

Heart Failure Awareness Week 2022

#Freedom from Failure
#theFword





Heart Failure Awareness Week 2022

BSH Activities

#HFAW22

1 May BSH Patient Film

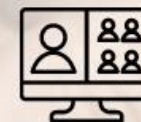


2-6 May BSH Nurse Forum Twitter Takeover of @WeNurses



5 May Webinar: Freedom from Failure – Heart Failure with preserved ejection fraction: The Position Statement for HCPs -

18:00-19:30





<https://twitter.com/i/status/15221556056491499>

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NHS
Mid and South Essex
NHS Foundation Trust

The Essex Cardiothoracic Centre

ESSEX

Heart Failure Awareness Week 2022
4th - 6th May 2022

Wednesday 4th May 2022
Publicity Campaign – The 'F' Word – Essex CTC/Basildon Hospital

Thursday 5th May 2022
Publicity campaign – BEAT HF – Essex CTC/Basildon Hospital

Friday 6th May 2022
Publicity campaign – BEAT HF – Broomfield Hospital

Essex Heart Failure Symposium and Dinner
Featuring Patient Stories

Proudly Supported by

Pumping Marvellous
The Heart Failure Charity

BRITISH SOCIETY FOR HEART FAILURE

St. Luke's Hospice

British Heart Foundation

AstraZeneca

ESC
European Society of Cardiology



CLICK the link

<https://twitter.com/091189579776/status/1521842091189579776>



Turn up the
feel good!



heart 105-106
turn up the feel good!

Heart Breakfast with
Jamie Theakston
& Amanda Holden
Weekdays from 6:30am



globalPLAYER

"PLAY HEART"

RADIO

globalPLAYER

"PLAY HEART"







Welsh parliament





Jersey

BSH NURSE FORUM HEART FAILURE AWARENESS WEEK COMPETITION

WIN DIGITAL/ONLINE TICKETS FOR THE 2022 BSH ANNUAL AUTUMN MEETING

A fantastic opportunity to showcase your service and efforts during
Heart Failure Awareness Week May 2nd – May 6th 2022

What do you need to do?

**Share/shout about your activities to promote the BSH Campaign
'The F Word – FREEDOM FROM HEART FAILURE'** including Focus Months

Awareness of the symptoms of heart failure including:

Fighting for breath

Fatigue

Fluid build up/Filling with fluid

Download posters
and videos from the
BSH Website:

[https://www.bsh.org.
uk/the-f-word/](https://www.bsh.org.uk/the-f-word/)

Judging criteria:

Community engagement
Organisational engagement
Social media reach
General media coverage

Email

info@bsh.org.uk

with evidence,
photos and
testimonials of your
efforts and
hopefully have some
fun doing it!

Join our free online webinar:

Freedom from Failure – Heart Failure with preserved ejection fraction. The Position Statement for HCPs

Thursday 5 May 2022 from 6pm - 7.30pm

 **British Society for Heart Failure #theF...** @BSHeartFail... · May 4

Join in with @BSHNurseForum Twitter take-over of @WeNurses to raise awareness of heart failure - 'Focusing on Freedom' - Monday to Friday of Heart Failure Awareness Week 2022

#FreedomFromFailure #TheFWord #HFAW22 #HeartFailure4Nurses



Day in the Life of a Heart Failure Nurse

@WeNurses Twitter,
Thursday 5 May

#HFAW22
#HeartFailure4Nurses
#FreedomFromFailure



Freedom from Failure Webinar 5th May 2022

from **BSHeartFailure**



Rosita Zakeri



Simon Williams



Jayne Masters





Liverpool

Launched new resource hub



MEMBERS PORTAL



WELLBEING

Support for our members, including activities, useful information and links



EDUCATION

E-learning and accredited courses



E-LIBRARY

BSH archives and access to journals



COMMITTEES

Latest updates and policies from BSH Committees



RESOURCE HUB

All the resources you could need



FRIENDS

Latest news from our corporate sponsors – Friends of BSH



SURVEYS

Share your opinion to improve outputs and inform practice



MEDSHR

Share and discuss clinical cases in the BSH discussion group



ITNP Industry News
@ITNPIndNews



It's [#HeartFailureAwarenessWeek](#) and we are proud to be featuring [@BSHeartFailure](#) in [#HealthAtHeart](#) premiering on [#WorldHeartDay](#), raising awareness of [#heartfailure](#) and the importance of [#hearthealth](#). Watch here and save a life bit.ly/3yc8fRp
[#FreedomFromFailure](#) [#TheFWord](#)



<https://twitter.com/i/status/1522157870359457792>



Get your Heart Failure Awareness Week 2022 posters!

#HFAW22

1 - 7 May 2022



HFpEF position statement



Position on Heart Failure with Preserved Ejection Fraction (HFpEF) – May 2022

Heart failure with preserved ejection fraction (HFpEF) is an increasingly recognised form of heart failure that has been described as an emerging epidemic. It presents many challenges to patients, healthcare services, and population health. The BSH HFpEF working group has produced this statement with the aims of increasing awareness of this syndrome, highlighting areas of uncertainty, and to promote discussion regarding measures that can support effective HFpEF diagnosis and care.

Prevalence

Among patients with a diagnosis of heart failure (HF), it is reported that up to 40 to 50% may have HFpEF.¹ HFpEF also accounts for an increasing proportion of HF-related hospitalisations.² There is a strong association between HFpEF, older age, and cardiovascular and non-cardiovascular comorbidities. **As life expectancy and comorbidity rates rise, the proportion of HF patients with HFpEF and resulting impact of HFpEF on healthcare services is projected to increase.**

Clinical presentation

Patients with HFpEF experience similar symptoms and signs to patients with HF with reduced ejection fraction (HFrEF), including breathlessness, fatigue, ankle swelling, and reduced quality of life. Some patients with HFpEF may not have symptoms at rest but develop moderate or severely limiting symptoms during exercise. It can be difficult to detect HFpEF in individuals who are obese or have co-existing cardiac and non-cardiac comorbidities with overlapping symptoms, including atrial fibrillation, COPD, and renal failure. **Since patients with HFpEF may present to different healthcare settings, all healthcare providers play a critical role in recognising patients with or at risk of HFpEF.**

Diagnosis

Diagnosis of HFpEF currently requires consideration of multiple criteria, including symptoms and signs of heart failure, a left ventricular ejection fraction $\geq 50\%$, raised natriuretic peptides, and objective evidence of cardiac structural and functional alterations consistent with HF.³ It is necessary to exclude other conditions that mimic HFpEF, such as cardiac amyloidosis or hypertrophic cardiomyopathy, and additional specialist tests, such as exercise echocardiography or cardiac catheterisation, may be needed to confirm HFpEF in equivocal cases. Normal levels of natriuretic peptides do not necessarily exclude a diagnosis of HFpEF, for example in patients with obesity and symptoms and signs of HF; however, further objective measures of cardiac dysfunction should be sought in these patients to improve diagnostic specificity. Equally, it is recognised that natriuretic peptides may be elevated due to conditions other than HF. **In order to achieve a timely and accurate diagnosis, the BSH working group proposes that all patients with suspected HFpEF (based on the presence of symptoms or signs of HF, elevated natriuretic peptide levels, and objective evidence of abnormal cardiac structure or function), should be referred to an appropriate specialist for evaluation.**

Film day!
Watch here

<https://twitter.com/i/status/1520780145585500161>

