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#### **BOARD OF MANAGEMENT**

President: Barry Nixon Secretary: Amanda Adams Treasurer: Karen Saccuzzo Assistant Treasurer: Linda Macaulay Board Members: Mark Braybrook; Robyn Fennell; Gail Newton; Kevin Reid

**VISION:** To be an excellent and well recognised peer support organisation which assists in improving the emotional, social and physical wellbeing of people living with heart disease or a heart condition.

**MISSION:** To advise and promote associated support groups in conducting peer support activities for people living with heart disease, to ensure they have a better understanding of the impact of theirheart disease or condition; how they mightseek ongoing services and support in their local area; and how to raise funds to improve cardiac services.

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#### Message from the President



By the time this edition of Heartbeat Happenings is published we will have held our regular AGM via Zoom and although the current Board was only elected six months ago, we will have shared with you the Annual Report of Heartbeat Victoria Council Inc

for 2021-2022.

In it, we share positive news of HBVCI's financial position and our Branches and Affiliates share encouraging news regarding the resumption of some of their activities after two years of severe constraints on meetings and social activities.

Hello again everyone.

Arthur Fennell has recently resigned as a Board member and we thank him sincerely for joining the Board to assist us to navigate the early days of a new Board. Arthur has been involved with Heartbeat since its inception in 1984 and is a life member. I am sure he will continue to make a valuable contribution as a member of Goulburn Valley Branch.

We look forward to being able to have more direct involvement with providing peer support to recovering patients in hospitals as restrictions are hopefully relaxed in the coming months. Please contact us if you would like a copy of the Annual Report emailed or posted to you.

We are very excited to be meeting some of you in person at our planned Members' Gathering which is to be held in Bendigo on Sunday October 16. An invitation with all the details is included at the end of this newsletter.

At that gathering we hope that you will be able to get to know each other better, to learn and share ideas and for the Board to better understand how it can support members.

See you in Bendigo!

**Barry Nixon** 



# So what are these pieces of metal in my chest wall and wires in my heart doing? Are they working? Has the battery run out?

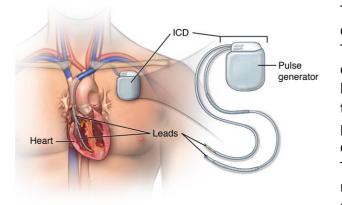
#### Dr. Ojas Mehta – Cardiologist - M.B.B.S / BMedSci / FRACP

In this article, I will be discussing in brief the role of Cardiac Implantable Electronic Devices (CIED). I implant these devices in patients almost every day of the week. These devices have truly been life changing and often life saving for patients with rhythm problems. There are two main types I will be discussing: the Pacemaker and the Defibrillator. At risk of oversimplification of what are now very complex functions of these devices, the main purpose of the Pacemaker is to prevent slow heart rates, while the main purpose of the Defibrillator is to treat fast and potentially lethal heart rates.

The history of CIEDs dates back to the late 1950s. Original pacemakers were very simple and involved a wire that went into the heart and a box that sat outside the body and for which the controls could be tweaked. This was certainly not cosmetically appealing but more importantly, the wires coming out through the skin provided a conduit for bugs to get through the skin and into the heart, with potentially lethal consequences. After many generations of product development and revolutionized technology, these devices have since been miniaturized and have incredible complexities in their programming. They have built in batteries that can last several years and various algorithms and features in order to optimize the timing and type of electrical impulse delivered by the device. These devices are now generally implanted near the shoulder with wires that travel through a vein that leads directly to the heart. The leads stay permanently while the device (or pulse generator) gets replaced when the battery runs out. When you attend a device clinic, the health of the leads and battery are both checked to ensure that things are in order.



A key concept to these devices is that they are constantly listening to electrical signals in the heart. There are special filters in the device software that enable it to filter out signals that may be coming from other parts of the body, such as electrical myopotentials from muscles. These devices are built this way so that they do not deliver an impulse if it can see that the heart has delivered an impulse (this is a simplification but will do for the purpose of this article).



The additional feature of the Defibrillator is to detect fast rhythms that are potentially lethal. There are times when these devices sense electromagnetic interference from outside the body that it interprets as the heart's rhythm. In these cases, there is a potential to inhibit the pacemaker, i.e., to stop the pacemaker from delivering an impulse when it should otherwise be. This can be a problem if one has 'no underlying rhythm' or in other words, dependent on the pacemaker for a heart rhythm. With a defibrillator

this can be more complicated and potentially lead to false shocks as the device may be tricked into thinking that the heart has a lethal rhythm and therefore delivers therapy that would otherwise be life-saving if it truly was the heart rhythm. People experience these shocks differently. If someone truly had this cardiac rhythm, called ventricular fibrillation, they would have likely lost consciousness already and therefore not felt the shock. However, if someone is awake and the device senses this through interference, a shock could be painful. Device manufacturers provide guidelines for what sources can potentially generate electromagnetic interference. For instance, welding equipment tends to be notorious for generating interference when used in certain conditions.

With further innovation, other types of CIEDs have come to market such as the leadless pacemaker (device that sits in the heart cavity with no wires or separate box that sits under the skin) and the subcutaneous defibrillator (device that sits on the outer chest wall with a wire that sits outside the rib cage, but not within the heart). There are certain advantages and disadvantages of each of these but similar concepts apply in terms of their functionality.

With the advent of COVID-19 and the contact and movement restrictions that came with the epidemic, the use of remote monitoring of these devices increased. Remote monitoring of a CIED allows the information that your device collects, including its own functionality, to be sent wirelessly, to a central location which can then subsequently be transmitted to your clinic for evaluation. There are limitations on what can be done remotely, many of which are deliberately in place so that functionality of your CIED cannot be changed remotely.

With the above, I hope I have been able to provide a general overview of these incredibly complicated devices. Fortunately, these devices have stood the test of time and their reliability and functionality have improved with every subsequent generation. These devices have truly been life changing for many patients and their caregivers, who have often witnessed a traumatizing event such as a cardiac arrest happen to a loved one.



### Heart to Heart

featuring one member's heart health experience

#### Heartbeat Victoria's President, Barry Nixon

Cardiovascular disease is the biggest killer in Australia and recent data from the National Health Survey tells us that well over half our adult population has 3 or more risk factors for coronary heart disease:

- 7 million men over the age of 18 (more than 76.5%) have three or more risk factors for heart disease
- 6 million women (over 62%) have three or more risk factors for coronary heart disease

The more risk factors you have, the greater your disease burden, and or risk of a heart attack or stroke in the future. Risk factors for coronary heart disease include:

- High blood pressure
- Depression
- Low level of physical activity

- Chronic kidney disease • High cholesterol-levels
- Smoking Diabetes •

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- Being overweight •
- Not enough vegetables in your diet
- Family history of cardiovascular disease •

I was ignorant of all things cardiac when I became a patient in 2006. I was being treated for high blood pressure, was overweight and had a low level of physical activity. I discovered my family history of heart disease in the hospital, while I was recovering from open chest surgery.

These days I volunteer as a Lived Experience Cardiac Educator and encourage all to check heart disease risk factors. GP Heart Health Checks are available if you're aged over 45, or over 30 for Aboriginal and Torres Strait Islander people. With your doctor you can:

- Check on your heart disease burden, and or risk factors
- Determine if you are at low, moderate, or high risk of having a heart attack or stroke in the next five years
- Take action to improve your heart health, which could include:
  - taking prescribed medication 0
  - changing aspects of your lifestyle 0
  - getting a referral to see another health professional. 0

My own health seriously improved once I started to alter lifestyle factors. When I became medication compliant and started to move. Salad vegetables became a major part of my diet, and I began walking - just 15 minutes a day at first. This small change, from sedentary to active, massively altered my disease burden.

My 17 years living with cardiac illness has convinced me, and my experience proves, that getting moving reduces heart disease. These days I am 36 kilos lighter and have gone full circle from sedentary to movement motivator.

Health authorities around the world recommend just 30minutes of walking every day to help:

- reduce the risk of coronary heart disease and stroke
- improve management of conditions such as:
  - hypertension (high blood pressure) 0
  - high cholesterol 0
  - joint and muscular pain or stiffness
  - diabetes.  $\cap$

I have included a short walk in the suggested activities for our Members' Gathering in Bendigo on October 16. Please wear weather appropriate clothing and shoes. I look forward to walking with you, sharing connection and hearing members experiences and sharing our cardiac journeys.



Your Board is continuing to hold meeting at least once a month via Zoom. Learning about Zoom and using it for meetings, where Board members are located all over Victoria, has certainly been one positive outcome from the pandemic.

The 2021-2022 Annual General Meeting of Heartbeat Victoria Inc was held on 14 September via Zoom. Although the most recent AGM was only held in February this year, that meeting had been rescheduled from September 2021, so the meetings have been closer together than usual.

The Board members elected at the February 2022 were elected for a period of two years and all are continuing in their positions with the exception of Arthur Fennell who has resigned his Board position but will continue as a life member and valued member of Heartbeat Goulburn Valley.

Thankyou Arthur!



affiliates if possible.

The positions of Assistant Secretary and Vice-President were not filled at the AGM and there are another two positions available on the Board should interested people seek to nominate. You don't have to wait until the next AGM as the Board can appoint additional members at any time.

Heartbeat Victoria's financial position continues to be sound and at the AGM it was resolved to support the Board's recommendation of keeping the affiliation and insurance fee for members of Affiliates and Branches at \$5 per member.

The Board is continuing its work to engage specialists to review and update the Heartbeat Victoria website and to engage with existing supporters and partners and to build new networks. New heart patients also continue to make contact via the Heartbeat phone number and are referred to sources of support, including local Heartbeat branches or

A focus for the coming months is the Members' Gathering to be held in Bendigo on Sunday October 16 and Board members are really looking forward to meeting members from across Victoria and to discussing how the Board can best support them.

## What's Happening

#### What's been happening at our branches and affiliates lately?

#### **Goulburn Valley**

HB GV Branch held its AGM following a dinner together at the Peppermill Inn Conference Room, Shepparton on September 5. Members of the Management Committee were all renominated and elected to their positions for 2022-23.

Anne Hughes, Improvement and Innovation Advisor at Goulburn Valley Health was guest speaker. Anne provided information about new services available and current projects, including Heart Failure Collaborative, Cardiac Ambassador and Rapid and Access Atrial Fibrillation Clinic. This was valuable information for members and it was very pleasing to see the development and implementation of new cardiac services for the Goulburn Valley area.



Peg Mellington - 31 years

A surprise for some members who have been with the Branch for many years, was the awarding of well-earned Certificates of Appreciation for their years of service to Heartbeat Victoria. The combined hours of support, care, understanding and empathy for others and contributions to fundraising activities over the years by these individuals is immeasurable. The importance of providing that listening ear and sharing experiences in cardiac peer support is difficult to measure.

One thing that does show the group its importance and value is the fact that HB GV Branch continues to service the community today in it thirty seventh year, thanks to all its committed members who care for each

other. Brian Heard, with wife Betty, has been driving to Shepparton from Numurkah for to

help others and bringing friends for Heartbeat activities for 20 years - just one example of member commitment.

#### Congratulations all!





Ian Powell - 25 years



Brian & Betty Heard - 20 years with President Lance Brown



#### Ballarat

#### A special thankyou for Heartbeat Ballarat from Ballarat Health Services Foundation

COMMUNITY CHAMPIONS: A very special thank you to the Heartbeat Ballarat & Heartbeat Ballarat Walking Group who donated eight sets of scales to our Heart Failure Clinic.

For patients with heart failure, their heart doesn't pump properly and they can get a build-up of fluid in their body. These patients need to monitor their fluid intake and their weight every day. This ensures that their medication is correct and to make sure that they don't need further treatment. These scales are so important in keeping patients stable and out of hospital. THANK YOU!



#### Bendigo



## Another special thankyou this time to Bendigo Heartbeat from Bendigo Health

*Heartbeat Victoria - Bendigo recently funded the purchase of 12 new cardiac holter monitors for Bendigo Health.* 

The purchase of the new Holter Monitor system has met all of Cardiology's expectations and more.

The demand for Holter monitoring in Diagnostic Cardiology has increased dramatically and with the purchase of 12 new active monitors has improved efficiencies in workflow, reduced cancellations and increased the capacity to grow.

The holter monitor system allows the cardiology team to investigate symptoms such as palpitations, fainting and dizziness. Monitoring your heart rate and rhythm over a 24 hour period, provides the Cardiology

Department with more information about how your heart rate and rhythm changes over the course of the day and if further treatment is required.

We thank Heartbeat Victoria Inc - Bendigo Branch for their continued support of our Cardiac area which services the entire Loddon Mallee region.

We would love to include news from all our branches or affiliates in the Summer edition of *Heartbeat Happenings*!

Do you have some interesting news and/or photos (we love photos) about your group's activities, to share?

Please send us your latest news for inclusion in the Summer edition of Heartbeat Happenings which will be published in December (please send to <u>Vivien@heartbeatvictoria.org.au</u> by no later than <u>Friday November 11, 2022</u>)





# INVITATION

### HEARTBEAT VICTORIA MEMBERS' GATHERING

All members from Heartbeat across Victoria are warmly invited to attend our first Members' Gathering on Sunday 16 October, 2022 in Bendigo.

The Gathering has been organised so that we can:

- Get to know each other better
- Learn and share information and ideas
- Help Heartbeat Victoria Council to better understand how it can best support members

Full details are as follows:

When: Sunday 16 October, 2022, 10.30am – 2pm

Where: Rotary Gateway Park Gateway Function Centre, High St, Kangaroo Flat

Catering: Morning tea and lunch provided

Optional lunchtime activity: A social stroll along the adjacent Bendigo Creek trail (weather permitting)

Plus: A fun raffle

We would love to see as many members as possible come along for a fun day of socialising, learning and sharing

Please **RSVP** (for seating and catering purposes) by <u>Friday September 30</u> to Barry

Email: barry@heartbeatvictoria.org.au

Phone or Text: 0447 377159