



New Survey Suggests Confusion, Lack of Awareness about Heart Failure Could Be Preventing Critical Early Detection and Treatment

-- New Patient Educational Program Urges Americans to “Fight Against Heart FailureSM”--

New York, NY, Feb. 12 — Many U.S. adults are confused about what heart failure is, cannot recognize common heart failure symptoms, and do not understand that heart failure is a manageable condition, according to a new survey conducted by Harris Interactive® on behalf of the American Association of Heart Failure Nurses (AAHFN), the Preventive Cardiovascular Nurses Association (PCNA) and the Society of Chest Pain Centers (SCPC). This lack of awareness may be a primary reason why heart failure often goes unnoticed—and untreated—for so long that patients find themselves gasping for breath in the emergency room before they are diagnosed.

To combat the significant lack of knowledge about heart failure, AAHFN, PCNA and SCPC are launching *Fight Against Heart FailureSM*, an educational program that promotes awareness of the symptoms and risk factors of heart failure in an effort to drive early detection and treatment of the pervasive condition, and to advance disease prevention. *Fight Against Heart FailureSM* is sponsored by Scios Inc., which has provided educational grants to AAHFN, PCNA and SCPC to conduct this program.

According to the survey:

- Less than half of U.S. adults (47 percent) can identify the correct definition of heart failure, and one in three (32 percent) U.S. adults mistake heart failure for a heart attack.
- A majority of adults (74 percent) erroneously believe that chest pain or discomfort is a common symptom of heart failure.
- Only a small percentage of adults recognize that unexplained weight gain/loss (8 percent), and coughing and wheezing (17 percent) are common heart failure symptoms.
- When asked what they would do if they experienced common heart failure symptoms, including swollen ankles, fatigue performing everyday tasks such as climbing stairs or carrying groceries, and/or rapid weight gain/loss, one in four adults (25 percent) would wait to see if the symptoms passed.
 - Very few – 2 percent – would seek immediate medical attention (by calling 9-1-1 or going to the emergency room).

“While heart failure certainly is serious, it often can be managed. The key is being able to recognize the symptoms and to seek treatment immediately. According to these survey results, many Americans may be missing these critical steps,” said Robin Trupp, PhD(c), APRN, President of AAHFN. “We hope to increase Americans’ knowledge about basic heart failure information and to help heart failure patients learn how they can play a role in managing their symptoms and preventing their heart failure from getting worse.”

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*Fight Against Heart Failure*SM also provides information and tools to help heart failure patients learn how to better manage their condition to stay healthy and out of the hospital. The program offers free resources, including a handbook with easy-to-read information about heart failure and daily journal pages to track symptoms, sodium intake and weight, as well as a brochure on managing heart failure. At www.fightheartfailure.com, there is a wealth of information on heart failure, including symptoms, risk factors, and management tips. The handbook and brochure can be ordered through the web site or toll free at 1-866-626-6636.

Heart failure affects over 5 million Americans¹ and causes or contributes to more than 300,000 deaths per year². Heart failure is a chronic, progressive condition in which a weakened or damaged heart cannot pump enough blood to meet the body's needs. Left untreated, heart failure can get worse, even to the point where a visit to the hospital is necessary. Symptoms of heart failure include coughing or wheezing; fatigue from everyday activities, such as climbing stairs or carrying groceries; shortness of breath from everyday activities; swelling of the arms, ankles, feet, abdomen or lower back; and unexplained weight gain or weight loss.

High Prevalence of Risk Factors Warrant Vigilance

Certain risk factors and combinations of risk factors are known to place people in greater danger for developing heart failure. According to this recent survey, eighty-eight percent of U.S. adults have at least one risk factor for developing heart failure. These include lifestyle habits (72 percent), such as being overweight (44 percent), lack of regular exercise (36 percent), eating a diet high in fat and cholesterol (39 percent), and smoking (17 percent); personal medical conditions (51 percent), such as high blood pressure (28 percent), diabetes (9 percent), or high cholesterol (28 percent); and a family history of certain conditions (61 percent), such as high blood pressure (39 percent) and heart failure (21 percent).

“Knowing the risk factors for heart failure is vital—if you have one or more risk factors, you need to be particularly vigilant for symptoms,” said Sue Koob, MPA, Executive Director of PCNA. “It’s equally important to know that if you lead a healthy, active life beginning at a young age, you often can avoid these risk factors and prevent getting heart failure.”

Four Ways Every Day to Manage Heart Failure

According to the survey findings, over a quarter of U.S. adults (29 percent) don’t know that heart failure can be treated with medications, and one-third (32 percent) don’t know that many people with heart failure can lead a normal life. In addition, nearly two in five U.S. adults (38 percent) don’t know that eating salty foods can make heart failure worse.

The Fight Against Heart Failure program is designed to teach patients about the “*Four Ways Every Day*” to manage heart failure, including diet, exercise, lifestyle changes and medication.

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¹ Source: American Heart Association/American Stroke Association Heart Disease & Stroke Statistics 2007 Update

² (Source: NHLBI Disease and Condition Index: Heart Failure. Available at nhlbi.nih.gov/health/dci/Diseases/Hf/HF_All.html)

“Through this program, we believe we can help tackle this pervasive health problem, and bring hope to heart failure patients that they often can lead a normal, active life,” said Robert Weisenberger Lipetz, Executive Director of SCPC. “Most importantly, patients need to work closely with their clinicians to create a management plan that’s tailored to suit their personal needs—and follow that plan every day.”

About the American Association of Heart Failure Nurses

The American Association of Heart Failure Nurses (www.aahfn.org) is a specialty organization dedicated to advancing nursing education, clinical practice, and research to improve heart failure patient outcomes. Heart failure is our exclusive interest and passion. Our goal is to set the standards for heart failure nursing care.

We unite the full spectrum of nurses and other health professionals interested in heart failure. We serve as the interface for sharing ideas, translating research findings into practice, and setting priorities for the future. We welcome and value all professionals involved in heart failure care. We focus on patients across all environments of care from the hospital, to the clinic, to home.

About the Preventive Cardiovascular Nurses Association

The Preventive Cardiovascular Nurses Association (www.pcna.net) is the leading nursing organization dedicated to preventing cardiovascular disease through assessing risk, facilitating lifestyle changes, and guiding individuals to achieve treatment goals. PCNA's current membership approximates over 2,200 professionals throughout the U.S., Canada, Europe, Asia, Australia, and South America. Our membership continues to grow and represent the ever-increasing numbers of nurses in primary and secondary prevention.

About the Society of Chest Pain Centers

The Society of Chest Pain Centers (www.scpcp.org) is a non-profit international professional organization focused upon improving care for patients with acute coronary syndromes and other maladies.

The Society promotes protocol-based medicine, often delivered through a Chest Pain Center model to address the diagnosis and treatment of acute coronary syndromes, acute decompensated heart failure, and to promote the adoption of process improvement science by healthcare providers.

About the Survey

This Heart Failure study was conducted online within the United States on behalf of the American Association of Heart Failure Nurses (AAHFN), the Preventive Cardiovascular Nurses Association (PCNA) and the Society of Chest Pain Centers (SCPC) between December 27 and December 31, 2007 among 4,912 U.S. adults ages 18+.

Results were weighted as needed for age, sex, race/ethnicity, education, region, and household income. Propensity score weighting was also used to adjust for respondents' propensity to be online.

All sample surveys and polls, whether or not they use probability sampling, are subject to multiple sources of error which are most often not possible to quantify or estimate, including sampling error, coverage error, error associated with nonresponse, error associated with question wording and response options, and post-survey weighting and adjustments. Therefore, Harris Interactive avoids the words “margin of error” as they are misleading. All that can be calculated are different possible sampling errors with different probabilities for pure, unweighted, random samples with 100% response rates. These are only theoretical because no published polls come close to this ideal.

Respondents for this survey were selected from among those who have agreed to participate in Harris Interactive surveys.

The data have been weighted to reflect the composition of the U.S. adult population.

Because the sample is based on those who agreed to be invited to participate in the Harris Interactive online research panel, no estimates of theoretical sampling error can be calculated.

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