treating health professional. A variety of support services are available across Australia.



Making the Most of Your GP

- It is important to see a GP that you trust and feel comfortable talking to.
- Try to see the same GP if possible, the more people involved in your care, the more confusing
- Between visits, make a note of any problems that occur or anything you may want to ask at your next appointment, as you may forget during the appointment
- Just before your visit, go through the list and decide exactly what you will ask, or want to know about
- Make a list of any medication or over the counter vitamins or supplements that you use. The list should include: medication name, brand name, what dose you take, how often and what it is for. Try to keep this with you always; it will be very useful in an emergency
- Keep your medication sheet up to date, if a medication is stopped, write next to it when and why, so in the future if you do see another doctor they will know
- If you think your appointment will take a while, tell the secretary when making the appointment, so you are not rushed
- It is also beneficial to keep a list of your diagnoses especially if you see different doctors or are travelling.
- Try to remember to turn up to every appointment made as a review, as here they will assess your progress
- Answering questions honestly is important as it helps the GP assess the effect of your medication and your progress
- If you don't understand or are unhappy about something don't be afraid to say so
- If a treatment plan is organised which you know you cannot do, tell the doctor so a more practical plan can be made
- Take notes at the appointment so you can remember all the important issues discussed, or take a friend or family member with you
- Remember you and your GP are an important team in your health care, so open honest communication is essential

Darwin

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Healthy Living NT
is the trading name of the
Diabetes Association
of the Northern Territory
Incorporated.

Your Privacy and Healthy Living NT

Healthy Living NT Privacy Statement

Healthy Living NT is the trading name for the Diabetes Association of the NT Inc., a charitable, member based organisation established in 1980 to provide support to people with diabetes and other chronic health conditions. We are governed by the Privacy Act 1988 (the Privacy Act) in our responsible handling of your personal information.

What do we do

Healthy Living NT provides a number of services and programs, some of which are under a contracted arrangement with Commonwealth or NT funders:

- Diabetes education services to clients in urban, rural and remote areas.
- Cardiac rehabilitation services to clients in urban, rural and remote areas.
- Nutrition education services to clients in urban, rural and remote areas.
- Diabetes, cardiac and nutrition information, advice, training and support for health professionals, carers and community members
- Membership information and support
- National Diabetes Services Scheme (NDSS) Healthy Living NT is the NT Agent for the NDSS, an initiative of the Australian Government administered by Diabetes Australia. The NDSS delivers diabetes-related products at subsidised prices and provides information and education support services to people with diabetes and their carers. Healthy Living NT is bound by the NDSS Privacy Policy which can be found at <http://www.ndss.com.au/>
- Product supply and support in the use of products
- Advocacy support and advice

What is personal information?

Personal information is any information that identifies or could identify a person, whether it is true or not. It includes your name, age, gender and contact details. Personal information can also include sensitive information, which is information about your health and health service provided to you.

Why and how do we collect your personal information?

We collect your information so that we can provide you with access to our products and services. Healthy Living NT normally collects your personal and sensitive information only if you have consented to the information being collected. We will only seek to collect the information that is reasonably necessary for one or more of our services or activities. We may also receive information about you such as diagnosis, referrals and health information sent from your doctor or health care professional necessary in order to provide you with a health service.

We collect your information in a few different ways, including forms, correspondence, through consultations with our health professionals, from information received from your doctor, through our website and visits to NDSS Access Points.



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Healthy Living NT
is the registered NT
licence holder for
Life. Be in it.



What happens if you don't give us your personal information?

It is your choice whether to provide us with your information. However if you don't provide us with the information we require, we may not be able to provide you with some or all of the products or services available.

We will only seek to collect the information that is reasonably necessary for one or more of our services or activities.

How do we manage the security of your personal information?

We respect and protect your privacy. We will take reasonable steps to protect the information that we hold from misuse, interference, unauthorised access or disclosure. Our employees and contracted third parties are subject to a confidentiality agreement that requires them to comply with our Privacy Policy.

How do we use and disclose your personal information?

We use and disclose your information for the purposes for which we collected it and for related purposes where you would reasonably expect us to use or disclose your personal information. For example:

- we may send people who register with the NDSS information about the use of products and the effective self-management of diabetes,
- we may advise diabetes, cardiac or nutrition education clients about upcoming education services or scheduled review appointments, and communicate with your doctor or health care professional regarding management of your health condition.
- we will send regular information to members including magazines, newsletters, correspondence and electronic communications.

We will not disclose your information to any unauthorised third party without your consent or we are required to do so by law. No identifiable personal or health information is included in our statistics which are used for the purpose of reporting to funders.

How can you access and correct your personal information?

You can request to access your personal information at any time. You may also ask us to correct your personal information if it is incorrect, incomplete or misleading. We take reasonable steps to make sure that the personal information that we hold is accurate, complete and up to date.

How we handle complaints

If you have any concerns or complaints about the manner in which your personal information has been collected or handled by us, please contact our Privacy Officer.

Further information

More information about the Privacy Act and what it means for you can be found at www.privacy.gov.au

Our current Privacy Policy is available on our website www.healthylivingnt.org.au or by contacting one of our staff members or our Privacy Officer as follows:

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