

### 2014 REPORT ON THE HEALTH OF CANADIANS



# **CREATING SURVIVORS**

More Canadians than ever before are surviving heart attacks and stroke. But a unique new poll of survivors reveals they face challenges and lack support to thrive to the fullest.



# CREATING MORE SURVIVORS

Remarkable progress has been made tackling cardiovascular disease in Canada over the past 60 years with death rates declining by more than 75 per cent nearly 40 per cent of which occurred in the last decade alone. This means that more than 90 per cent of Canadians who have a heart attack and more than 80 per cent who have a stroke and make it to hospital will now survive. Last year this resulted in 165,000 survivors — each one living, breathing proof that research and education can help save a life.

This is ample cause for celebration. But not cause for thinking the work is done.

We cannot lose sight of the fact that there are still 350,000 hospitalizations annually due to heart disease and stroke in Canada. Each year about 50,000 new cases of heart failure are diagnosed, 70,000 heart attacks occur, and 50,000 strokes send Canadians to emergency rooms across the country.

The Heart and Stroke Foundation 2014 Report on the Health of Canadians reveals that despite great gains there is still room for improvement to help the 1.6 million people currently living with heart disease and stroke recover to the fullest extent possible.

For this report we carried out a unique poll\* of 2,000 heart attack and stroke survivors (and loved ones who were able to answer on their behalf) to learn about health behaviours before and after a heart attack or stroke.



"This is the first time we — or perhaps any Canadian health organization have consulted with such a large group of both survivors and their loved ones," says Bobbe Wood, President, Heart and Stroke Foundation. "We wanted to find out more about their health behaviours both before and after they had a heart attack or stroke to get a better idea about the barriers they face to making and maintaining healthy changes, and what needs to be done to better support them to be successful."



more difficult, specifically maintaining a healthy weight, being physically active and reducing stress. In fact, the poll showed that for the survivors who needed to make those changes, more than half couldn't maintain the change and others didn't try at all.

It is a positive sign that many survivors are trying to adopt important health behaviours after a life-threatening and life-altering event — changes that can help them make the best recovery possible. But the poll clearly showed that too few survivors are able to make and

maintain the necessary changes to reduce their risk of experiencing another event, and it identified some of the barriers standing in their way.

According to the poll, the biggest barrier was related to motivation, which was defined as a lack of interest in making the changes, a feeling that the goals were unrealistic and that there was too much change required all at once.

Other significant barriers to change include:

- Not understanding what changes need to be made or how to make them.
- Challenges in physical or cognitive abilities since the event.
- Financial barriers, such as the costs of healthier foods and being physically active.
- Time constraints, including not enough time to exercise, or plan and prepare healthy meals.

### A major health scare can trigger positive changes in some, but barriers still exist

Our poll asked survivors how they viewed their health in general prior to a heart attack or stroke, and whether or not they were able to make and maintain healthy changes after their event. As a starting point, the poll revealed that two thirds of survivors believe that they had a somewhat or very healthy lifestyle prior to their heart attack or stroke. The poll also revealed that seven in 10 survivors feel their lifestyle is at least a little healthier since their heart attack or stroke — that they made some positive changes.

The areas where survivors were most successful in making and maintaining healthy changes include eating a healthier diet, quitting smoking and reducing alcohol consumption. Other changes were

#### THE VITAL STATS

- Heart disease and stroke are two of the three leading causes of death in Canada.
- Nine in 10 Canadians have at least one risk factor for heart disease or stroke.
- The leading cause of hospitalization in Canada is heart disease and stroke.
- Up to 80 per cent of premature heart disease and stroke is preventable.

# **HEALTHY CHANGES**

Many survivors report they now enjoy a healthier life overall, but some need more support

That the poll showed that seven in 10 survivors feel they now have a healthier life overall post-event is impressive. However, two in 10 said their lifestyle has not changed since their event and one in 10 said they are less healthy. This is an indication that some survivors need further help to make more healthy changes, and others would benefit from assistance to get them started on a healthy path.

"We cannot control all the factors that put us at risk for cardiovascular disease, but there are healthy changes people can make to largely prevent them from having a heart attack or stroke, including eating a healthy diet, being physically active, being smokefree, limiting alcohol consumption and managing stress," says Dr. Beth Abramson, Heart and Stroke Foundation spokesperson and author of Heart Health for Canadians. "And people living with cardiovascular disease should do the same to prevent them from



landing back in the hospital. But we need more research, more education, and an environment that supports these healthy behaviours."

### **HEALTHY BEHAVIOURS ALL CANADIANS CAN ADOPT TO MAKE HEALTH LAST**

- EAT A HEALTHY DIET. Follow the recommendations in Canada's Food Guide.
- BE PHYSICALLY ACTIVE. Thirty minutes most days of the week is all it takes to start, and everything counts.
- BE SMOKE FREE.
- LIMIT ALCOHOL CONSUMPTION. Women should limit themselves to no more than two drinks a day, to a weekly maximum of 10; and men to three drinks a day to a weekly maximum of 15.
- MANAGE STRESS. Identify the source of your stress, talk to friends and family and take time for yourself.

Take a risk assessment at heartandstroke.ca.



### HEART AND STROKE FOUNDATION RESEARCH CREATES SURVIVORS AND SUPPORTS THEIR RECOVERY

Since its inception, the Heart and Stroke Foundation has invested more than \$1.39 billion in heart and stroke research — making us the largest contributor to heart and stroke research in Canada after the federal government. Last year we increased our commitment by pledging an unprecedented \$300 million over 10 years to fund long-term research at leading hospitals and universities. By supporting research we are creating survivors through discoveries and advances such as these:

- In 1968 Foundation-funded researcher Dr. Henry Barnett conducted the first clinical trial for the use of acetylsalicylic acid (ASA) as prevention for stroke. That same year the first heart transplant surgery in Canada was performed.
- In 1980 a Foundation-funded researcher made a world-changing discovery when he found that the heart produces a hormone that helps to regulate blood pressure.
- In 1999 the Foundation funded research and undertook education and advocacy that led to the use of the clot-busting drug tPA, which, if accessed quickly, can help erase the effects of a stroke.
- In 2005 Foundation-funded research revealed that. unlike adults, newborn babies can accept hearts with non-compatible blood types. Approximately 200 babies are thriving today because of this discovery.
- In 2012 a study co-funded by the Foundation discovered a simple blood test (troponin T) that identifies patients at high risk of dying within one month of major surgery.
- In 2013 the Foundation announced increased funding and an expanded mandate for the Heart and Stroke Foundation Canadian Partnership for Stroke Recovery which brings together researchers and partner institutions in all parts of Canada to restore the lives of those affected by stroke.



# **SUPPORTING RECOVERY**

#### Rehabilitation works — for those who can get it

Cardiac rehabilitation plays a critical role in improving outcomes for heart attack survivors. It is well established that cardiac rehabilitation lowers mortality by as much as 25 per cent and improves the health of those who participate by helping them make healthy changes and stick to them. Rehabilitation programs provide support directly linked to behaviour change related to controllable risk factors.

Experts provide the support required for survivors to adopt and maintain healthy behaviour changes, and



the interventions are presented to enable participants to self-manage their health behaviours and therefore continue them. The other participants in the program reinforce that survivors are not alone, and may provide additional support. Both survivors and their family caregivers benefit from the resources that help them set realistic goals and learn the skills to realize them. Cardiac rehabilitation programs have been shown to:

- Improve survival
- Improve fitness
- Manage or lower blood pressure
- Lower cholesterol
- Increase smoking cessation rates
- Increase fruit and vegetable consumption
- Reduce and maintain weight loss
- Reduce anxiety levels.

Rehabilitation is also key to recovery for stroke survivors, to help them regain as much of their independence as they can and recover to the fullest extent possible. Canadians who experience a moderate to severe stroke benefit most from rehabilitation in a specialized stroke facility. And studies show that patients with mild to moderate effects of stroke who participate in cardiac rehabilitation programs can make significant gains.

In fact, our poll further supports the benefits of rehabilitation. For those who reported attending a rehabilitation program, eight in 10 said it had a major or moderate impact on helping them recover.

"We know rehabilitation works. The number one benefit of rehabilitation is that it keeps survivors surviving. It also makes people feel better, improves their quality of life, and reduces hospital readmissions as well as costs to the healthcare system," says Dr. Neville Suskin, Medical Director, Cardiac Rehabilitation and Secondary Prevention Program, St. Joseph's Health Care London, Ontario.

## **ACCESSING REHABILITATION**

#### Rehabilitation referral rates are unacceptably low

Rehabilitation cannot reverse all the effects of cardiovascular disease but it supports survivors in innumerable ways. Given the clear benefits of rehabilitation, the low number of survivors referred to these programs is troubling. Evidence shows that only about one-third of cardiac survivors who are eligible for rehabilitation are referred to a program. Only 19 per cent of all stroke patients are discharged from acute care to a rehabilitation facility and of the patients with moderate to severe stroke who would benefit most from rehabilitation, only 37 per cent are discharged to a rehabilitation facility. There are also gaps within the health system — including a lack of services and information — and there are barriers to accessing rehabilitation services.

According to our poll, of those who were recommended for rehabilitation, only six in 10 completed a program. The main reason people cited for not starting or completing a program was "I just didn't want to do it." What on the surface can be interpreted as a personal choice is actually an indication of other factors. Anxiety, depression, a perceived lack of control over their illness, and a lack of clear endorsement from their physician regarding the benefits of rehabilitation are all real barriers that prevent people from participating.

Other barriers to rehabilitation noted in the poll include that the system was too complicated, cost, the waiting list being too long, lack of space, or distance.

Dr. Suskin confirms that patients can face numerous obstacles that keep them from participating in a program and he notes that an inadequately resourced system is in itself a major barrier. "There are simply not enough programs and they should be a funded part of the health care system. They are not and they should be. After all, you do not have to pay for cardiac procedures."



Nadia Bender is neither a typical cardiac patient nor a typical cardiac rehabilitation participant. At 46 and in the best shape of her life, the fitness instructor and personal trainer had a heart attack. Yet even as a fitness expert with a good understanding of nutrition, she credits her participation in a rehabilitation program as an invaluable part of her recovery.

"It was scary to re-enter life after suffering a heart attack - wondering what my new normal would be like," said Nadia. "I found cardiac rehabilitation to be a safe and comfortable environment that taught me where my limits were so I could be set up for physical and emotional success. I would not have the confidence I have today without the support, encouragement and guidance from my instructors and fellow rehabilitation participants."

## MORE HOMECOMINGS

#### Coming home — what it means to survivors and their loved ones

Ensuring Canadians who experience a cardiac event or stroke survive is paramount, but this is only the first



step in what can be a long journey back home, and back to a better state of health. Tellingly, our poll revealed that more than eight in 10 survivors believe their family support had a positive impact on them achieving a healthy lifestyle.

When asked what coming home meant to them. survivors reported feeling that they had been given a second chance (six in 10), no longer taking their

health for granted (six in 10), and getting an opportunity to re-prioritize the important things in life (almost six in 10).

And these homecomings are equally meaningful to the loved ones of survivors. To them, it means most of all, being able to celebrate life's milestones together (more than half), more time with their loved one (almost half) and being given a second chance (more than half).

Neil Lefevre was at home watching hockey with his family when he felt the first symptoms of a heart attack. Just hours later, he watched the last part of the game from a hospital bed, with a life-saving stent in place. Neil was astounded by what had just happened and uncertain about the road ahead — but it was New Year's Eve, the perfect time to plan for change.

"I love my family - my wife, kids, grandkids, they mean everything to me. I was motivated and ready to focus on what I needed to do to get healthy. I was



"I was motivated and ready to focus on what I needed to do to get healthy."

- Heart attack survivor Neil Lefevre

determined to take full advantage of the opportunity that was in front of me.."

The support of his family and an effective cardiac rehabilitation program has given Neil the confidence and motivation to incorporate a healthy diet and consistent physical activity as part of his "new normal."

#### Creating more survivors than ever

The good news is that we have learned so much over the years about heart disease and stroke. Heart and Stroke Foundation-funded research has identified the leading modifiable risk factors to help with disease prevention, and has resulted in better medications and procedures that are creating more survivors than ever. Our public education efforts have gone a long way to helping Canadians recognize the signs of heart attack and stroke and take life-saving action. And we are ramping up our efforts to ensure that Canadians who experience heart disease or stroke receive the support they need to help them recover to the fullest extent possible.

### WHAT THE HEART AND STROKE FOUNDATION IS DOING TO TANGIBLY IMPROVE THE HEALTH OF ALL CANADIANS

At the Heart and Stroke Foundation, we have made it our mission to prevent disease, save lives and promote recovery. Our vision is to create a world where Canadians live healthy lives free of heart disease and stroke. To tangibly improve the lives of Canadians, we have outlined two main goals that we are striving to achieve by 2020:

- 1) Significantly improve the health of Canadians by decreasing their risk factors for heart disease and stroke by 10 per cent
- 2) Reduce Canadians' rate of death from heart disease and stroke by 25 per cent.

We have seen great improvements in cardiovascular health in Canada. We have worked tirelessly with our partners, year after year, and thanks to these efforts the death rate from cardiovascular disease has declined. This can largely be attributed to advances in prevention efforts (for example, smoking rates are at an all-time low of 16 per cent), surgical procedures and drug therapies many of which were supported by Heart and Stroke Foundation-funded research. But there is more to be done.

We will take a focused approach that concentrates our efforts on five main areas:

- 1) **RESEARCH:** We understand the vital role research plays in achieving our goals, and we take very seriously our responsibility of selecting the best and most impactful research projects. Through our rigorous peer-review process, we fund world class experts at some of the leading research centres ensuring the research builds upon past successes and helps to increase our global knowledge about heart disease and stroke.
- 2) ADVOCACY: The Heart and Stroke Foundation is dedicated to working with governments at all levels across the country to advocate for healthy public policies. Examples include the development of ever stronger tobacco control legislation and putting policies in place to decrease salt in our diets.
- 3) **HEALTH PROMOTION AND EDUCATION:** The Heart and Stroke Foundation is tangibly improving the lives of Canadians in many ways. We recognize the tremendous power in knowledge, and we work hard to provide Canadians with health information in various formats on a range of topics including heart-healthy recipes, practical tips for healthy living and how to control blood pressure.
- 4) **RESOURCES:** We believe that more than ever, Canadians must take their health into their own hands — so we are arming them with the tools they need to make and sustain healthy behaviours. We have developed a suite of online tools, such as the <30 Days™ app and My Heart&Stroke Risk Assessment™.
- 5) PARTNERSHIPS: We know that we can't do this alone, that we are stronger and more able to achieve greater impact when collaborating with governments, industry and like-minded non-profit organizations. Our current partnerships will continue to strengthen and we look for new opportunities to work side by side with others — including our volunteers and donors — towards our goals, and mobilizing all Canadians around improving cardiovascular health.

We are committed to continuing to increase our knowledge through research, to educating Canadians and building a better environment in which they can live in health, and to creating more survivors. But we can't do it alone. We need your continued help, through your generous donations, to keep doing this important work. Visit heartandstroke.ca for information or to make a donation.

\*The poll was conducted online by Environics Research Group between November 25 and December 3, 2013 with a sample of 2,010 Canadians. Respondents were screened to identify those who had survived a heart attack or stroke (n=465), or who had a living immediate family member or very close friend who had a heart attack or stroke in the past 10 years (n=1,545). Those who were loved ones of a survivor were asked to respond to questions about their perceptions of the survivor's experiences.